

University of Maryland Baltimore Graduate School

**Announcement of Doctoral Dissertation Defense\***

**Candidate:** Magdalena I. Tolea

**Date, Time, and Place:** 08/14/2007, 10:00 am, HH 224

**Dissertation Title:** Patterns of hospital utilization in the Old Order Amish

**Dissertation Abstract:**

*Background:* Despite their unique lifestyle, little is known about the health and the health care utilization of the Amish. Thus, to address some of these issues, we compared hospital utilization patterns in the Amish population of Lancaster County, Pennsylvania with those in non-Amish Whites. Our specific aims were to: 1) compare diagnosis-specific hospital discharge and procedure rates between Amish and non-Amish Whites; and 2) compare hospitalized Amish and non-Amish White on their health status at the time of hospital discharge.

*Methods and results:* We identified 477 Amish hospital discharges in Lancaster County, Pennsylvania over a period of three years. Data for non-Amish White hospitalizations came from the National Hospital Discharge Survey from the same period. Our results indicate that for nearly all diagnoses, the Amish have significantly fewer discharges than non-Amish Whites. The Amish also have fewer procedures done in the hospital. Regarding our second research aim, the results vary by age and sex. Thus, younger Amish female patients are similar with the comparison group on number of procedures, number of co-morbidities, and length of hospital stay. Younger Amish male patients though spend more time in the hospital in spite of having as many procedures and co-morbidities as non-Amish Whites. The older Amish patients on the other hand, have more procedures, but less co-morbidity and similarly-long length of hospital stays compared to non-Amish White patients.

*Conclusion:* In conclusion, we showed that the Amish are less likely to go to the hospital and have procedures in the hospital compared to non-Amish Whites. This could indicate that 1) they are healthier as some of the culturally-determined characteristics would point to; or 2) barriers to accessing hospital services play a more important role in explaining their hospital service utilization. Also, our findings were not consistent enough to allow us a clear statement regarding the health status of the Amish patients. More studies are needed to elucidate the factors likely to explain the lower rates of hospitalization and in-hospital procedures in the Amish population, as well as our findings on how the health of the Amish patients compares to that of non-Amish Whites.

**Dissertation Committee Chair** (name and title): Braxton D. Mitchell, PhD

**Dissertation Committee Members** (names and titles): John Sorkin, MD, PhD; Jay Magaziner, PhD; Toni I. Pollin, PhD; Jessica Kelley-Moore, PhD; Wendy S. Post, MD, MS

*\*The Open Presentation is open to the university community and invitees of the candidate. Any member of the Graduate Faculty may observe the Final Examination. Only committee members may vote.*