## Children's Mercy Kansas City

## SHARE @ Children's Mercy

Research Days

GME Research Days 2019

May 14th, 12:45 PM - 1:00 PM

# The disproportionate impact of obesity among hospitalized children

Kathyrn Kyler Children's Mercy Hospital

Let us know how access to this publication benefits you

Follow this and additional works at: https://scholarlyexchange.childrensmercy.org/researchdays

Part of the Higher Education and Teaching Commons, Medical Education Commons, Pediatrics Commons, and the Science and Mathematics Education Commons

Kyler, Kathyrn, "The disproportionate impact of obesity among hospitalized children" (2019). *Research Days.* 5.

https://scholarlyexchange.childrensmercy.org/researchdays/GME\_Research\_Days\_2019/GME\_Research\_Days\_Two/5

This Oral Presentation is brought to you for free and open access by the Conferences and Events at SHARE @ Children's Mercy. It has been accepted for inclusion in Research Days by an authorized administrator of SHARE @ Children's Mercy. For more information, please contact hlsteel@cmh.edu.

## Title: The disproportionate impact of obesity among hospitalized children

Submitting/Presenting Author (must be a trainee): Kathryn Kyler Primary Email Address: kekyler@cmh.edu

☐Resident/Psychology Intern XX Fellow

**Primary Mentor (one name only):** Jessica Bettenhausen **Other authors/contributors involved in project:** Matt Hall

#### **IRB Number:**

### Describe role of Submitting/Presenting Trainee in this project (limit 150 words):

Kate Kyler is the 3<sup>rd</sup> year Pediatric Hospital Medicine Fellow. She is the principal investigator on this project, and will be the primary author on the manuscript. Her primary research interest is in how obesity affects hospitalized children, including outcomes and health services research.

#### Background, Objectives/Goal, Methods/Design, Results, Conclusions limited to 500 words

**Background:** Obesity continues to affect children at epidemic proportions and is associated with poor hospitalization outcomes. As the number of hospitalized children with obesity rises, it is important for hospitals to determine which service lines care for large proportions of children with obesity, allowing for targeted planning and intervention to improve the safety of care provided to this population.

**Objectives/Goal:** To determine the overall prevalence and the annual change in prevalence of obesity for hospitalized children by clinical service line and All Patient-Refined Diagnosis Related Groups (APR-DRG).

**Methods/Design:** We performed a retrospective, longitudinal cohort study of children aged 2-19 years hospitalized at a single academic institution between 1/1/2009 and 12/31/2016. Body mass index (BMI) was calculated from documented height and weight; children with obesity were defined using age and sex specific BMI percentile guidelines established by the Centers for Disease Control and Prevention (CDC). Annual rates of obesity were calculated for service line and APR-DRG group. Chi-square tests determined statistical differences between groups and the Cochran-Armitage test of trend described changes in obesity over time.

**Results:** Of 83,329 hospitalized children, 15.0% (n=12,525) had obesity, with an increasing trend from 14.5% of hospitalizations in 2009-10 to 15.4% in 2015-16 (p<0.001). Service lines with the highest prevalence of obesity included: Orthopedics (19.8%), Infectious Disease (18.3%), and Neuroscience (16.5%) (Figure 1). The annual prevalence of obesity increased within three service lines: Digestive Disease (12.2% in 2009-10 to 14.2% in 2015-16, p=0.004), Infectious Disease (16.5% in 2009-10 to 18.3% in 2015-16, p=0.037), and Other Surgery (15.0% in 2009-10 to 17.2% in 2015-16, p=0.008). The APR-DRGs with the highest obesity prevalence for the Orthopedics, Infectious Disease, and Neuroscience service lines were hip and femur procedures (n= 957, obesity prevalence: 26.5%), skin and soft tissue infections (n=1,901, obesity prevalence: 19.9%) and seizure (n= 3,037, obesity prevalence: 15.6%), respectively (Table 1).

**Conclusions:** Certain hospital service lines are disproportionately impacted by rising obesity rates in hospitalized children. As obesity rates rise in hospitalized children, hospitalization planning efforts should target these disproportionately affected groups through interventions improving safety, equity of care, and patient accommodations.

**Table 1**. Service lines and APR-DRGs with the highest prevalence of obese hospitalized children.

| cilliul ell.  |   |      |         |
|---------------|---|------|---------|
|               |   |      |         |
|               |   |      |         |
| Service Line  | APR-DRG Description                               | N    | % Obese |
| Cancer Care / | Chemotherapy*                                     | 2961 | 12.3    |
| Hematology    | Major hematologic/immunologic diagnosis*          | 1372 | 10.1    |
|               | Sickle cell anemia crisis                         | 1291 | 7.8     |
| Cardiac Care  | Percutaneous cardiovascular procedures w/o AMI    | 388  | 12.4    |
|               | Cardiac arrhythmia & conduction disorders*        | 356  | 14.6    |
|               | Other cardiothoracic procedures*                  | 355  | 8.5     |
| Respiratory   | Asthma  | 7365 | 15.9    |
| Service       | Pneumonia   | 2825 | 13.9    |
|               | Bronchiolitis & RSV pneumonia                     | 1156 | 11.1    |
| Orthopedics   | Hip & femur procedures for non-trauma             | 957  | 26.5    |
|               | Dorsal & lumbar fusion procedures                 | 674  | 13.6    |
|               | Knee & lower leg procedures except foot           | 637  | 25.6    |
| Transplants   | Bone marrow transplant                            | 214  | 11.2    |
|               | Kidney transplant                                 | 91   | 15.4    |
|               | Liver transplant &/or intestinal transplant       | 20   | 15.0    |
| Digestive     | Appendectomy                                      | 3105 | 15.2    |
| Disease       | Other digestive system diagnoses                  | 2855 | 15.0    |
|               | Non-bacterial gastroenteritis w nausea & vomiting | 2620 | 10.2    |
| Neuroscience  | Seizure   | 3037 | 15.6    |
| Service       | Migraine & other headaches                        | 906  | 21.0    |
|               | Other disorders of nervous system                 | 738  | 21.3    |
| Infectious    | Cellulitis & other bacterial skin infections      | 1901 | 19.9    |
| Disease       | Viral illness                                     | 711  | 13.6    |
|               | Fever   | 421  | 12.6    |
| Other         | Diabetes  | 2474 | 13.1    |
| Medicine      | Infections of upper respiratory tract             | 1842 | 13.9    |
|               | Poisoning of medicinal agents                     | 1340 | 18.4    |
| Other Surgery | Tonsil & adenoid procedures                       | 3946 | 20.1    |
|               | Other ear, nose, mouth & throat procedures        | 645  | 14.0    |
|               | Kidney & urinary tract procedures                 | 426  | 10.1    |

**Figure 1**. Percent of hospitalizations of patients with obesity by service line

