

## Viral and respiratory tract infections

Infections are an important reason for admission to Norwegian paediatric departments. Here we will describe the prevalence and variation, primarily of viral infections (except viral gastroenteritis), but also of some bacterial respiratory tract infections. Most infections described in this sample are self-limiting and will resolve without antibiotics, but they can affect a child's general state of health to such an extent that supportive treatment with intravenous fluids and nutrition or oxygen treatment/breathing support is required.

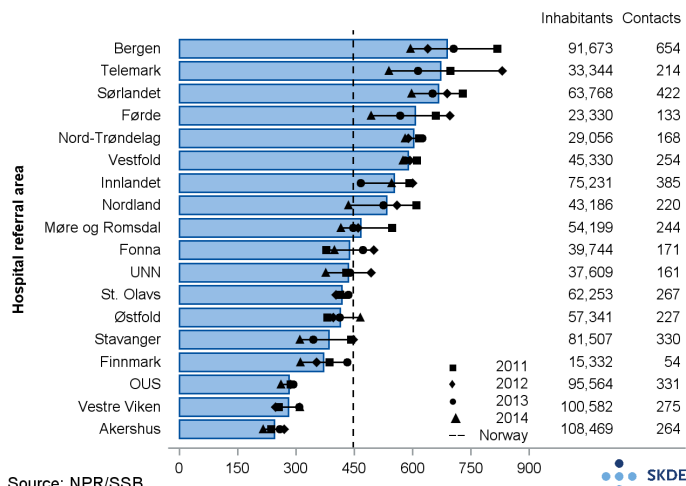
### Sample

The sample consists of children's admissions for viral and respiratory tract infections in the somatic specialist health service with a duration of at least 24 hours. Viral and respiratory tract infections are defined by a primary or secondary diagnosis (ICD-10) in code blocks B00-02, B08, B15-19, B25, B27, B33-34, J02-06, J13-14 or J18. Children aged 4-16 years who are diagnosed with bronchiolitis (J12 or J20-22) are also included here.

### Comments

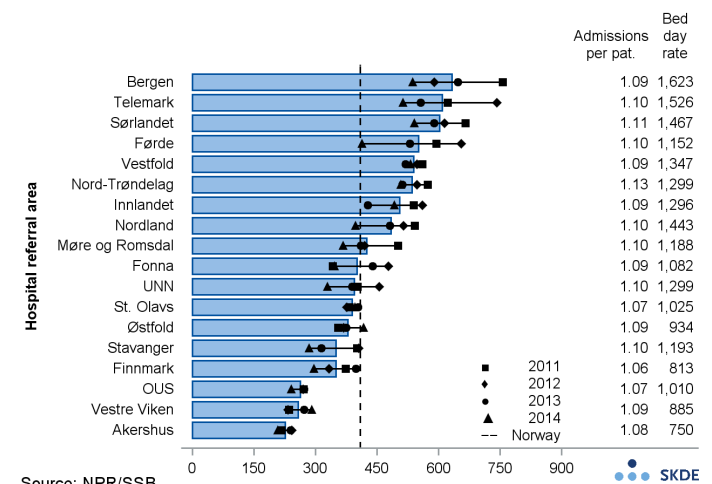
Viral and respiratory tract infections account for approx. 11% of all children's admissions for medical diagnoses in Norwegian hospitals.

The usage and patient rates for Bergen hospital referral area are 2.8 times higher than for Akershus. There is no significant difference in contact frequency between the hospital referral areas, and most children are only admitted once. Patients with these diagnoses are almost always admitted as emergency care cases.



Source: NPR/SSB

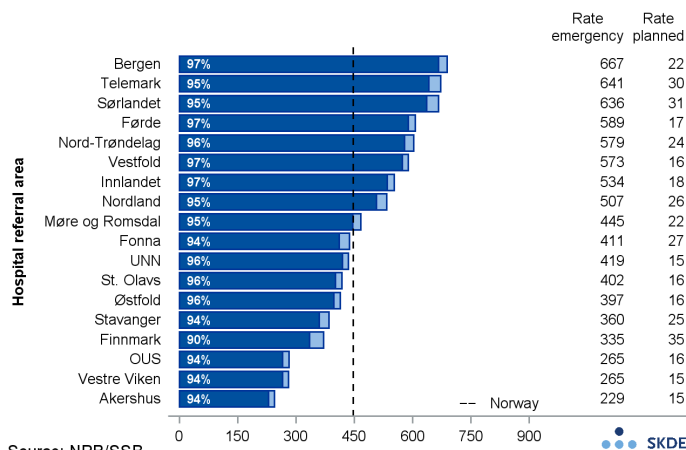
Viral and respiratory tract infections, admissions, age-adjusted usage rates per 100,000 children 0-16 year, per hospital referral area, per year and as an average for the period 2011-2014.



Source: NPR/SSB

Viral and respiratory tract infections, admissions, age-adjusted patient rates per 100,000 children 0-16 year, per hospital referral area, per year and as an average for the period 2011-2014. Average number of admissions per patient (contact frequency) and bed day rate.

■ Emergency care admissions ■ Planned admissions



Source: NPR/SSB

Viral and respiratory tract infections, admissions, by degree of urgency, age-adjusted usage rates per 100,000 children 0-16 year, per hospital referral area and as an average for the period 2011-2014.

There is a tendency towards falling admission rates from 2011 to 2014, particularly in the hospital referral areas with the highest rates. The three hospital referral areas with the lowest rates showed little variation during the period.

There are no known differences in morbidity or framework conditions that would explain this variation. There seems to be a trend towards lower usage rates in the hospital referral areas that had the highest rates at the beginning of the period, but there is still reason to ask whether unwarranted variation in usage rates between areas persists.