Inaccuracy in administrative hospital coding data

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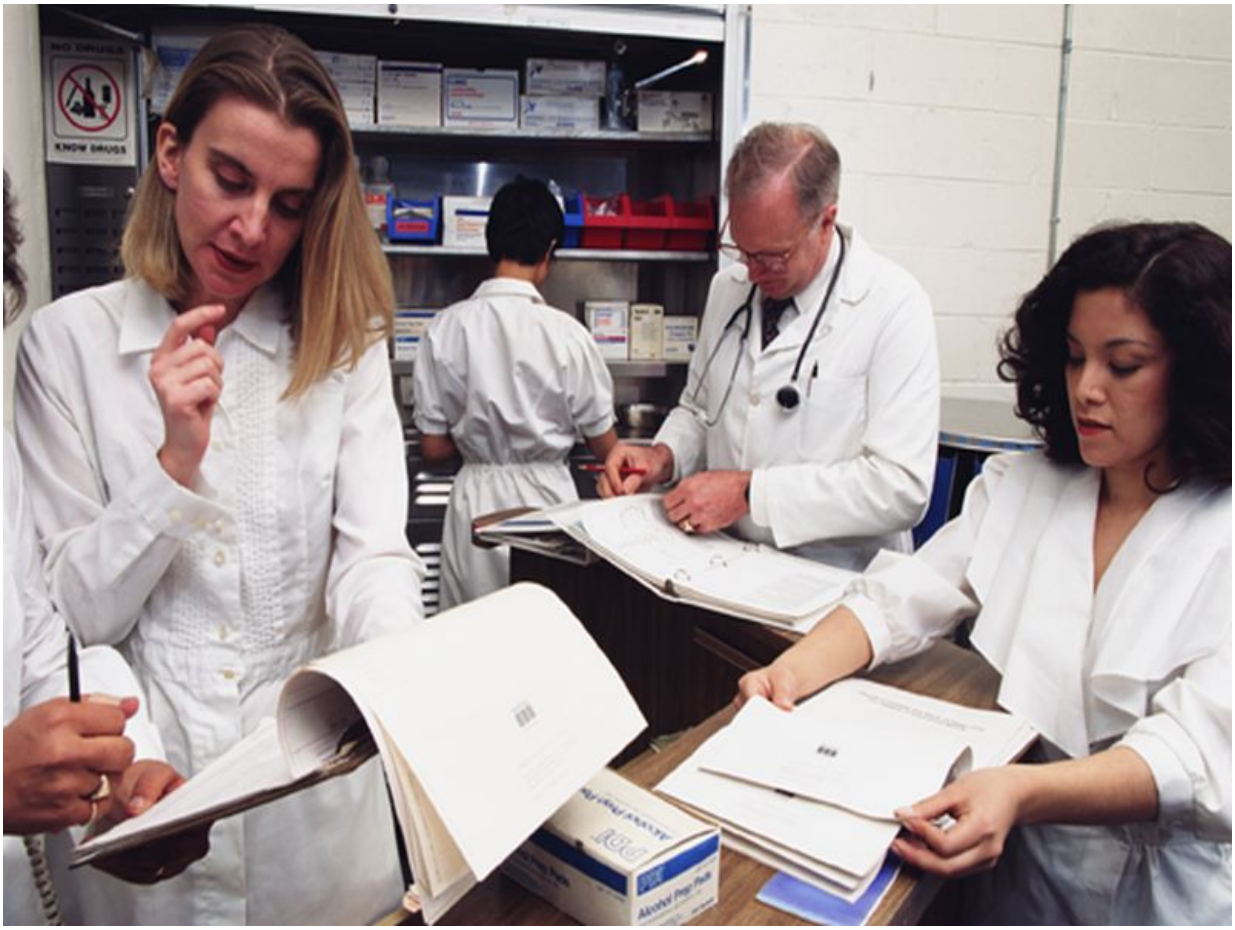

(HealthDay)—Inaccurate coding can introduce biases in studies based on

administrative data, according to research published online May 16 in *The BMJ*.

Linxin Li, and Peter M. Rothwell, M.D., Ph.D., from the University of Oxford in the United Kingdom, examined the accuracy of coding of admissions for stroke among patients with clinically confirmed acute stroke in nine general practices in Oxfordshire (the Oxford Vascular Study [OXVASC]).

The researchers ascertained 2,373 episodes of acute stroke among a study population of 92,728. Of the 319 strokes missed by coding, there was no bias in distribution of weekend versus weekday admission. Of the 1,693 admissions for stroke identified by coding, after case adjudication, 62.3 percent were confirmed to be acute stroke. Among the 638 false-positive coded cases, patients were more likely to be admitted on weekdays (41.0 percent) than weekends (26.5 percent) (P coding cases (P

"Any conclusion based on administrative data alone should be interpreted with caution," the authors write.

More information: Full Text
Editorial