

Study finds more rehospitalization, emergency visits in patients with substance use disorders

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According to a new study conducted by researchers at Boston University School of Medicine (BUSM), people diagnosed with substance use disorders are more likely to be re-admitted to the hospital within 30 days of their discharge than patients who do not have a substance abuse disorder. Alexander Walley, MD, an assistant professor of medicine at BUSM and a primary care physician at Boston Medical Center (BMC), is the lead author of this study, which is published online in the *Journal of Addiction Medicine*.

Previous research has shown that patients diagnosed with [substance use disorders](#) are more likely to be readmitted to psychiatric hospitals within 30 days. This study, which was done in collaboration with BMC, examined whether patients with substance use disorders who were in the hospital for the treatment of medical issues, such as pneumonia, were more likely to be readmitted within 30 days.

The researchers examined data from Project RED (Re-Engineered Discharge), a joint BMC and BUSM research group developing and testing novel strategies to improve the [hospital discharge](#) process to promote patient safety and reduce rehospitalization rates. Brian Jack, MD, a professor of [family medicine](#) at BUSM and a [family physician](#) at BMC, is the principal investigator of Project RED and senior author of this study.

According to an analysis of 738 [patient records](#), 17 percent of patients had a substance use diagnosis at discharge, and these patients had higher rates of rehospitalization than patients who were not diagnosed with a substance use disorder. Approximately one-third of the patients diagnosed with a substance abuse disorder returned to the [emergency department](#) or hospital within 30 days whereas only 22 percent of those who did not have a diagnosed substance abuse disorder were readmitted. Most of this difference was found in patients with drug and alcohol use diagnoses and not those with an exclusive alcohol use diagnosis.

"This study demonstrates that substantial numbers of medical inpatients have co-occurring substance use disorders and these patients are high risk for returning to the hospital," said Walley.

In 2009, the Centers for Medicare & Medicaid Services made it a requirement for all hospitals to report 30-day hospital readmission rates in order to help reign in healthcare costs. There are high costs associated with patients visiting the emergency room and being hospitalized within 30 days of discharge, and national legislation was filed in 2010 to provide incentives for hospitals to decrease those rates as many of the readmissions could potentially be preventable.

"These results show the need to develop a comprehensive, efficient discharge process for [patients](#) diagnosed with [substance abuse](#) disorders in order to keep them safe and healthy when they leave the hospital," added Walley. "There is a tremendous opportunity to lower healthcare costs by devising new interventions and systems aimed at decreasing readmission rates."

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