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BLOOMBERG
SCHOOL *of* PUBLIC HEALTH

Morbidity

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Lecture Topics

- Morbidity data systems
- Morbidity coding systems
- Data-poor environments
- Case study #2
 - Lower extremity fractures



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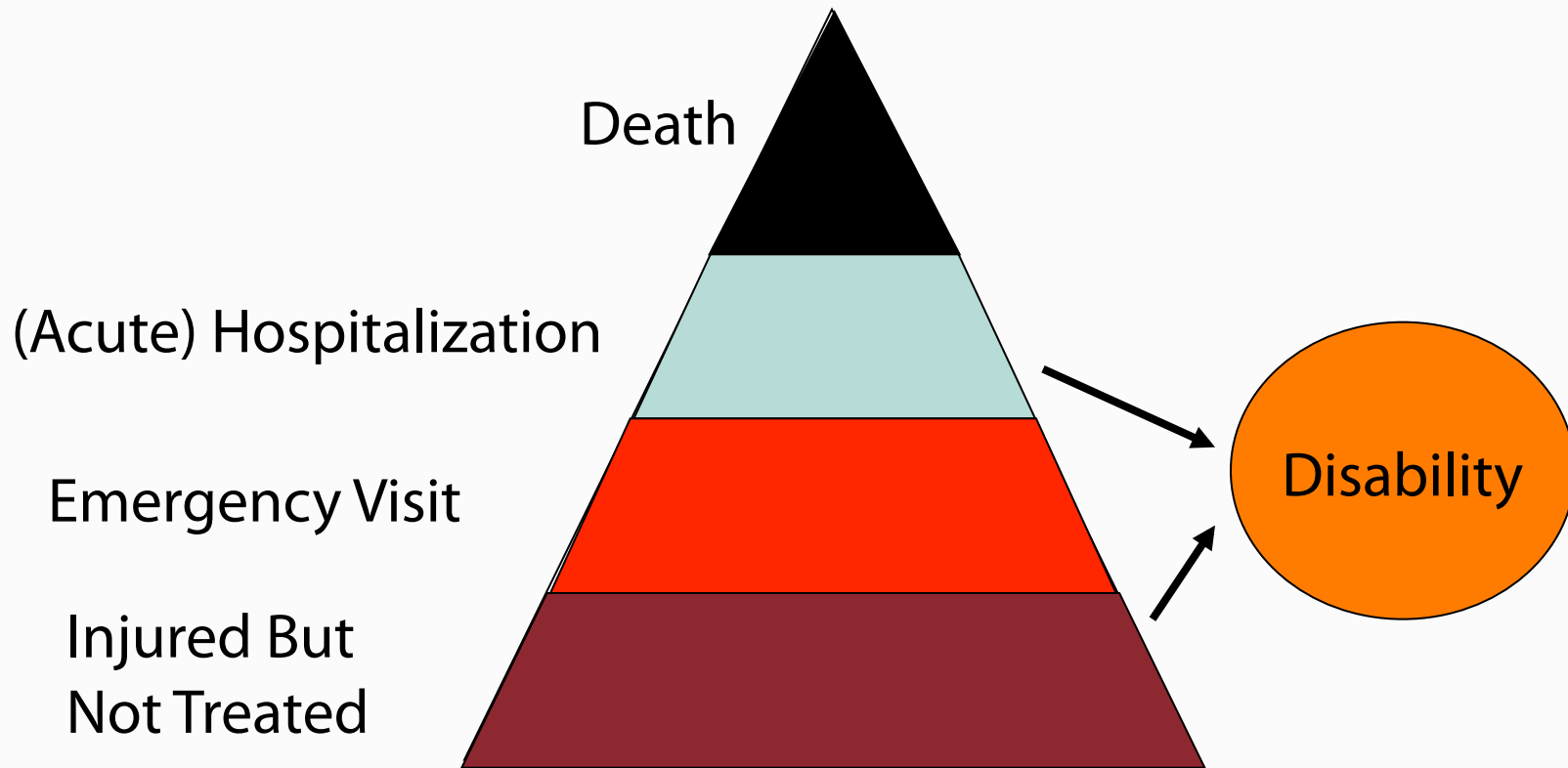
Section A: Morbidity Data Systems

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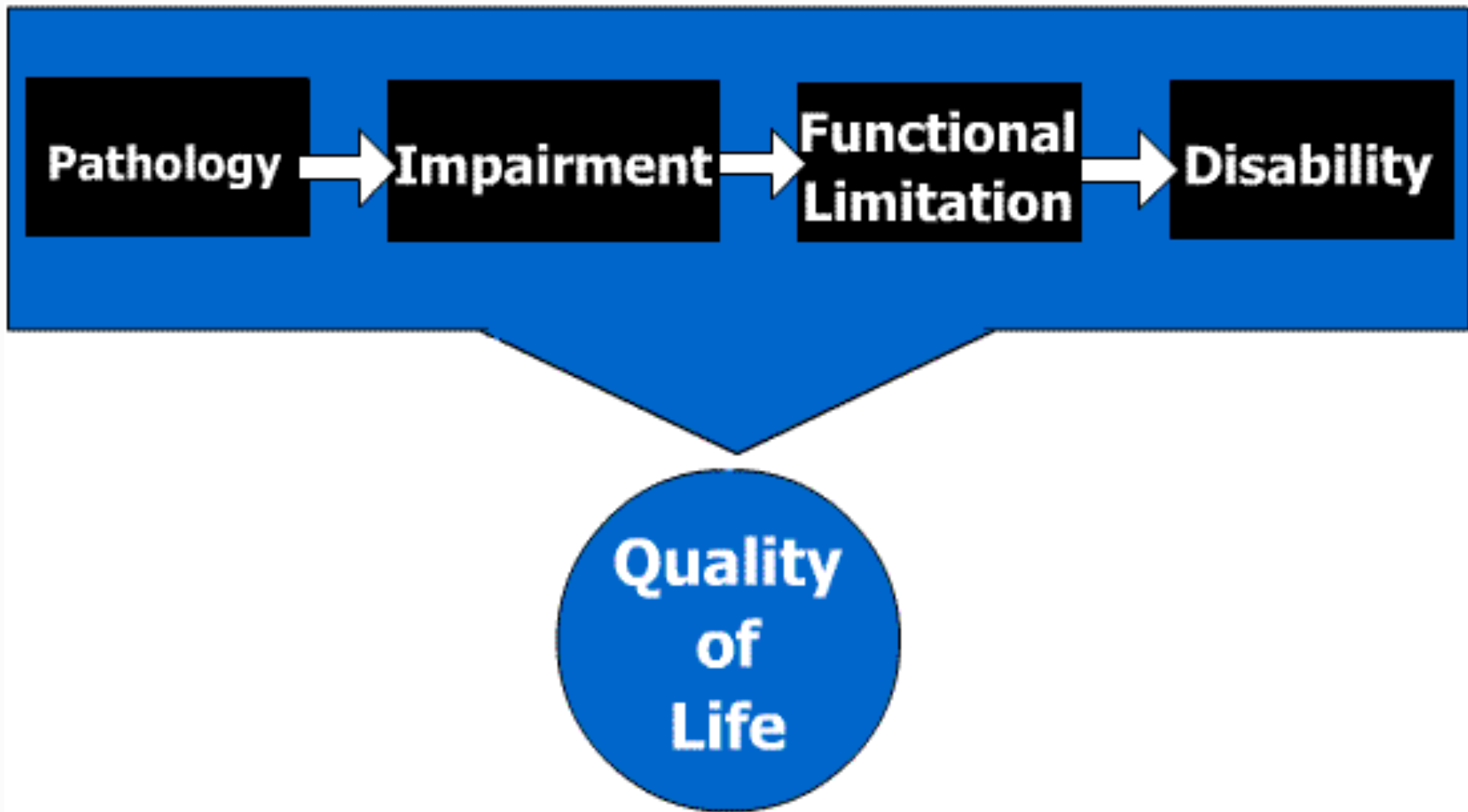
Morbidity

- Short-term morbidity requiring acute care
 - Emergency care level
 - ▶ Outpatient setting
 - ▶ Hospital setting
 - Hospital admission
- Mid-term and long-term consequences
 - Requiring institutionalization (rehabilitation, nursing)
 - Limiting functionality

The Injury Pyramid



The Disability Model



Relevance of Injury Morbidity Data

- Acute consequences—hospitalizations, ED visits
 - Counts; rates
- Mid-term and long-term consequences
 - Counts; rates
- Effects on quality of life
 - (Age at injury—fixed age*) x quality of life** = quality-adjusted life years (QALYs)
 - ▶ *Fixed age—65, 75, life expectancy at birth, or life expectancy at time of event
 - ▶ ** Quality-, disability-, health-adjustment, and other variations

Leading Causes of Global Burden of Disease, 2001

- Leading causes of global burden of disease (DALY), 2001

| Ranking | Disease or injury | Thousands |
|---------|-------------------------------|-----------|
| 1 | Perinatal conditions | 98,422 |
| 2 | Lower respiratory infections | 90,748 |
| 3 | HIV/AIDS | 88,429 |
| 4 | Unipolar depressive disorders | 65,911 |
| 5 | Diarrheal disorders | 62,451 |

| | | |
|---|-----------------------|--------|
| 9 | Road traffic injuries | 37,719 |
|---|-----------------------|--------|

| | | |
|----|----------|--------|
| 15 | Violence | 20,167 |
|----|----------|--------|

What Would We Like to Know about Nonfatal Injuries?

- Similar to fatal injuries except
 - Victim characteristic—for example, age, gender, ethnicity
 - Injury characteristics—where, what, severity (threat to life, intensity of resources needed to heal, threat to long-term consequences, etc.)
 - Event characteristics—when, where, while doing what

Data Sources

- Hospital discharge
- Trauma registries
- Emergency departments
- Outpatient settings

Data Sources

- Health surveys
- Forensic records (for disability payments)
- Insurance companies
- Police reports (special events—motor vehicle crashes, homicides, etc.)
- Others

Data Sources

- Special surveys
- Community-based surveillance
- Sport records
- School records
- Transportation entities, etc.

Data Sources

- Population covered
 - Census—total population
 - Sample
 - ▶ Random (representative of population)
 - ▶ Stratified (representative of population)
 - ▶ Convenience (not representative)

Data Sources

- Population covered
 - Census—total population
 - Sample
 - ▶ Random (representative of population)
 - ▶ Stratified (representative of population)
 - ▶ Convenience (not representative)
- Periodicity
 - Frequently—surveillance
 - One time

In Particular

- Hospital discharge
 - Information on individual and acute condition
 - At times, info on co-morbid conditions and circumstances of injury
 - Computerized data available

In Particular

- Hospital discharge
 - Information on individual and acute condition
 - At times, info on co-morbid conditions and circumstances of injury
 - Computerized data available
 - One problem
 - ▶ Population catchment area ill-defined (except if aggregated data are available)

In Particular

- Trauma registries
 - Emergency departments
 - Same as hospital except availability in computerized format

In Particular

- Police reports
 - Underreporting of cases
 - Misreporting of conditions and circumstances
 - Computerized files rarely available
 - Population catchment area ill-defined
- Health surveys
 - Scarce
 - Limited info on injuries and circumstances
 - Population based

Morbidity Data Availability and Comparability

- Availability
 - Fragmented
 - Aggregated across inconsistent levels
- Variability
 - Definition of injury
 - Outcome being measured—*anatomic injury, physiologic injury, threat to life, disability*
 - Classification system
 - Accuracy of diagnoses
 - Completeness rates

When Comparing Morbidity Data

- Check for definition of injury
- Validity of data sources
- Age- and gender- (severity) adjust
- Other adjustments (e.g., exposure?)
- Statistical significance