

After hospital discharge, other ills may land seniors back in again

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Expert urges medical staff, families to recognize 'post-hospital syndrome.'

(HealthDay)—The days and weeks after hospital discharge are a vulnerable time for people, with one in five older Americans readmitted within a month—often for symptoms unrelated to the original illness.

Now, one expert suggests it's time to recognize what he's dubbed "post-[hospital](#) syndrome" as a [health condition](#) unto itself.

A [hospital stay](#) can get patients vital or even life-saving treatment. But it also involves physical and mental stresses—from poor sleep to drug side effects to a drop in fitness from a prolonged time in bed, explained Dr. Harlan Krumholz, a cardiologist and professor of medicine at Yale University School of Medicine in New Haven, Conn.

"It's as if we've thrown people off their equilibrium," Krumholz said. "No matter how successful we've been in treating the acute condition, there is still this vulnerable period after discharge."

Disrupted sleep-[wake cycles](#) during a hospital stay, for instance, can have broad and lingering effects, Krumholz writes in the Jan. 10 issue of the *New England Journal of Medicine*.

Sleep deprivation is tied to physical effects, such as poor digestion and lowered immunity, as well as dulled [mental abilities](#).

"The post-discharge period can be like the worst case of jet lag you've ever had," Krumholz said. "You feel like you're in a fog."

There's no way to eliminate what Krumholz called the "[toxic environment](#)" of the hospital stay. Patients are obviously ill, often in pain, and away from home. But Krumholz said hospital staff can do more to "create a softer landing" for patients before they head home.

Staff might check on how patients have been sleeping, how clearly they are thinking and how their [muscle strength](#) and balance are holding up, Krumholz said.

Involving family members in discussions about after-hospital care is key, too. "Patients themselves rarely remember the things you tell them," Krumholz noted—whether it's from [sleep deprivation](#), medication side effects or other reasons.

Previous research has shown that about 20 percent of older Americans on Medicare are readmitted to the hospital within 30 days. And more often than not, that return trip is not for the illness that originally landed them in the hospital. Instead, infections, accidents and gastrointestinal disorders are among the common reasons.

Take heart failure, for example. It is a common cause of hospitalization for older Americans, but when those patients are readmitted within 30 days, heart failure is the cause only 37 percent of the time, according to a study previously published in the [New England Journal of Medicine](#).

One expert, Dr. Amy Boutwell, said the editorial underscores a "very important" point.

"We have to think about discharge from the hospital in a whole new way," said Boutwell, president of Collaborative Healthcare Strategies Inc., which works on projects to improve care and prevent hospital readmissions.

"The good news is most hospitals across the country are now paying attention to this," said Boutwell, who is also an internist at Newton-Wellesley Hospital in Newton, Mass.

For several years, programs have aimed to cut avoidable hospital readmissions. Boutwell co-founded one, called STAAR (State Action on Avoidable Rehospitalizations), which involves hospitals in Massachusetts, Michigan, Ohio and Washington state.

And hospitals now have a financial motivation to cut readmissions, Boutwell added. Last year, Medicare began penalizing hospitals with higher-than-expected rates of readmission within 30 days of patients' original stay.

Hospitals vary in the specific steps they take to reduce readmissions, Boutwell said. But one example is that centers are trying to ensure that families understand what has to happen when the patient goes home, and helping them with "logistics"—such as making appointments for follow-up care and sending patients home with an adequate supply of prescription medications.

"Those are the types of things we've traditionally left up to families," Boutwell said.

Whether it's necessary to officially recognize a "post-hospital syndrome" is not clear, said Boutwell. But she praised Krumholz' article for helping to bring the issue to the attention of more doctors.

For now, Krumholz said hospital [patients](#) and their families can be aware that the few weeks after discharge are a "period of risk and vulnerability."

So it would be wise to take some precautions, he said. These include not driving a car for at least a week or so, and steering clear of people with flu-like infections, since your immune function may be compromised.

More information: Learn more about taking care of yourself after hospitalization from the [U.S. Agency for Healthcare Research and Quality](#).

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