Cervical spine injury
in admissions aged 60 years of age or over

Question

What was the acute hospital mortality for admissions aged 60 years or over, with cervical
spine injury, to all adult, general critical care units participating in the Case Mix Programme
(CMP), from 1 January 2001 to 31 December 2011, by the following age group categories:
60-64 years, 65-69 years, 70-74 years, 75-79 years, 80-84 years and 85 years or over.

Available data for report

873,944 admissions to 224 adult, general critical care units
1 January 2001 – 31 December 2011

Selection of Cases

All admissions aged 60 years or over, with cervical spine injury, to all adult, general critical
care units (i.e. excluding specialist critical care units and standalone high dependency units)
that were participating in the Case Mix Programme (CMP) from 1 January 2001 to 31
December 2011 were included in the analysis.

Definitions for variables included

Age was in whole years at the point of admission to the critical care unit.

The ICNARC Coding Method (ICM) is a 5-tiered hierarchical method specifically designed for
coding reasons for admission to critical care. Admissions with cervical spine injury were
identified as those with a recording of “cervical spine fracture or ligamentous injury” as either
the primary or secondary reason for admission.

Acute hospital mortality was defined as the status at ultimate discharge from acute hospital,
wherever.
Results

Table 1: Acute hospital mortality for admissions aged 60 years or over, with cervical spine injury, to all adult, general critical care units participating in the CMP between 1 January 2001 to 31 December 2011

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Total number of admissions</th>
<th>Number of admissions with cervical spine injury, n</th>
<th>Acute hospital mortality*, n (%) [N]</th>
</tr>
</thead>
<tbody>
<tr>
<td>60-64</td>
<td>87,414</td>
<td>221 (0.3)</td>
<td>40 (21.3) [188]</td>
</tr>
<tr>
<td>65-69</td>
<td>99,061</td>
<td>197 (0.2)</td>
<td>56 (32.0) [175]</td>
</tr>
<tr>
<td>70-74</td>
<td>108,042</td>
<td>171 (0.2)</td>
<td>50 (32.5) [154]</td>
</tr>
<tr>
<td>75-79</td>
<td>107,136</td>
<td>208 (0.2)</td>
<td>97 (49.0) [198]</td>
</tr>
<tr>
<td>80-84</td>
<td>73,418</td>
<td>175 (0.2)</td>
<td>95 (57.9) [164]</td>
</tr>
<tr>
<td>85+</td>
<td>41,258</td>
<td>117 (0.3)</td>
<td>77 (70.0) [110]</td>
</tr>
</tbody>
</table>

* Excluding readmissions to the critical care unit during the hospital stay

Acknowledgement

Please acknowledge the source of these data in all future presentations (oral and/or written), as follows:

“These data derive from the Case Mix Programme Database. The Case Mix Programme is the national, comparative audit of patient outcomes from adult critical care coordinated by the Intensive Care National Audit & Research Centre (ICNARC). These analyses are based on data for 873,944 admissions to 224 adult, general critical care units based in NHS hospitals geographically spread across England, Wales and Northern Ireland. For more information on the representativeness and quality of these data, please contact ICNARC.”