



In-Hospital Deaths from Medical Errors at 195,000 per Year

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HealthGrades (press release)
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 HealthGrades' Study Finds

Little Progress Seen Since 1999 IOM Report on Medical Errors

HealthGrades Honors 88 Hospitals Nationwide with Distinguished Hospital Award for Patient Safety™

Patient Safety Incidents In Hospitals Account for \$6 Billion per Year in Extra Costs

Lakewood, Colo. (July 27, 2004) - An average of 195,000 people in the U.S. died due to potentially preventable, in-hospital medical errors in each of the years 2000, 2001 and 2002, according to a new study of 37 million patient records that was released today by HealthGrades, the healthcare quality company.

The HealthGrades Patient Safety in American Hospitals study is the first to look at the mortality and economic impact of medical errors and injuries that occurred during Medicare hospital admissions nationwide from 2000 to 2002. The HealthGrades study applied the mortality and economic impact models developed by Dr. Chunliu Zhan and Dr. Marlene R. Miller in a research study published in the Journal of the American Medical Association (JAMA) in October of 2003. The Zhan and Miller study supported the Institute of Medicine's (IOM) 1999 report conclusion, which found that medical errors caused up to 98,000 deaths annually and should be considered a national epidemic.

The HealthGrades study finds nearly double the number of deaths from medical errors found by the 1999 IOM report "To Err is Human," with an associated cost of more than \$6 billion per year. Whereas the IOM study extrapolated national findings based on data from three states, and the Zhan and Miller study looked at 7.5 million patient records from 28 states over one year, HealthGrades looked at three years of Medicare data in all 50 states and D.C. This Medicare population represented approximately 45 percent of all hospital admissions (excluding obstetric patients) in the U.S. from 2000 to 2002.

"The HealthGrades study shows that the IOM report may have underestimated the number of deaths due to medical errors, and, moreover, that there is little evidence that patient safety has improved in the last five years," said Dr. Samantha Collier, HealthGrades' vice president of medical affairs. "The equivalent of 390 jumbo jets full of people are dying each year due to likely preventable, in-hospital medical errors, making this one of the leading killers in the U.S."

HealthGrades examined 16 of the 20 patient-safety indicators defined by the Agency for Healthcare Research and Quality (AHRQ) - from bedsores to post-operative sepsis - omitting four obstetrics-related incidents not represented in the Medicare data used in the study. Of

these sixteen, the mortality associated with two, failure to rescue and death in low risk hospital admissions, accounted for the majority of deaths that were associated with these patient safety incidents. These two categories of patients were not evaluated in the IOM or JAMA analyses, accounting for the variation in the number of annual deaths attributable to medical errors. However, the magnitude of the problem is evident in all three studies.

"If we could focus our efforts on just four key areas - failure to rescue, bed sores, postoperative sepsis, and postoperative pulmonary embolism - and reduce these incidents by just 20 percent, we could save 39,000 people from dying every year," said Dr. Collier.

The HealthGrades study was released in conjunction with the company's first annual Distinguished Hospital Award for Patient Safety™, which honors hospitals with the best records of patient safety. Eighty-eight hospitals in 23 states were given the award for having the nation's lowest patient-safety incidence rates. A list of winners can be found at <http://www.healthgrades.com>