

Study finds decline in emergent hospitalizations during early phase of COVID-19

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Early reports have shown the COVID-19 pandemic has resulted in a decline in patients seeking outpatient medical care. Whether and how the pandemic has impacted patients seeking care for emergent conditions—emergent medical, surgical and obstetric hospitalizations—remains unclear, though emerging studies, including one from colleagues at Beth Israel Deaconess Medical Center (BIDMC) demonstrate a reduction in patients seeking care for heart attack, stroke and cancer care.

In a new study published today in the *Journal of General Internal Medicine*, researchers from BIDMC report on the decline of emergent medical, surgical and obstetric hospitalizations at the [medical center](#) during the six-week period following the week of the declaration of the COVID-19 [public health emergency](#) in Boston in mid-March 2020. Comparing data from the same period in 2019, the authors found a 35 percent decrease in weekly hospitalizations overall and 45 percent decrease in weekly hospitalizations that were not related to COVID-19.

"Our findings suggest that patients with life-threatening conditions may have been avoiding the [hospital](#) in the early wave of COVID-19 which may help explain recent reports of increased mortality from diseases other than COVID-19 during this time," said Timothy Anderson, MD, the study's lead author and a general internist and health services researcher in the Division of General Medicine at BIDMC and Instructor

in Medicine at Harvard Medical School. "Continuing to follow trends in mortality and hospital use after the COVID surge will be important for determining if patients who delayed care are now suffering worse health and may help inform wider public health responses to future waves of the epidemic."

The researchers identified all hospital admissions from BIDMC between January 1, 2019, and April 25, 2020. Then, the researchers examined the weekly incidence of overall admissions to emergent medical, surgical, obstetric, and psychiatric services, as well as hospitalizations for COVID-19 in 2020. After conducting a time-series analysis comparing the same six week periods, year against year, the authors found there were significantly fewer weekly hospitalizations for emergent medical conditions. They report a 51 percent decrease in acute medical conditions, such as cardiac arrest or stroke; a 31 percent decrease in acute surgical conditions, such as appendicitis; a 55 percent decrease in chronic disease exacerbations, such as diabetes or asthma and 13 percent decrease in obstetric hospitalizations.

"We are able to see from the data that the number of hospitalizations were down, but it's not clear why. People may have decided not to seek care out of fear of contracting the virus, but it's also possible that some people, such as college students, left Boston at the start of the epidemic, reducing the overall population," said Shoshana Herzig, MD, MPH, Director of Hospital Medicine Research at BIDMC, Associate Professor of Medicine at Harvard Medical School and senior author on the study. "Further studies are needed to determine the impact of the COVID-19 pandemic on long-term outcomes of patients delaying care for acute and chronic conditions."

In addition to Anderson and Herzig, co-authors include Jennifer P. Stevens, Adlin Pinheiro, and Stephanie Li, all of BIDMC.

More information: Timothy S. Anderson et al, Hospitalizations for Emergent Medical, Surgical, and Obstetric Conditions in Boston During the COVID-19 Pandemic, *Journal of General Internal Medicine* (2020). DOI: [10.1007/s11606-020-06027-2](https://doi.org/10.1007/s11606-020-06027-2)

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