

LETTERS

HOSPITAL EPISODE STATISTICS

The riddle of the male obstetric patients: solvedChris Roebuck *HES programme head*

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I applaud Brennan and colleagues' initiative to encourage greater understanding of the importance of accurately coding clinical data.¹ This is a key focus of the Health and Social Care Information Centre, which manages hospital episode statistics (HES). We liaise closely with organisations to encourage submission of complete data, offer guidance and training on HES data, and seek to minimise inaccuracies. However, there is still room for improvement, and we are keen to increase our engagement with clinicians about hospital data.

HES are rich in detail and can be a powerful driver for decision making, as Brennan rightly points out. Her study shows this in several ways. It is an interesting and correct assertion that thousands of male finished consultant episodes were recorded under the obstetrics, gynaecological, and midwifery specialisms. At first glance this would appear out of the ordinary.

Further analysis of the data, by age and sex, showed that almost all such episodes related to newborn or very young babies. In fact, 96% of these episodes related to babies less than 1 week old, with the most likely explanation being that all these episodes were birth related and therefore treated by associated specialities.

For help or further information, or if readers spot any other findings in our data that they think are of interest, please contact enquiries@ic.nhs.uk or telephone +44 (0)845 300 6016.

Competing interests: None declared.

1 Brennan L, Watson M, Klaber R, Charles T. The importance of knowing context of hospital episode statistics when reconfiguring the NHS. *BMJ* 2012;344:e2432. (4 April.)

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