



New publications from the National Center for Health Statistics (NCHS) present data on changes in hospital inpatient surgical patterns, describe knowledge and attitudes among blacks and Hispanics about acquired immunodeficiency syndrome (AIDS), and provide the first release of vital statistics from NCHS for 1988.

Among the publications is the first to be printed by NCHS under its newly adopted practice calling for reports on the health of older Americans to be printed using large type for better readability. The first publication in the new format examines the impact of multiple chronic conditions among the elderly.

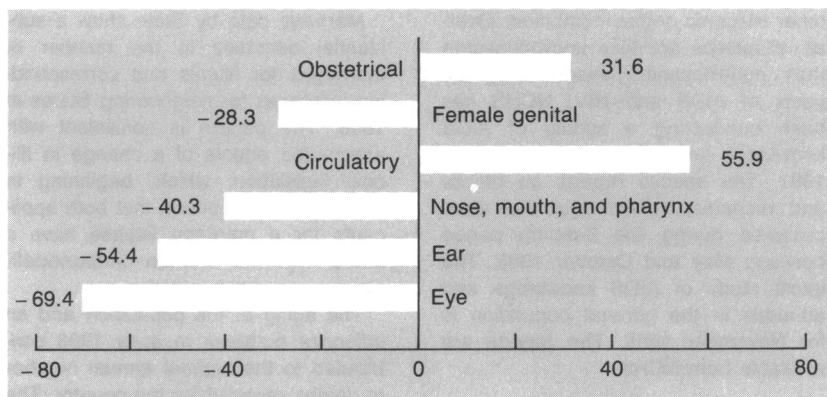
Concerns with rising health care costs, changes in reimbursement for health care expenditures, and advances in surgical technology are factors which have led to a rapid growth in ambulatory surgery performed in recent years. However, a new NCHS report, which explores patterns of inpatient surgery from 1983 to 1987, indicates that the growth in ambulatory surgery has not resulted in a decline in inpatient surgery. According to data from NCHS' National Hospital Discharge Survey, the numbers of several types of procedures that can be done on an ambulatory basis have declined for inpatients, but increased for other procedures. As a result, total inpatient surgery has not been decreasing.

Hospital Inpatient Surgery

As reported in "Hospital Inpatient Surgery, United States, 1983-87, Advance Data No. 169, "there have been sizable decreases in the numbers of cataract operations, dilation and curettage of uterus, tonsillectomies, rhinoplasties and myringotomies. Most of these procedures are now being performed in ambulatory surgery settings. During the same period, the number of inpatient obstetrical procedures increased by 1.4 million and the number of inpatient cardiovascular operations rose 1.1 million. Obstetrical procedures include cesarean section, repair of current obstetric laceration, and artificial rupture of membranes. Cardiovascular procedures include coronary bypass, coronary angioplasty, and cardiac catheterization (see chart).

In the period 1983-87, the numbers

Changes in rates of inpatient surgery, 1983-87



of discharges at short-stay, non-Federal hospitals decreased 5.4 million, from 38.8 million to 33.4 million. The discharge rate fell 17 percent during the period. However, the number of inpatient surgeries did not change significantly. The number of inpatient surgical procedures was 26.2 million in 1983 and 25.7 million in 1987. The average length of stay for patients with a surgical procedure showed no real change over this period.

There were changes in the age distribution of hospital patients with surgery. The number and rate of inpatient surgical procedures performed on children younger than 15 years declined by a third in the 5-year period. Many of the surgical procedures commonly performed on children are relatively uncomplicated and thus are likely possibilities for ambulatory surgery.

The report presents data on inpatient surgical procedures in 1983 and 1987 by age and sex, source of payment, and hospital bed size. Numbers and rates for categories of surgical procedures and specific procedures are examined, including the main surgical procedures, by age group. The data were collected from a sample of hospital records of discharged patients from a national sample of short-stay non-Federal hospitals.

AIDS Knowledge and Attitudes in the Black and Hispanic Populations

Two new reports from NCHS examine knowledge and attitudes about ac-

quired immunodeficiency syndrome (AIDS) and the human immunodeficiency virus (HIV) within the black and Hispanic populations. The reports, "AIDS Knowledge and Attitudes of Black Americans," and "AIDS Knowledge and Attitudes of Hispanic Americans," are based on responses to data collected through NCHS' National Health Interview Survey. The survey was administered to adults 18 years and older. The reports focus on differentials within the black and Hispanic populations, and differences between them and the white and non-Hispanic populations.

Patterns of knowledge and attitudes about AIDs and HIV are essentially the same for blacks and Hispanics as for the U.S. population, with the greatest levels of knowledge occurring among the young and well educated.

The data further suggest that all groups are well informed on the major risk factors for AIDS transmission, which are through sexual with an infected partner, through sharing unsterile needles, and from a mother to her newborn. For many other measures of knowledge about AIDS, however, blacks score slightly lower than whites, and Hispanics score lower than non-Hispanics.

Differing levels of AIDS knowledge and attitudes among blacks and whites continue to occur, even when controlled for education. This is especially evident in the area of perceived risk of HIV transmission. For example, 68 percent of black adults with 12 or more years of education think it very unlikely or definitely not possible to become infected with HIV by "working near

someone with the AIDS virus," compared to 78 percent of whites with 12 or more years of education.

Among Hispanics, those of Mexican ancestry are less knowledgeable about AIDS and HIV than are those of all other Hispanic origins combined. Overall, Hispanics are less knowledgeable than non-Hispanics about many aspects of AIDS and HIV. NCHS has been conducting a survey of AIDS knowledge and attitudes since August 1987. The special reports on blacks and Hispanics reflect data that were collected during the 6-month period between May and October 1988. The latest study of AIDS knowledge and attitudes in the general population is for November 1988. The reports are available from NCHS.

AIDS Knowledge and Attitudes for Black Americans, May–October 1988, Advance Data No. 165

AIDS Knowledge and Attitudes of Hispanic Americans, May–October 1988, Advance Data No. 166

Births Reached New High in 1988

A new NCHS publication, providing the first provisional statistics for 1988, estimates that 3,913,000 babies were born in the United States during 1988. The number is 2 percent larger than the number born in 1987 and the largest number reported for any year since 1964. The provisional birth rate was 15.9 live births per 1,000 total population, 1 percent higher than the rate for 1987. The fertility rate was 67.3 live births per 1,000 women aged 15–44 years, up 2 percent from 1987.

These and other statistics are provided in "Births, Marriages, Divorces, and Deaths for 1988," Monthly Vital Statistics Report, Vol. 37, No. 12. Provisional data reported are subject to change. The 1988 divorce rate remained the same as the rate for 1987, while the marriage rate decreased. An estimated 1,183,000 divorces were granted in 1988, 2 percent more than in 1987. The divorce rate of 4.8 per 1,000 population has remained unchanged from 1986, with the increase in divorces keeping pace with the increase in the total population. The divorce rate rose throughout the 1960s and 1970s, reaching 5.3 in 1979 and 1981. The divorce rate stabilized in the period 1982–85, fluctuating between 4.9 and 5.0. The rate since 1986 is the

lowest since 1975.

The 1988 marriage rate of 9.7 per 1,000 population is the lowest since 1967. An estimated 2.4 million couples married in 1988, 1 percent fewer than the total for 1987.

Marriage data by State show a substantial decrease in the number of marriages for Illinois and corresponding increases for neighboring States in 1988. The pattern is consistent with anticipated effects of a change in Illinois legislation, which, beginning in January 1988, required that both applicants for a marriage license have a blood test for human immunodeficiency virus (HIV) infection.

The aging of the population and an influenza outbreak in early 1988 contributed to the highest annual number of deaths reported for the country. The provisional total of deaths was 2,171,000. About 38,000 infant deaths occurred during 1988. The infant mortality rate of 9.9 per 1,000 live births was essentially the same as the rate for 1987.

Comorbidity and Disability

Is the existence of multiple chronic conditions, or comorbidity, common in the elderly? If so, how does comorbidity affect the overall health status and functional disability of this segment of the population? Data addressing such questions are presented in "Aging in the Eighties: The Prevalence of Comorbidity and its Association with Disability," Advance Data No. 170.

The analysis covers nine common self-reported chronic conditions, arthritis, hypertension, cataract, heart disease, varicose veins, diabetes, cancer, osteoporosis and hip fracture, and stroke. Data were collected in the 1984 Supplement on Aging to the National Health Interview Survey, a continuing household interview survey of the civilian, noninstitutionalized population.

The proportion of the population 60 years and older, with two or more of the nine chronic conditions, increased with age, and was higher for women than for men in each age group. For men, the prevalence of two or more of the chronic conditions was 35 percent for those 60–69 years of age, 47 percent for those 70–79, and 53 percent for those 80 and older. For women, the figures were 45, 61, and 70 percent respectively.

The impact of comorbidity is determined by estimating the prevalence of disability in activities of daily living

(ADL) (bathing, dressing, eating, getting in and out of bed or chair, walking, and toileting), according to the number of chronic conditions present. There is a clear, graded increase in the proportion with ADL disability, ranging from those with no chronic conditions to those with five or more. After adjusting for age, 52 percent of the men with five or more chronic conditions reported having difficulty with one or more activities of daily living. For women, the comparable figure was 64 percent.

This report is the first to be printed using larger type. Subsequent Advance Data issues on the health of older Americans are to be in the new format designed to be easier to read for those with visual impairment.

New NCHS Publications

Publications are available for sale by the Superintendent of Documents, U.S. Government Printing Office, Washington, DC, 20402, if the price is listed. Other publications and information are available from NCHS, Scientific and Technical Information Branch, 3700 East-West Highway, Hyattsville, MD 20782; tel. (301) 436-8500.

Anthropometric Data and Prevalence of Overweight for Hispanics: 1982–84, Vital and Health Statistics Series 11, No. 239; GPO Stock No. 017-022-01007-4; \$5.50.

Effects of the Prospective Payment System on Nursing Homes, Vital and Health Statistics Series 13, No. 98; GPO Stock No. 017-022-01071-2; \$2.50

Aging in the Eighties: The Prevalence of Comorbidity and Its Association with Disability, Advance Data No. 170

Births, Marriages, Divorces, and Deaths for 1988, Monthly Vital Statistics Report, Vol. 37, No. 12

Health Aspects of Pregnancy and Childbirth, United States, 1982. Vital and Health Statistics Series 23, no. 16; GPO stock no. 017-022-01053-4; \$4.00

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