

The health system is responsible for preventing health problems (i.e. prevention) and addressing acute or chronic health problems when they arise (i.e. treatment). Quality of care refers to achieving desirable health outcomes (e.g. longer and healthier lives), and avoiding any adverse effects that result from the health care processes themselves (Kelley and Hurst, 2006).

Mortality within 30 days after hospital admission for acute myocardial infarction (AMI or heart attack), is a well-recognised hospital care outcome indicator. Across OECD countries there has been a reduction of 2.6 deaths per 100 admissions of adults aged 45 and above between 2007 and 2017, with most countries showing improvement, notably Chile and the Slovak Republic (reduction of 5.7 deaths), and the Netherlands (5.4). Only Mexico reports a marginal increase in deaths. Iceland, Denmark, Norway, the Netherlands, Australia and Sweden have the lowest rates (all below 4%).

Primary care is usually the initial point of contact between patients and the health care system, which is responsible for the prevention, early diagnosis and managing of common health conditions. Asthma, chronic obstructive pulmonary disease (COPD) and congestive heart failure (CHF) are prevalent long-term conditions across OECD countries. These three conditions have well established treatments that can, for the most part, be delivered at the primary care level. A primary care system where accessible and high-quality services are provided can reduce acute deterioration in people living with asthma, COPD or CHF and reduce unnecessary admissions to a hospital (OECD, 2019).

The hospital admission rate for asthma and COPD was 183 per 100 000 population across OECD countries in 2017. Chile, Italy, Japan, Mexico and Portugal have admission rates less than one-half the OECD average. Hungary and Turkey, on the contrary, have close to twofold the rate of hospitalisations for these conditions. Latvia has the highest rate for asthma, with 93 admissions per 100 000 population, whereas Hungary has the highest rate for COPD (354 per 100 000).

On average, the rate of admissions for CHF was of 233 per 100 000 population in 2017 across OECD countries. Mexico has the lowest rate with 57, followed by Korea (88) and Chile (96). Poland has the highest rate of avoidable admissions related to this condition, 510 per 100 000, followed by Lithuania (502) and the Slovak Republic (479).

#### Methodology and definitions

The case-fatality rate for AMI measures the percentage of people aged 45 and over who die within 30 days following admission to hospital. The rates presented in Figure 11.23 refer to patients who died in the same hospital where they were initially admitted. Rates are age-sex standardised.

The indicators are defined as the number of hospital admissions with a primary diagnosis of asthma, COPD or CHF among people aged 15 years and over per 100 000 population. Rates are age-sex standardised to the 2010 OECD population aged 15 and over. Admissions resulting from a transfer from another hospital and where the patient dies during the admission are excluded from the calculation, as these admissions are considered unlikely to be avoidable.

#### Further reading

Kelley, E. and J. Hurst (2006), "Health Care Quality Indicators Project: Conceptual Framework Paper", *OECD Health Working Papers*, No. 23, OECD Publishing, Paris, <https://doi.org/10.1787/440134737301>.

OECD (forthcoming), *Health at a Glance 2019: OECD Indicators*, OECD Publishing, Paris

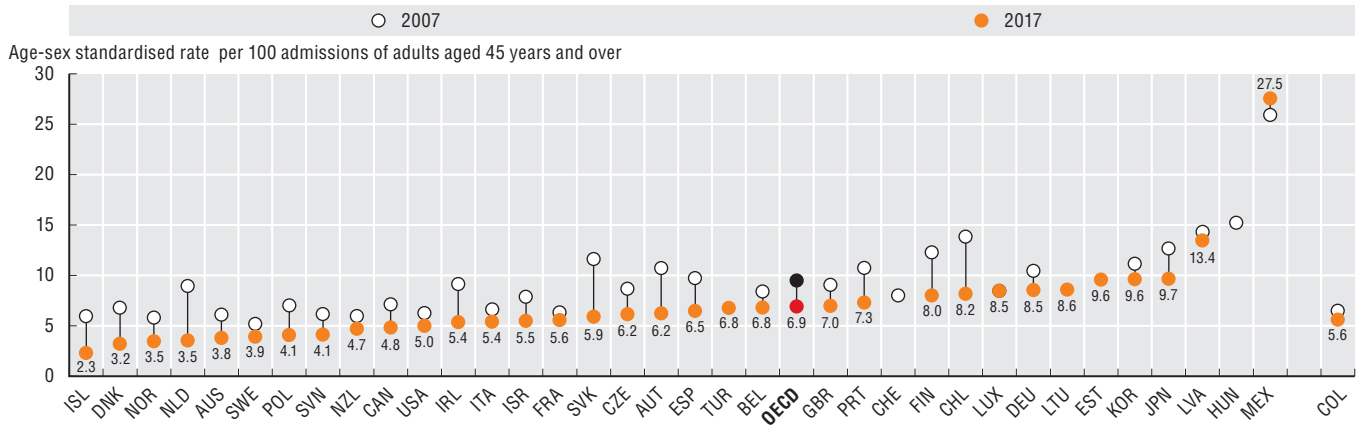
#### Figure notes

On data for Israel, see <http://doi.org/10.1787/888932315602>.

11.23. Data for Austria, Belgium, Chile, Japan, Korea, Latvia and the United Kingdom are for 2008; data for Finland, France, Mexico, Slovenia and Colombia are for 2009 instead of 2007. Data for France, Italy, Luxembourg and New Zealand are for 2015, for Australia, Iceland and the Netherlands are for 2016 instead of 2017. UK data are limited to England and presented at trust level (i.e. multiple hospitals).

11.24 and Figure 11.25. Data for Australia, Iceland, the Netherlands, Poland and the United States are for 2016. Data for France, Luxembourg, Switzerland and Turkey (only 11.24) are for 2015. Data for Belgium (only 11.24) and New Zealand are for 2014. Data for Hungary are for 2012, and data for Japan are for 2011 instead of 2017. Data for Greece and Latvia are not available. Data for 11.25 for Luxembourg and Japan are not available.

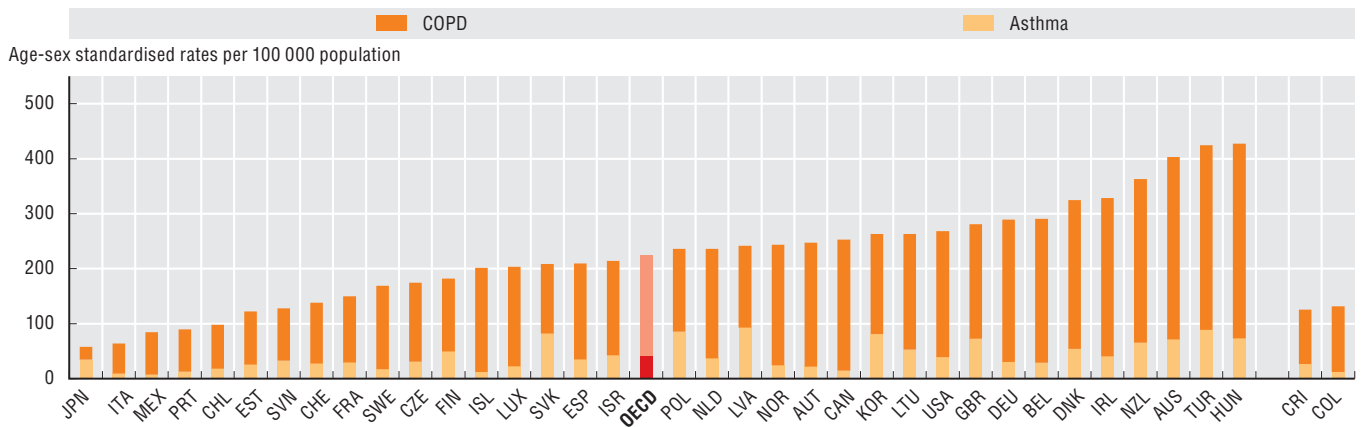
11.23 Thirty-day mortality after admission to hospital for AMI, 2007 and 2017



Source: OECD (2019), OECD Health Statistics (database).

StatLink <https://doi.org/10.1787/888934033840>

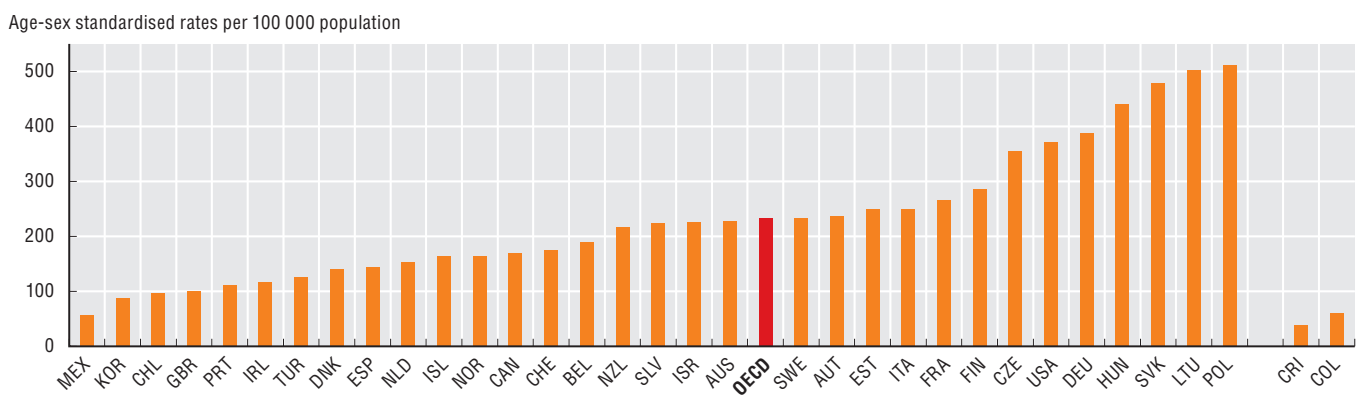
11.24 Asthma and COPD hospital admission in adults, 2017 (or nearest year)



Source: OECD (2019), OECD Health Statistics (database).

StatLink <https://doi.org/10.1787/888934033859>

11.25 Congestive heart failure (CHF) hospital admission in adults, 2017 (or nearest year)



Source: OECD (2019), OECD Health Statistics (database).

StatLink <https://doi.org/10.1787/888934033878>



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