

# Hospital Admissions for People with Learning Disabilities: Systematic Review

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## Introduction

People with learning disabilities have considerably more health problems than other people, and a different pattern of health problems<sup>1</sup>. Their health problems might therefore be different.



Ambulatory care conditions are medical conditions, which if managed effectively at the primary care level, should not lead to a hospital admission e.g. diabetes and epilepsy<sup>2</sup>.



## Project Aims

The project aimed to find out:

- 1) Are people with learning disabilities admitted to hospital more frequently than the general population?
- 2) Are people with learning disabilities admitted to hospital for the same reasons as the general population?
- 3) Do people with learning disabilities have more admissions for ambulatory care conditions, a marker for avoidable admissions, than the general population?

## Methods

A systematic review was conducted to address these questions. Databases searched included PsychINFO, Science Direct, Medline, the Cochrane Database, and the Web of Science Core Collection.

### Inclusion Criteria:

- Learning disabilities
- Reported frequency of and/or reason for admission compared to the general population
- In-patient admissions for physical medical conditions
- English language papers



### Exclusion Criteria:

- Data for people with learning disabilities not separately reported
- Less than 50% of the sample had learning disabilities
- Psychiatric admissions only
- Accident and Emergency admissions only
- Case series of less than 20

## Conclusions

People with learning disabilities are admitted to hospital more often for non-ambulatory conditions, and when admitted they stay longer than the general population.

They also have more hospital admissions that should have been avoidable (ambulatory care conditions).

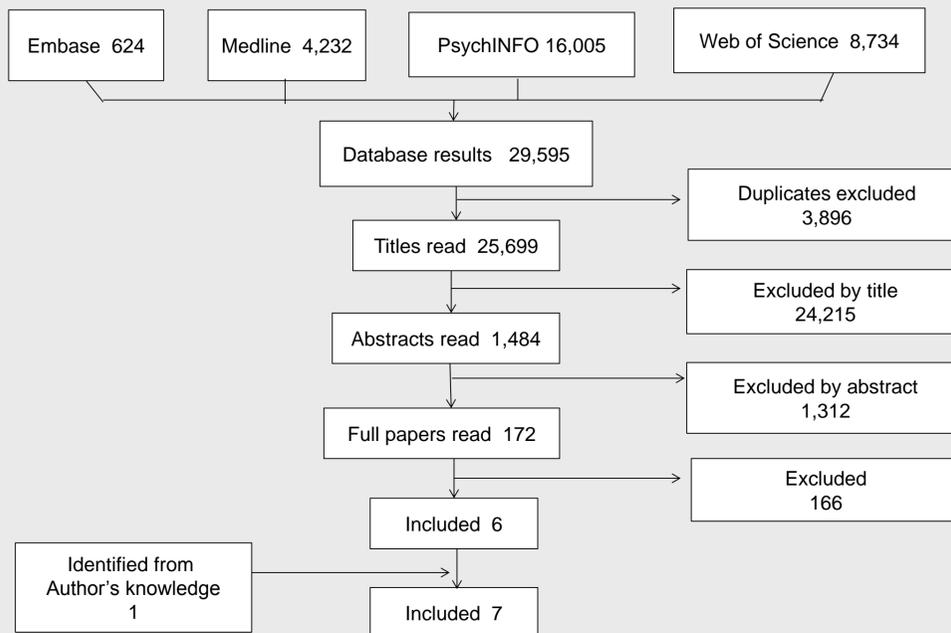
There is insufficient evidence to conclude whether the types of hospital admissions differ. If we knew this, it could guide practitioners in focussing effort and resources, and prioritising, supporting and training staff working on the types of wards with higher usage by people with learning disabilities.



We need to understand this better to inform how to reduce admissions and repeat admissions, and improve the admission experience for people with learning disabilities.

The Scottish Learning Disabilities Observatory is investigating this further.

## Systematic Review Flowchart



## Results

Only seven studies addressed our questions

### Non-ambulatory care admissions

- Four papers found that adults with learning disabilities are admitted to hospital more often than the general population, but did not standardise this for prevalence of condition.
- Four of five found that, once admitted, adults with learning disabilities had a longer length of stay than other people: the other paper found similar length of stay.
- There was no clear pattern of types of admissions in the 3 papers that reported this.



### Ambulatory care admissions

- Two papers reported a higher rate of admissions for ambulatory care conditions than in the general population, after standardising admission rates for the prevalence of condition.

## Limitations

- Small number of studies
- All included papers had limitations
- For 4 studies, the general population and learning disability populations were not age/gender matched

## References

<sup>1</sup>Williams, K., Leonard, H., d'Espaignet, E.T., Colvin, L., Slack-Smith, L., & Stanley, F. (2005). *Archives of disease in childhood*. **90**(12) 1243-1248.

<sup>2</sup>Billings, J., Zeitel, L., Lukomnik, J., Carey, T.S., Blank, A.E., Newman, L. (1993). *Health affairs*. **12**(1), 162-173.