

Hospital admissions rising for elderly patients with Parkinson's disease

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Although treatment for Parkinson's disease (PD) is significantly extending the lives of patients, these patients are now being admitted to hospitals at increasing rates. In a study reported in the *Journal of Parkinson's Disease*, researchers in Ireland have found that the top five reasons for hospital admission of PD patients are urinary tract infections, pneumonia, lower respiratory tract infections, aspiration pneumonia and femur fracture. More troubling is the stark increase in PD patients requiring long-term nursing home care on discharge, with 27% of the over 65 group discharged to a nursing home compared to 12% admitted from a nursing home.

Using data from the Hospital Inpatient Enquiry (HIPE) system in Ireland between 2009 and 2012, 12,437 discharges of PD patients over 65, as well as 1,223 discharges of PD patients under 65, were examined. The top 10 principal diagnoses at admission, the top 10 principal procedures conducted, admission sources and routes, and final discharge destinations were tabulated.

The clear majority of hospital admissions were via the emergency department (87%). The most common reasons for admission for PD patients of all ages were acute lower respiratory infection, urinary system disorders, pneumonia (organism unspecified), pneumonitis due to solids and liquids ([aspiration pneumonia](#)). Femur fractures was among the top five reasons for hospital admission in those over 65. Investigators also found a steady rise in acute hospital admission rates for the over-65 age group.

For PD patients, the in-hospital mortality rate was 8%, significantly higher than that previously documented for non-PD hospital admissions of the same age. Over the time of the study, the number of PD patients requiring long-term [nursing home care](#) more than doubled in all age categories.

The researchers note that many of the reasons for [hospital admissions](#) can be targeted for intervention initiatives to prevent or treat these conditions before a hospital admission is required, thus reducing stress on emergency departments, lengthy in-patient stays, and potentially keeping patients in their own homes longer.

Because the number of people with PD in Ireland alone is predicted to double by 2030, the stresses on the acute hospital sector, including already-stressed emergency departments, will present major challenges. According to lead investigator Olive Lennon, PhD, from the School of Public Health, Physiotherapy and Sports Science at University College Dublin, Dublin, Ireland, "It is clear from this research that focus and investment is required at primary and community care levels to maintain people with PD in good health and continuing to live in their own homes and communities."

Co-investigator Catherine Blake, PhD, of the same institution, adds, "On a positive note, a lot of the causes of admission to hospital in PD in Ireland are preventable. Currently care delivered is disjointed and it is this fragmented approach that allows individuals to become seriously ill and require hospital admission. Integrated care pathways for community-dwelling adults with chronic neurological diseases, not just PD, should form the bedrock for health and wellness in this population going forward."

More information: Bróna Kelly et al. Acute Hospital Admissions of Individuals with a Known Parkinson's Disease Diagnosis in Ireland

2009–2012: A Short Report, *Journal of Parkinson's Disease* (2016).
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