

# How common is readmission after hospitalization for COVID-19?

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For patients discharged after hospitalization for COVID-19, death or readmission was common, with about 11% being readmitted or dying within 30 days, according to new research published in *CMAJ* (*Canadian*

*Medical Association Journal*).

Hospital readmissions are known to be common and costly. Knowing the readmission rate after COVID-19 hospitalization and understanding the related resource implications can help with health care planning.

"Identifying [risk factors](#) for early readmission or death is important for both the in-hospital clinical team and the [primary care physician](#) who reassumes care after discharge, as well as for transition coordinators deciding which patients may benefit from additional resources at discharge to optimize outcomes," writes Dr. Finlay McAlister, University of Alberta, with coauthors.

Researchers looked at data on all adults hospitalized in Alberta and Ontario for SARS-CoV-2 between January 1, 2020, and September 30, 2021. Ontario and Alberta make up half the population of Canada. Of the total 843 737 people who tested positive for SARS-CoV-2 by PCR test, 5.5% (46 412) of adults were hospitalized, the average length of stay was 8 days, 14% were in the [intensive care unit](#) at some point during hospitalization, 18% (8496) died in hospital, and 11% who were discharged alive were readmitted or died within 30 days of discharge. Almost half of those readmissions were for pulmonary problems.

Although the rates of in-hospital death were higher and the lengths of stay were longer for patients with COVID-19 than for patients with other respiratory infections, the rates of readmission were not higher than for other [medical conditions](#).

"Despite fears of high rates of [readmission](#) after COVID-19 hospitalizations, we found that outcomes in the 30 days after discharge were consistent with admissions for other medical diagnoses," write the authors. "Thus, current system approaches to transitioning patients from hospital to home do not appear to need adjustment."

Patients who died were older, had multiple comorbidities, were more likely to be male, were discharged with [home care](#) or to a long-term care facility, and had more previous hospitalizations and emergency department visits.

Of the patients admitted with COVID-19 in both provinces, 91% in Alberta and 95% in Ontario were unvaccinated, which underscores the effectiveness of vaccines.

The authors note that their outcome data do not capture cases of "long COVID," which may not require hospitalization but can nevertheless affect health care usage.

"Future research should determine other system effects for COVID-19 survivors, particularly with respect to postacute COVID-19 symptomatology," write the authors.

**More information:** The risk of death or unplanned readmission after discharge from a COVID-19 hospitalization in Alberta and Ontario, *Canadian Medical Association Journal* (2022). [DOI: 10.1503/cmaj.220272](#)

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