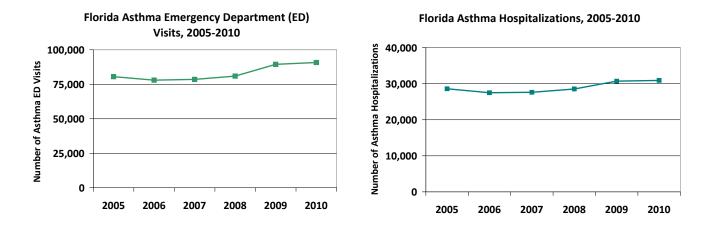
Asthma Emergency Department Visits and Hospitalizations in Florida

This fact sheet presents emergency department (ED) visits and hospitalizations from 2005-2010 for cases with asthma listed as the primary diagnosis (ICD-9 code 493). Asthma is a public health priority as prevalence, costs related to asthma, and rates of ED visits and hospitalizations are increasing in Florida and nationally.

Asthma is a chronic lung disease characterized by inflammation of the airways and recurring attacks of symptoms such as wheezing, coughing, and chest tightness. ED visits and hospitalizations are indicators of poorly controlled asthma, because asthma symptoms can be controlled with proper education, clinical treatment, medication regiment, and environmental management.

2005-2010 Asthma Trends

The number of asthma ED visits increased by 12.7% from 80,518 in 2005 to 90,770 in 2010. The number of asthma hospitalizations increased by 8.1% from 28,592 in 2005 to 30,910 in 2010. During this time, the total charges associated with these visits incurred by Florida's healthcare system increased by 99.6% and 58.8% respectively.¹ More detailed information about the charges associated with asthma ED and hospitalization visits can be found in the report, *Exploring the Financial Burden of Asthma in Florida: Charges Associated with Asthma Emergency Department Visits and Hospitalizations*.



2010 Asthma Data

In 2010, there were 90,770 ED visits and 30,910 hospitalizations in Florida with asthma listed as the primary diagnosis. The crude rate of asthma ED visits in Florida was 48.31 per 10,000 Floridians, and the crude rate of asthma hospitalizations in Florida was 16.45 per 10,000 Floridians (Table 1).

Females had a higher rate of ED visits and hospitalizations (50.64 and 20.52 per 10,000 respectively) than males (45.89 and 12.22 per 10,000 respectively). Whites had significantly lower rates of ED visits and hospitalizations than the other race groups. Hispanics had a higher rate of ED visits than non-Hispanics, but the hospitalization rates for these two groups were similar, as shown in table 1. For more detailed descriptions by age, please view the <u>Adult Asthma in Florida, 2000-2010</u> and <u>Childhood Asthma in Florida, 2006-2010</u>.

County-Specific Asthma Data

County-level data, including counts, crude rates, age-adjusted rates, and average daily counts of asthma ED visits and hospitalizations are available from the Environmental Public Health Portal, at www.FloridaTracking.com.

¹ Exploring the Financial Burden of Asthma in Florida: Charges Associated with Asthma Emergency Department Visits and Hospitalizations. Available: <u>http://www.doh.state.fl.us/Environment/medicine/Asthma/FinancialBurdenReport.pdf</u>

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		Asthma ED Visits		Asthma Hospitalizations	
_		Counts	Crude Rates	Counts	Crude Rates
Gender	Female	48,490	50.64	19,649	20.52
	Male	42,280	45.89	11,261	12.22
Race	White	48,290	31.90	19,435	12.84
	Black	33,659	108.34	8,669	27.90
	Other	8,821	161.46	2,806	51.36
Ethnicity	Hispanic	21,875	52.79	6,692	16.15
	Non-Hispanic	67,993	46.43	23,849	16.28
Age Group	0 - 4	18,003	158.43	4,281	37.67
	5 – 17	24,641	82.48	3,671	12.29
	18 - 34	20,189	50.93	2,461	6.21
	35 – 49	15,186	40.69	5,312	14.23
	50 – 64	8,931	24.50	6,929	19.01
	65 – 79	3,027	13.40	5,397	23.89
	80 +	793	7.45	2,859	26.86
TOTAL	TOTAL	90,770	48.31	30,910	16.45

Table 1. Counts and Rates of Emergency Department Visits andHospitalizations with Asthma Listed as the Primary Diagnosis, Florida, 2010

Repeat Patients

People with asthma who have poor asthma management have a high number of repeat visits to the ED or hospital. To identify the number of Florida patients with more than one visit in 2010, a single data set was created by combining the ED visit and the hospitalization datasets for that year. Individual patients were identified by matching masked, or de-identified, social security numbers (SSN). Patients with unknown SSN were removed from the analysis because it cannot be determined if these individuals had one or more visits.

From this data set, there were a total of 81,158 identifiable patients that had an ED visit or hospitalization with asthma listed as the primary diagnosis in 2010. The majority of these patients (82.9%) had only one ED visit OR one hospitalization during the year. The remainder of these patients (17.1%) had two or more visits, accounting for 36.0% of all asthma ED visits or hospitalizations and 35.9% of the total charges.¹

Individuals and the health care system as a whole can greatly benefit from improvements in asthma control and reduction in repeat visits. Hospitals can assess their readmission rates to identify individuals most in need and work with clinicians and community partners (schools, childcare centers and non-profits) to provide targeted care. The National Heart, Lung, and Blood Institute's *Expert Panel Report 3: Guidelines for the Diagnosis and Management of Asthma* recommends that clinicians provide patients with necessary medications and education on how to use them, a referral for a follow up appointment, and instruction in an asthma discharge plan for recognizing and managing relapse of the exacerbation. It is also recommended that emphasis be placed on the need for continual, regular care in an outpatient setting. A referral to an asthma self-management education program should also be considered.