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# Fewer hospitalisations in 2022 than before the pandemic

## COVID-19 required hospitalisation in more than 40 000 cases

Vienna, 2023-10-24 – According to Statistics Austria, 2.1 million hospital discharges were documented in 2022, of which 1.7 million were after full inpatient stays and 349 004 after day-care stays. This is 17 249 cases more than in the previous year (+0.8%) and more than 300 000 cases less than in 2019 (–12.8%).

The significant pandemic-related decline in inpatient hospitalisations continued in 2022: from 2019 to 2022, both full inpatient stays with at least one overnight stay in hospital and day cases (zero-night stays without an overnight stay in hospital) in acute care hospitals decreased by about 13% each (see table 1).

In relation to the population, acute stays have decreased from 263.9 to 225.8 per 1 000 inhabitants the past three years, a decrease of 14.4%. The number of full inpatient stays in 2022 was 187.7 per 1 000 inhabitants, 14.5% lower than before the pandemic (219.6 discharges in 2019), and further decreased by 1.4% compared to 2021. Fewer medical services were also provided during full inpatient stays in 2022 (–6.3% compared with 2019; –1.2% compared with 2021). Day cases decreased by 14.1% between 2019 and 2022, but increased by 1.2% versus 2021. There were 8.7% fewer medical day-care procedures in 2022 than in 2019, but 3.1% more than in 2021.

Declining acute hospital discharge rates were seen in all federal provinces and across all diagnosis groups. The largest decrease from 2019 to 2022 per 1 000 inhabitants was recorded in Vienna (–18.7%) and the smallest in Tyrol (–10.4%; see table 2).

The most frequent inpatient treatment in 2022 was for circulatory diseases (241 646 cases or 11.6% of discharges) – thus, 2 459 fewer stays in 2022 than in the previous year and 33 546 fewer than before the pandemic. Taking population growth into account, this corresponds to a decrease of 2.5% and 13.8%, respectively. The number of hospitalisations due to cancer (10.4% of acute care stays in 2022) decreased from 242 556 to 216 080 since 2019, per 1 000 inhabitants it declined by 12.4%.

In 2022, 40 365 cases of COVID-19 required acute hospitalisation. On average, COVID-19 hospital stays lasted nine days, 3.3 days less than in 2021, but still almost one and a half times longer than stays for other diseases (2022: 6.1 days). 50.3% of COVID-19 patients were men and 49.7% were women. COVID-19 mainly required hospitalisation of older people, with 71.2% of hospital discharges in the 65+ age group (see table 4).

For detailed results and further information please refer to our websites on [hospital discharges](#) and [medical procedures](#) for inpatients.

**Table 1: Inpatient stays in acute care hospitals 2019 to 2022**

Key data on hospital stays <sup>1</sup>	2019	2020	2021	2022	Change in percent	
					2019/22	2021/22
<b>All hospital stays absolute</b>	<b>2 390 825</b>	<b>1 980 489</b>	<b>2 066 414</b>	<b>2 083 663</b>	<b>-12.8</b>	<b>+0.8</b>
Full inpatient stays <sup>2</sup>	1 991 345	1 672 369	1 726 174	1 734 659	-12.9	+0.5
Day cases <sup>3</sup>	399 480	308 120	340 240	349 004	-12.6	+2.6
<b>Stays per 1 000 of population<sup>4</sup></b>	<b>263.9</b>	<b>218.5</b>	<b>227.9</b>	<b>225.8</b>	<b>-14.4</b>	<b>-1.0</b>
Full inpatient stays <sup>2</sup>	219.6	184.4	190.3	187.7	-14.5	-1.4
Day cases <sup>3</sup>	44.3	34.1	37.6	38.0	-14.1	+1.2
<b>Stays with discharge type deceased</b>	<b>40 391</b>	<b>42 968</b>	<b>43 861</b>	<b>44 003</b>	<b>+8.9</b>	<b>+0.3</b>
<b>Total medical services<sup>5</sup></b>	<b>4 482 401</b>	<b>3 965 142</b>	<b>4 221 530</b>	<b>4 188 725</b>	<b>-6.6</b>	<b>-0.8</b>
Full inpatient services <sup>2</sup>	4 037 419	3 610 075	3 827 456	3 782 524	-6.3	-1.2
Surgical services	998 545	868 163	904 595	911 723	-8.7	+0.8
Non-operative services	3 038 874	2 741 912	2 922 861	2 870 801	-5.5	-1.8
Day-care services <sup>3</sup>	444 982	355 067	394 074	406 201	-8.7	+3.1
Surgical services	283 493	229 454	257 187	261 172	-7.9	+1.5
Non-operative services	161 489	125 613	136 887	145 029	-10.2	+5.9

S: STATISTICS AUSTRIA, Hospital Discharge Statistics; Federal Ministry of Social Affairs, Health, Care and Consumer Protection, Reports on Diagnoses and Services.

1) Hospital discharges of persons resident in Austria and abroad; including deaths and including day cases. – 2) Refers to stays with at least one overnight stay in hospital. – 3) Refers to zero-night stays (day cases) with admission and discharge on the same calendar day. – 4) Hospital discharges of persons resident in Austria as a percentage of the annual average population; including deaths and day cases. – 5) Refers to acute hospitals.

**Table 2: Inpatient stays in acute care hospitals 2019 to 2022 by federal provinces (site of the hospital) – per 1 000 of population**

Hospital stays <sup>1</sup> by federal provinces (site of the hospital)	2019	2020	2021	2022	Change in percent	
					2019/22	2021/22
<b>Austria</b>	<b>263.9</b>	<b>218.5</b>	<b>227.9</b>	<b>225.8</b>	<b>-14.4</b>	<b>-1.0</b>
Burgenland	192.6	157.8	169.7	170.1	-11.7	+0.2
Carinthia	280.0	242.0	251.6	248.2	-11.3	-1.3
Lower Austria	203.4	165.0	168.7	171.1	-15.9	+1.4
Upper Austria	288.7	241.4	254.2	253.6	-12.2	-0.2
Salzburg	290.9	247.7	260.2	256.8	-11.7	-1.3
Styria	262.1	213.7	226.6	224.2	-14.5	-1.1
Tyrol	283.2	243.8	255.1	253.9	-10.4	-0.5
Vorarlberg	264.0	217.7	227.9	223.9	-15.2	-1.8
Vienna	289.8	235.0	242.5	235.5	-18.7	-2.9

S: STATISTICS AUSTRIA, Hospital Discharge Statistics; Federal Ministry of Social Affairs, Health, Care and Consumer Protection, Reports on Diagnoses and Services.

1) Hospital discharges of persons resident in Austria as a percentage of the annual average population; including deaths and day cases.

**Table 3: Inpatient stays in acute care hospitals 2019 to 2022 by selected diagnoses – per 1 000 of population**

Hospital stays <sup>1</sup> by selected diagnoses (ICD-10)	2019	2020	2021	2022	Change in percent	
					2019/22	2021/22
Colorectal cancer (C18–C21)	279.5	251.1	252.1	243.5	-12.9	-3.4
Lung cancer (C33–C34)	272.5	244.6	250.1	234.2	-14.1	-6.4
Breast cancer (C50)	299.4	249.6	255.3	249.2	-16.8	-2.4
Prostate cancer (C61)	138.8	120.7	129.1	128.3	-7.5	-0.6
Diabetes mellitus (E10–E14)	163.5	123.9	126.3	116.3	-28.9	-7.9
High blood pressure (hypertension; I10–I15)	212.0	162.9	159.4	133.2	-37.2	-16.5
Heart attack (I21–I22)	191.5	169.9	175.3	165.8	-13.4	-5.4
Heart failure (I50)	278.0	241.6	257.2	251.8	-9.4	-2.1
Stroke (I60–I64)	303.6	283.5	286.3	289.6	-4.6	+1.2
Influenza (J09–J11)	60.7	65.7	0.7	54.8	-9.6	+7 948.2
Pneumonia (J12–J18)	403.5	280.6	235.2	269.8	-33.1	+14.7
Gallstones (cholelithiasis; K80)	243.9	210.1	213.6	217.0	-11.0	+1.6
Arthrosis of the hip joint (coxarthrosis; M16)	226.7	192.9	215.3	223.4	-1.5	+3.8
Arthrosis of the knee joint (gonarthrosis; M17)	279.0	219.1	236.0	251.2	-10.0	+6.4
Renal insufficiency (N17–N19)	237.5	203.3	200.1	203.9	-14.2	+1.9
COVID-19 (U07.1–U07.2, U08–U09)	.	295.1	440.3	439.0	.	-0.3

S: STATISTICS AUSTRIA, Hospital Discharge Statistics; Federal Ministry of Social Affairs, Health, Care and Consumer Protection, Reports on Diagnoses and Services.

1) Hospital discharges of persons resident in Austria as a percentage of the annual average population; including deaths and day cases.

**Table 4: COVID-19 inpatient treatment in 2022**

Hospital stays <sup>1</sup> by sex and age	Discharge type			Average length of stay <sup>2</sup> in days
	in total	discharged	deceased	
<b>Male and female</b>	<b>40 365</b>	<b>37 239</b>	<b>3 126</b>	<b>9.0</b>
Until 14 years	2 853	2 851	2	2.4
15 to 44 years	3 104	3 091	13	4.4
45 to 64 years	5 672	5 476	196	8.7
65 years and older	28 736	25 821	2 915	10.2
<b>Male</b>	<b>20 292</b>	<b>18 545</b>	<b>1 747</b>	<b>9.2</b>
Until 14 years	1 604	1 603	1	2.4
15 to 44 years	1 368	1 359	9	5.4
45 to 64 years	3 077	2 946	131	9.9
65 years and older	14 243	12 637	1 606	10.2
<b>Female</b>	<b>20 073</b>	<b>18 694</b>	<b>1 379</b>	<b>8.9</b>
Until 14 years	1 249	1 248	1	2.4
15 to 44 years	1 736	1 732	4	3.6
45 to 64 years	2 595	2 530	65	7.4
65 years and older	14 493	13 184	1 309	10.2

S: STATISTICS AUSTRIA, Hospital Discharge Statistics; Federal Ministry of Social Affairs, Health, Care and Consumer Protection, Reports on Diagnoses and Services.

1) Hospital discharges of persons resident in Austria and abroad with a COVID-19 discharge diagnosis (U07.1-U07.2, U08-U09); including deaths and including day cases. Refers to acute hospitals. –2) Length of stay refers to full inpatient stays with at least one overnight stay.

### Information on methodology, definitions:

The hospital discharge statistics are **secondary statistics** based on administrative data, which are derived on the one hand from the diagnosis and services documentation of Austrian hospitals and on the other hand from the hospital statistics of the Federal Ministry of Social Affairs, Health, Nursing and Consumer Protection.

The hospital discharge statistics have been kept in electronic form by Statistics Austria since the reference year 1989. In the **STATcube statistical database**, the data from the diagnosis and performance reports and from the hospital statistics are merged. The main diagnoses of hospital discharges are recorded according to the International Statistical Classification of Diseases and Related Health Problems (ICD-10) in the version adapted for Austria, and the individual medical services are recorded according to the LKF (“leistungsorientierte Krankenanstaltenfinanzierung”) service catalogue.

For each inpatient hospitalisation, a **main diagnosis** is given at the time of discharge; this is the diagnosis that proved to be the main reason for the inpatient hospitalisation. Accordingly, the principal diagnosis may not be the admission diagnosis, nor may it always be the diagnosis with which a patient is discharged for further treatment. A new disease or complication acquired during the hospital stay cannot be a main diagnosis. In the case of deaths, it is to be noted that the principal diagnosis is not always the same as the cause of death.

The number of inpatient stays corresponds to the number of discharges from Austrian **hospitals** according to the Hospitals and Health Resorts Act (KAKuG). Each hospital is assigned to one of the four **care sectors**: acute care, rehabilitation, long-term care and recovery/prevention.

Hospital discharge statistics are case-based rather than person-based, i.e. multiple discharges of the same person during a reference year are counted several times.

The calculation of the average **length of stay** does not include **zero-night stays (day cases)** where admission and discharge take place on the same day. This calculation method is in line with international standards.

**Full inpatient stays** are hospital stays with at least one overnight stay. Midnight stays are counted here.

Data on hospital discharges are reported annually by Statistics Austria to the OECD, Eurostat and WHO and published in their databases and publications. Further analyses of hospital discharge statistics are also regularly published in Statistics Austria's monthly publication “Statistische Nachrichten” (in German):

Prammer-Waldhör, M. (Vienna 2023): „Acute inpatient mental health care in the pandemic“, in Statistics Austria: Statistische Nachrichten, 9/2023, P. 700–714.

Prammer-Waldhör, M. (Vienna 2022): „Inpatient Care during the Pandemic“, in Statistics Austria: Statistische Nachrichten, 9/2022, P. 677–693.

Prammer-Waldhör, M. (Vienna 2021): „Inpatient Psychiatric Acute Care in Austria“, in Statistics Austria: Statistische Nachrichten, 10/2021, P. 787–805.

Prammer-Waldhör, M. (Vienna 2020): „Inpatient Health Care in public and private hospitals in the year 2018“, in Statistics Austria: Statistische Nachrichten, 05/2020, P. 341–352.

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