

Study finds blacks more likely to be readmitted to hospitals after discharge

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Elderly black patients were more likely to be readmitted to the hospital after a prior hospital stay for a heart attack, heart failure, or pneumonia, according to a new study from Harvard School of Public Health (HSPH) researchers. They found that the higher readmission rates were due to disparities related to both race and the hospitals where patients were treated.

"Disparities in health and health care are well-documented in this country, but little was previously known about whether there were disparities in hospital readmissions at the national level," said Karen Joynt, lead author of the study, a research fellow in the department of [health policy](#) and management at HSPH, and a physician at Brigham and Women's Hospital (BWH) in Boston. "We found important racial disparities among elderly Americans: Black patients were more likely to be readmitted after being discharged from the hospital, and this was especially true if the discharging hospital cared for a high proportion of minority patients."

The study appears in the February 16, 2011 issue of the [Journal of the American Medical Association](#).

Joynt and her colleagues, E. John Orav, associate professor of biostatistics at HSPH, and senior author Ashish Jha, a physician and associate professor of health policy and management at HSPH, analyzed Medicare data on 30-day readmissions after hospitalization for three conditions: [heart attack](#), [heart failure](#), and pneumonia. They found that

black patients had about 13% higher odds of readmission than white patients, regardless of where they received their care. Additionally, patients discharged from hospitals with a high proportion of minority patients had about 23% higher odds of readmission than patients discharged from hospitals with a lower proportion of minorities, regardless of race.

The results were even more striking when those two factors were combined. For example, following a heart attack, [black patients](#) discharged from hospitals with a high proportion of minorities had 35% higher odds of readmission than white patients discharged from hospitals with a lower proportion of minorities.

Eliminating health disparities and reducing readmissions are two important goals for policymakers. The Patient Protection and Affordable Care Act calls for financial penalties for hospitals that do a poor job of reducing readmissions. "Our findings suggest that to reduce [racial disparities](#) in readmissions, policymakers will need to focus not just on race, but also on where minority patients are receiving their care," said Joynt.

More information: "Thirty Day Readmission Rates for Medicare Beneficiaries by Race and Site of Care," Karen E. Joynt, E. John Orav, Ashish K. Jha, JAMA, February 16, 2011, Vol. 305, No. 7

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