

# DATA BRIEFING



PAUL ROBINSON

## Prevention shows benefits across UK

Over the last few years, more and more emphasis has been placed on early intervention and/or prevention for long-term conditions. Has this started to show any impact on the number of hospital admissions?

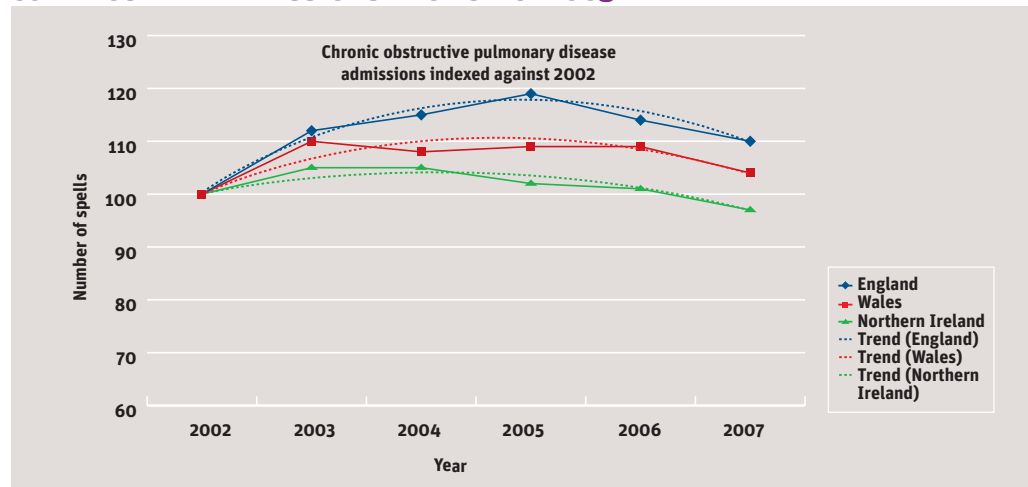
Admission data for England, Wales and Northern Ireland was analysed using the conditions listed by the NHS Institute for Innovation and Improvement in its *Directory of Ambulatory Care*, for the past six calendar years. The data was then indexed using the number of admissions for 2002 as a baseline (set at 100).

The first graph shows the pattern for chronic obstructive pulmonary disease. All three countries show a similar pattern of a rise followed by a fall and by adding a trend line this is clearly demonstrated. A similar pattern is visible for asthma, although for this Northern Ireland has been showing a steady decrease across all six years.

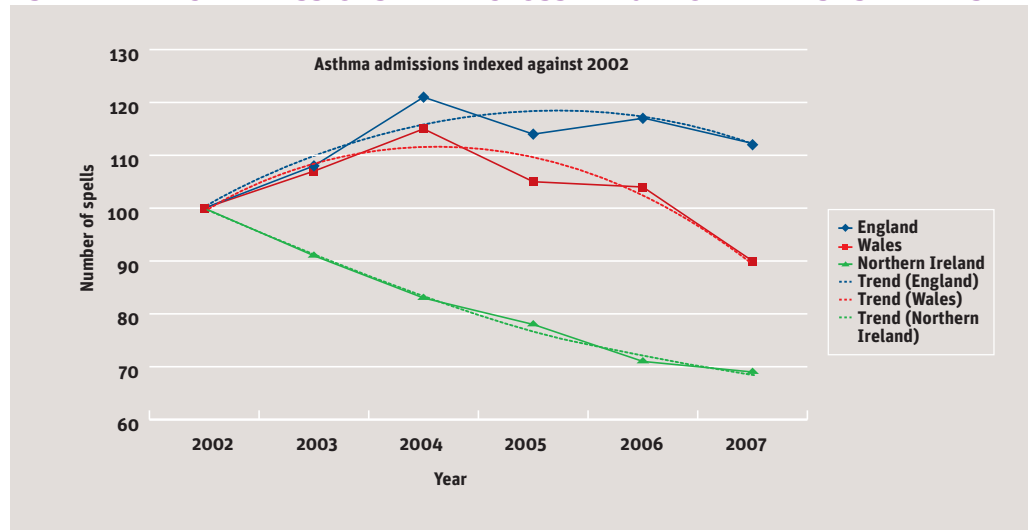
Both of these conditions should respond to improvements in their management by primary care. As a comparative marker, the third condition shown is that of community-acquired pneumonia. This is less likely to be affected by preventive approaches, and indeed all three countries show a steady rise in the number of admissions (apart from a one-off drop from 2003-04 for Northern Ireland). It is unclear as to why there has been such a rise but the issue of significance here is that there has been no fall in numbers in any of the countries over the last few years – unlike the other two conditions. It would therefore seem that the focus on prevention is beginning to have an impact. ●

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### COPD HOSPITAL ADMISSIONS DROP SINCE 2005



### ASTHMA ATTACK ADMISSIONS VARY ACROSS THE UK FOR THE PAST SIX YEARS



### Key facts

6

Number of years during which Northern Ireland has shown a decrease in hospital admissions for asthma

36,361

Peak number of admissions in England in 2005 for chronic obstructive pulmonary disease

### ADMISSIONS FOR COMMUNITY-ACQUIRED PNEUMONIA ON THE RISE

