

1 in 4 hospitalized heart failure patients with Medicare back in hospital within a month

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Almost a quarter of heart failure patients with Medicare are back in the hospital within a month after discharge, researchers report in *Circulation: Heart Failure*, a journal of the American Heart Association.

Each year, from 2004 through 2006, more than a half million [Medicare](#) recipients over age 65 went to the hospital for heart failure and were discharged alive. And each year, about 23 percent returned to the hospital within 30 days - signaling a need to improve care, researchers said. Readmission rates for all causes were almost identical all three years.

"I was hoping for improvement and was disappointed to find that was not the case," said Joseph S. Ross, M.D., M.H.S., the study's lead author and an assistant professor of geriatrics and palliative medicine at Mount Sinai School of Medicine in New York. "Despite the increased focus on the need to reduce readmissions, about a quarter of patients are back into the hospital within 30 days."

Heart failure occurs when a heart weakened by disease can no longer pump effectively. Before discharge heart failure patients should receive written information on:

- Eating a proper diet;
- Engaging in appropriate physical activity;

- Taking medicines correctly;
- Monitoring their weight; and
- Knowing what to do if their symptoms worsen.

However, the current fee system in the United States doesn't encourage a focus on prevention researchers said. In their analysis, they report that doctors and hospitals are financially awarded more for treating and hospitalizing patients, not for preventing hospitalizations through such strategies as disease management.

"Physicians aren't paid to coordinate care," Ross said. "That physician is busy seeing patients and that's what they're paid to do. If we want to deliver better care, this trend is what we need to address."

Another barrier to optimal care is a lack of communications between doctors who care for patients in the hospital and the patients' regular physicians who help patients manage their chronic disease, Ross said. The disruption to the continuum of care can negatively affect the patient.

The average age of patients in the study was 80 years and more than half (57 percent) were women. Most patients had multiple chronic diseases: 60 percent had heart arrhythmias; 73 percent had atherosclerosis or hardening of the arteries; 49 percent had diabetes; and 29 percent had kidney failure.

"Coming back and forth into the hospital isn't good for patients, and it isn't good for the healthcare system," said Ross, who plans to research the reasons [heart failure](#) patients are readmitted to the [hospital](#). "This is a tremendous challenge."

Findings of the study are important for patients and hospitals, Ross said.

"[Patients](#) should use this information to vet hospitals, to look at the quality of care delivered there and ask questions about the care they receive," he said. "Hospitals should consider the rehospitalization rate a grade which, from these findings, needs improvement."

Source: American Heart Association ([news](#) : [web](#))

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