

Richest and poorest people in Toronto hospitalized for different reasons

June 4 2012

Researchers who examined the income levels of patients at central Toronto hospitals found that people in the highest and lowest income brackets are being hospitalized for different reasons and that different hospitals serve different income groups.

More wealthy patients received same-day surgeries than low-income patients. In contrast, more low-income patients were hospitalized for [mental health issues](#), visited emergency departments for non-urgent issues and remained in [acute care hospital](#) beds while waiting to be transferred to more appropriate levels of care in the community such as nursing homes.

This report will enable many Toronto hospitals and health care stakeholders to see the socioeconomic profile of patients for the first time, said Dr. Rick Glazier, one of the lead authors of the study.

Once they have that information, they can see whether patient outcomes are linked to incomes, he said. This also gives them the opportunity to tailor care to the needs of their current patient population and to work with others to plan health services appropriate for the community.

"We want a universal [health care system](#) that helps everyone be healthy, regardless of how much money they earn," said Dr. Glazier, a researcher at the Centre for Research on Inner City Health at St. Michael's [Hospital](#) and a senior scientist at the Institute for Clinical Evaluative Sciences.

"But until we actually look at social differences among patients, it's

impossible to say if hospital care is equitable or if hospitals have the proper resources to respond to the patients they serve."

Dr. Glazier said the statistics point to the social causes of disease and strains on the health system.

"Very low-income people are using the parts of the [health care](#) system that are in greatest crisis," he said. "It's all the more reason to think broadly about what keeps people healthy in the first place. What health supports do wealthy groups enjoy that those with lower incomes lack? Access to [primary health care](#), the ability to pay for healthy foods and medicines and to live in a healthy place where you can receive home care if you need it? We think that addressing upstream areas like these will likely make an impact on hospital use."

The researchers examined data on all patients admitted between 2008 and 2010 to 20 hospitals in the Toronto Central Local Health Integration Network.

They found hospitals fell into three categories: those, including St. Michael's, who treat high-income and low-income patients in the same numbers; those who treat mainly low-income patients; and those who treat mainly high-income patients. In all of the hospitals surveyed, middle-income patients were served the least.

Among their other findings:

- In almost every hospital, surgical patients had higher incomes than medical patients
- More wealthy patients than poor patients had day surgery.
- More low-income patients than high-income patients were admitted for mental health services at almost every hospital

- Patients designated as waiting for "alternate level of care," meaning they occupy an acute hospital bed but do not require the intensity of resources or services provided in that setting, were more likely to have low incomes than high incomes. In most of the hospitals, ALC patients had lower incomes than the hospital's overall patient population
- Overall, more low-income patients visited emergency departments than high-income [patients](#) for non-urgent reasons

Provided by St. Michael's Hospital

Citation: Richest and poorest people in Toronto hospitalized for different reasons (2012, June 4) retrieved 27 April 2024 from

<https://medicalxpress.com/news/2012-06-richest-poorest-people-toronto-hospitalized.html>

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.