

Table 9B.4.2: Hospital Discharges for Arthritis Conditions for Persons Age 18 and Over, by Age, United States 2011

HOSPITALIZATIONS [1]

	Total Persons (in 000s)					Rate Per 100 Persons [2]				
	18-44	45-64	65-74	75 & over	Total	18-44	45-64	65-74	75 & over	Total
Hospitalizations for Arthritis and Other Rheumatic Conditions (AORC) Among Adults Age 18 and Older, 2011										
Osteoarthritis and allied disorders	87.2	917.6	798.0	1,360.2	3,161.1	0.1	1.1	3.7	7.3	1.3
Rheumatoid arthritis	39.5	174.2	137.7	190.9	542.2	< 0.1	0.2	0.6	1.0	0.2
Gout and other crystal arthropathies	33.8	234.7	221.6	383.4	873.4	< 0.1	0.3	1.0	2.1	0.4
Joint pain, effusion, and other unspecified joint disorders	115.1	329.2	211.7	368.4	1,024.4	0.1	0.4	1.0	2.0	0.4
Spondylarthropathies	50.8	204.3	117.5	166.5	539.0	< 0.1	0.2	0.5	0.9	0.2
Fibromyalgia	91.5	221.8	81.0	54.6	448.8	0.1	0.3	0.1	0.3	0.2
Diffuse connective tissue disease (Sjögren's syndrome, SSC, S)	78.5	115.3	48.4	41.5	283.6	0.1	0.3	0.4	0.3	0.2
Carpal tunnel syndrome	*	*	*	*	39.4	*	*	*	*	0.0
Soft tissue disorders (excluding back)	112.6	237.0	126.1	200.1	675.5	0.1	0.3	0.6	1.1	0.3
Other specified rheumatic conditions	166.2	348.2	177.3	256.3	947.7	0.1	0.4	0.8	6.2	0.4
Total AORC Diagnoses	582.5	2,135.2	1,502.5	2,396.4	6,614.0	0.5	2.6	6.9	12.9	2.8

MEAN LENGTH HOSPITAL STAY AND AVERAGE PATIENT CHARGES [1]

	18-44	45-64	65-74	75 & over	Total
Osteoarthritis and allied disorders (number in 1,000s)					
Mean LOS (days)	4.0	4.2	4.4	5.1	4.6
Mean hospital charges (in 000s) [3]	\$ 39.59	\$ 45.81	\$ 46.43	\$ 38.43	\$ 42.62
Total hospital charges (in billion \$s)	\$ 3.5	\$ 42.0	\$ 37.1	\$ 52.3	\$ 134.7
Rheumatoid arthritis (number in 1,000s)					
Mean LOS (days)	4.3	5.0	5.3	5.4	5.2
Mean hospital charges (in 000s) [3]	\$ 34.57	\$ 45.28	\$ 46.70	\$ 38.86	\$ 42.59
Total hospital charges (in billion \$s)	\$ 1.4	\$ 7.9	\$ 6.4	\$ 7.4	\$ 23.1
Gout and other crystal arthropathies (number in 1,000s)					
Mean LOS (days)	4.8	5.3	5.4	5.5	5.4
Mean hospital charges (in 000s) [3]	\$ 40.07	\$ 46.79	\$ 46.98	\$ 39.87	\$ 43.54
Total hospital charges (in billion \$s)	\$ 1.4	\$ 11.0	\$ 10.4	\$ 15.3	\$ 38.0
Joint pain, effusion and other unspecified joint disorders (number in 1,000s)					
Mean LOS (days)	4.8	4.9	5.0	5.3	5.1
Mean hospital charges (in 000s) [3]	\$ 35.35	\$ 40.74	\$ 42.75	\$ 35.18	\$ 38.55
Total hospital charges (in billion \$s)	\$ 4.1	\$ 13.4	\$ 9.1	\$ 13.0	\$ 39.5
Spondylarthropathies (number in 1,000s)					
Mean LOS (days)	3.7	4.2	4.9	5.3	4.6
Mean hospital charges (in 000s) [3]	\$ 54.45	\$ 58.78	\$ 60.14	\$ 43.54	\$ 53.98
Total hospital charges (in billions)	\$ 2.8	\$ 12.0	\$ 7.1	\$ 7.2	\$ 29.1
Fibromyalgia (number in 1,000s)					
Mean LOS (days)	4.3	4.5	4.8	5.0	4.6
Mean hospital charges (in 000s) [3]	\$ 29.78	\$ 37.55	\$ 40.04	\$ 36.11	\$ 36.23
Total hospital charges (in billion \$s)	\$ 2.7	\$ 8.3	\$ 3.2	\$ 2.0	\$ 16.3
Total AORC Diagnoses (number in 1,000s)					
Mean LOS (days)	4.9	4.8	5.0	5.3	5.0
Mean hospital charges (in 000s) [3]	\$ 42.19	\$ 47.38	\$ 47.75	\$ 39.09	\$ 44.00
Total hospital charges (in billion \$s)	\$ 24.6	\$ 101.2	\$ 71.7	\$ 93.7	\$ 291.0
Proportion Total Hospital Charges Attributed to AORC Hospital Stays					
	10%	23%	28%	28%	23%

* Estimates do not meet standards for reliability.

[1] Source: HCUP Nationwide Inpatient Sample (NIS). Healthcare Cost and Utilization Project (HCUP). 2011. Agency for Healthcare Research and Quality, Rockville, MD. www.hcup-us.ahrq.gov/nisoverview.jsp

[2] Age-adjusted by direct method to US Census adult population estimate using 2000 U.S. Census estimates for the years 2010-2011, and 2010 US Census estimates for 2012. Describes the relative population burden when comparing groups.

[3] Average charges are based on individual record discharges. The fees included may vary from patient to patient, but generally include hospital room, supplies, medications, laboratory fees, and care staff, such as nurses. They generally do not include professional fees (doctors) and noncovered charges. In a small proportion of the discharge cases, professional fees (doctors) are not removed from total charges because the data source cannot provide the information. Emergency charges incurred prior to admission to the hospital may be included in total charges. Medicare requires a bundled bill for Medicare patients admitted to the hospital through the emergency department; other payers may or may not have similar requirements.