

## Factsheet

# Impact of the COVID 19 pandemic on inpatient hospital care in 2020 in selected sectors

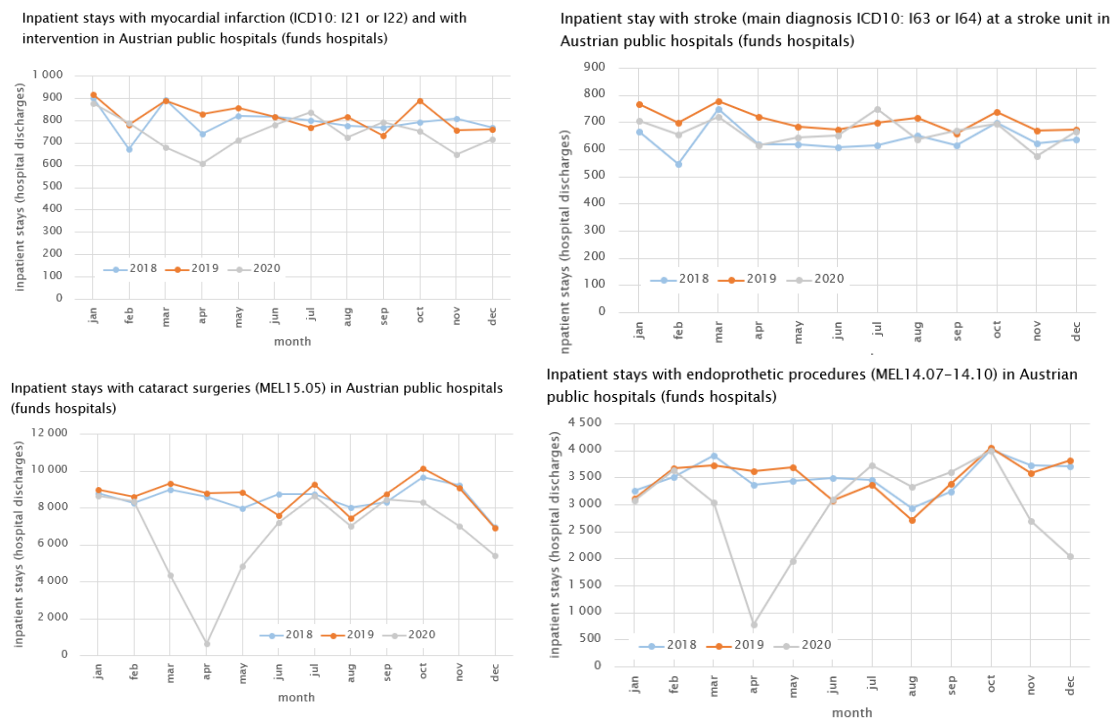
Further information (in German): Eglau, Karin (2021): [Impact of the COVID-19 pandemic on inpatient hospital care in 2020 in selected sectors. Updated rapid analysis.] *Auswirkungen der COVID-19-Pandemie auf die stationäre Spitalsversorgung anhand ausgewählter Bereiche. Aktualisierte Rapid Analysis*. Vienna: Gesundheit Österreich. Available at: <https://jasmin.goeg.at/1633/> (visited on 10th August 2021).

On behalf of the Ministry of Social Affairs, Health, Care and Consumer Protection the Austrian Public Health Institute made a rapid analysis to illustrate the effects of the pandemic in Austrian hospitals in 2020. The basis for this was the available data from the inpatient hospital sector in relation to the comparison period of the previous years 2018 and 2019. The entire ambulatory and outpatient sector was not included, as complete data for 2020 were not available at the time the report was prepared.

In the first pandemic wave in spring 2020, operations in hospitals were reduced to the medically essential and urgent in preparation for potential COVID 19 cases and to reduce the risk of infection. This measure was intended to create a capacity reserve to be prepared for a patient volume that could not be estimated at that time. Then, from May 2020, regular operations were gradually resumed. In the second wave of the pandemic in autumn and winter 2020, although significantly higher hospitalisation rates for Covid-19 were recorded, also in intensive care units, regular care was no longer restricted to such an extent.

In all analysed sectors – acute care (heart attacks, accidents), scheduled care (cataract, endoprostheses), cancer, mental illnesses, paediatric care – there was a reduction in inpatient stays (with the exception of strokes) in the months of March to May 2020 as well as in November and December 2020 compared to the previous years, whereby the reduction during the 2nd lockdown was significantly lower. Overall, inpatient stays in Austria decreased by 21 percent between March and December 2020.

**Figure 1: Inpatient stays in Austria for selected procedures and diagnoses, 2018–2020 (by discharge month)**



As shown in Figure 1, elective procedures in particular declined sharply in the early stages of the pandemic. Cataract surgeries, for example, plummeted by about 28 percent between March and December 2020 (compared with 2019), with the largest year-over-year decline of more than 90 percent in April 2020. There was a similar decline in endoprothetic hip and knee surgeries, with a 19 percent decrease between March and December 2020, and the largest decrease in April 2020 for an almost 80 percent reduction compared to April 2019.

In contrast, there was very little decrease in inpatient stays for patients with stroke (stroke unit) (down 5 percent between March and December 2020). Stays with myocardial infarction decreased by about 11 percent between March and December 2020 compared with the previous year. The largest decrease was seen for stays with myocardial infarction in April 2020, with a reduction of about 27 percent compared to April 2019.

One of the reasons for the sharp decline in case numbers during the first lockdown was that, in preparation for potential COVID 19 cases, hospitals reduced their operations to acute and urgent medical cases and, beyond that, generally did not make new appointments for examinations and treatments deemed non-urgent. Also, the provision of protective equipment was not yet optimal. In the first wave of the pandemic, there was thus a significant reduction in regular care, while the number of cases of Covid-19 did not reach the feared level due to the measures of the first lockdown.

During the year 2020, hospitals were equipped with adequate protective equipment, simpler and more easily available testing facilities were created and more knowledge about the disease was generated through studies. Also due to the effects of a reduction in regular care that could be observed during the first phase of the pandemic, also internationally, the hospitals oriented the reduction in regular care during the second wave of the pandemic to

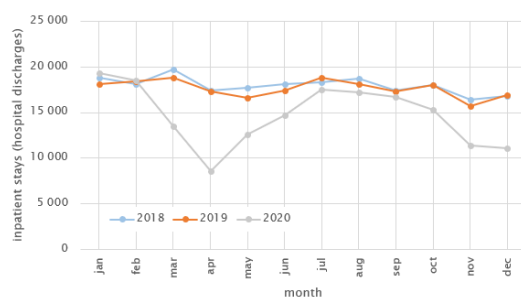
the number of infected persons and thus this was comparatively moderate, despite borderline high occupancy of the intensive care units with severely infected patients with covid-19.

One reason for the reduced utilisation of health care in acute and emergency cases, especially if the symptoms are not massive, was a general uncertainty and fear among the population of catching the virus in hospitals – especially during the first lockdown.

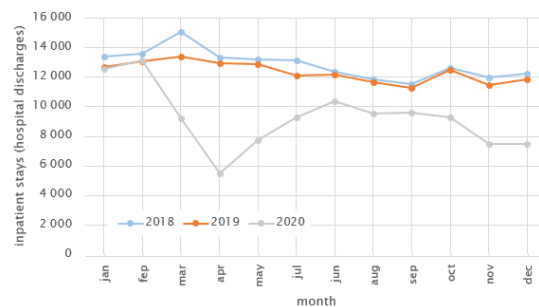
From the point of view of inpatient care, it is positive that fewer accidents occurred during the pandemic and also – presumably due to the distance rules, hygiene measures and closure of kindergartens and schools – fewer children had to be admitted as inpatients overall, but especially with infections (*Figure 2*). Stays with an accident diagnosis went down by 21 percent between March and December 2020 compared to the same period in 2019. There were also 36,750 fewer inpatient stays for children under 15 years (March to December 2020 compared to 2019), a decrease of 30 percent.

*Figure 2: Inpatient stays with accident diagnosis (left); inpatient stays for children under 15 (right), 2018–2020 (by discharge month)*

Inpatient stays for accidents (main diagnosis S00–T98) in Austrian public hospitals (funds hospitals)



Inpatient stays among children (0–14 ys) in Austrian public hospitals (funds hospitals)



Further analyses are planned, at least every six months on inpatient and – depending on data availability – also on outpatient care, whilst the pandemic continues.

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