**Author’s response to reviews**

**Title:** Hospitalisations during the last year of life of nursing home residents: A retrospective cohort study from Germany

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**Author’s response to reviews:** see over
Dear Sirs,

Thank you very much for the latest helpful comments on our submitted paper. We are lucky, that we can meet the reviewer’s comments. In the following we listed the changes we have made:

Page 1 (abstract):

**RESULTS**: NH residents who died after NH stay of more than 1 year spent 5.8 % of their last year of life in hospitals.

**DISCUSSION**

Page 10, 1st para:

… To our knowledge, this was the first European longitudinal study regarding hospitalisation rates in the last months of life in a population-based sample of NH residents.

Page 10, 2nd para:

NH residents who died after NH stay of more than 1 year spent 5.8 % of their last year of life in hospitals. Relative time spent in hospitals increased from 5.2 % twelve months before death (N=139 persons) up to one quarter of time in hospital during the last week of life (N=769 persons). No major differences in hospitalisation rates during the last months of life could be observed concerning age, gender and duration of stay in NH. However, for all observed subgroups rates increased strongly during the last weeks of life.

Page 11, 1st para:

Overall, the hospitalization rates of deceased NH residents found in our study are much higher than corresponding rates from the United States.

Page 11, 2nd para:
Comparing our results with those of Bickel (1998) who reported an overall time spent in hospital during the last year of life of 9.3% in a representative population study of deceased persons in the same region of Germany, the relative time spent in hospital by deceased NH residents may appear to be lower than in the general population.

The reasons for the lower proportion of time spent in hospital during the last months of life of deceased NH residents compared to the general population might reflect a trend to deal more cautiously with hospital transfers of frail old people and to avoid high-technology interventions [7] [18] or ‘risky’ treatments with uncertain benefit in the oldest old [20] [21].

There is a widespread discussion about further reduction of hospitalisation rates of NH residents during their last months of life.