

Poverty tied to increased respiratory hospitalization rate

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(HealthDay)—Household income is tied to significant differences in hospitalizations for ambulatory-care-sensitive respiratory conditions, according to a study published in the September/October issue of the *Annals of Family Medicine*.

Aaron J. Trachtenberg, D.Phil., from the University of Manitoba in Canada, and colleagues used administrative data from the city of Winnipeg in Manitoba to identify all adults aged 18 to 70 years with obstructive airway disease (chronic [obstructive pulmonary disease](#) or asthma). Patients were categorized into census-derived income quintiles based on [average household income](#).

The researchers found that of the 34,741 patients identified with

obstructive airway disease, 2.1 percent (n=729) were hospitalized with a related diagnosis during a two-year period. Hospitalization was more likely among patients with a lower income than among peers with the highest income. The effect of socioeconomic status remained virtually unchanged after the researchers controlled for every other variable they studied. Patients in the lowest-income quintile had approximately three times the odds of hospitalization compared with those in the highest-income quintile (odds ratio, 2.93) in a fully adjusted model.

"Our findings suggest that we look beyond the health care system at the broader social determinants of health to reduce the number of avoidable hospitalizations among the poor," conclude the authors.

More information: [Abstract](#)
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