Malnutrition Diagnoses in Hospitalized Patients: United States, 2010
Key Findings from the Healthcare Cost and Utilization Project, 2010

Malnutrition is common in hospitalized patients in the United States, and it is associated with unfavorable outcomes including higher infection rates, poor wound healing, longer length of stay, and higher frequency of readmission. Previous research using tailored assessment instruments has suggested that malnutrition is present in between 21% and 54% of hospitalized patients. This report summarizes person-level prevalence data from a nationally representative sample of U.S. hospital discharges.

Data are from the Healthcare Cost and Utilization Project (HCUP), which contains patient-level data on hospital inpatient stays. When weighted appropriately, estimates from HCUP represent all U.S. hospitalizations. The data set contains up to twenty-five ICD-9 diagnosis codes for each discharged patient. Using these codes, all patients with a diagnosis of malnutrition in their hospital records were identified. Hospitalized patients with a diagnosis of malnutrition were admitted more often under emergent or urgent circumstances and less as elective patients (Figure 1). Routine discharges were less common in patients with a malnutrition diagnosis and these individuals were more likely to fall below the 50th income percentile.

Patients with a coded malnutrition diagnosis were more likely to fall below the 50th income percentile.

Patients with a coded malnutrition diagnosis had a routine discharge, compared to 72.6% of routine discharges among patients without a malnutrition diagnosis.

Nearly 80% of patients with a coded malnutrition diagnosis were admitted emergently or urgently, compared to 65.0% of those without this diagnosis.

Percent of patients with a coded malnutrition diagnosis had a routine discharge, compared to 72.6% of routine discharges among patients without a malnutrition diagnosis.

For more information, please visit www.nutritioncare.org/malnutrition

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