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Study shows how comorbid mental health conditions can impact child's care in hospital

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Children hospitalized for medical or surgical procedures who have an existing mental health condition stay in the hospital longer than children without these conditions. Pediatric researchers who analyzed a national database recommend that health care policymakers and hospital administrators improve systems to more efficiently provide mental health care to hospitalized children.

The research, published online Nov. 11 in *Pediatrics*, is the first study to show how comorbid mental health conditions, such as anxiety, ADHD and depression, can impact a child's care in the hospital.

"Most hospitalized children and their families are eager to go home as soon as they can - extra days in the hospital are missed days at school for kids, missed days at work for parents and a disruption to family routines," said lead author Stephanie Douplik, MD, a researcher in PolicyLab at Children's Hospital of Philadelphia. "Unfortunately, we're seeing that mental health conditions add a layer of complexity to hospital care that causes kids with mental health conditions to stay in the hospital longer and use additional resources."

Investigating 670,000 hospitalizations in the 2012 Kids' Inpatient Database, the study team found that existing mental health conditions were present in one in seven medical and surgical hospitalizations of children aged 3 to 20. For nine types of surgical procedures - including appendectomy, knee procedures and gall bladder removal - having one mental health condition increased 61 percent of children's hospital stays by one day. In this same population, having two or more mental health conditions added one day to every child's stay.

For nine types of medical hospitalizations - such as chemotherapy, headache and diabetes - having one mental health condition added an extra day in the hospital for 28 percent of children. Furthermore, having two more mental health conditions added a day to 50 percent of these children's hospital stays.

These increases totaled nearly 32,000 additional hospital days nationwide in 2012, costing an additional \$90 million.

The study indicated certain populations that may require more attention than others. Adolescents had more than twice as many additional hospital days associated with an existing mental health condition compared to 3- to 12-year-old children. Additionally, children hospitalized for medical reasons commonly had depression and anxiety disorders, which added days to their hospital stay, and children hospitalized for surgical procedures commonly experienced substance abuse and anxiety disorders, which lengthened their time in the hospital.

According to the study's authors, potential explanations for the extended hospital stays include a lower ability to cope with pain and other symptoms of acute illness, lower adherence to treatment plans and a lack of care coordination outside of the hospital.

"My patients often tell me how difficult it is to get mental health care outside of the hospital, and they are grateful when clinicians can provide mental health care services in the hospital or help them get treatment after they go home," said Dr. Douppnik. "In order to ensure mental health conditions aren't adding unnecessary days to children's hospital stays that also use additional hospital resources, we need systems of care that provide efficient and convenient access to mental health clinicians for children who need mental health treatments."

"There is no question that we can do a better job addressing the mental health needs of these hospitalized children," said Jay Berry, MD, MPH, pediatrician and hospitalist with the Complex Care Service at Boston Children's Hospital, assistant professor of pediatrics at Harvard Medical School, and senior author of the study. "I look forward to the action that will be taken because of Dr. Douppnik's findings."

Source:

The Children's Hospital of Philadelphia
