

The Influence of Comorbid Mood and Anxiety Disorders on Outcomes of Pediatric Patients Hospitalized for Pneumonia

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OBJECTIVES: Mood and anxiety disorders are associated with greater inpatient care utilization in children with chronic illness. We sought to investigate the association of mood or anxiety disorders and outcomes for hospitalized pediatric patients, using pneumonia as a model.

METHODS: We conducted a retrospective, cross-sectional study of pneumonia hospitalizations in patients 5 to 20 years old, using the nationally representative Healthcare Cost and Utilization Project's 2012 Kids' Inpatient Database. We used multivariable logistic and linear regression models stratified by age group to determine the independent association of mood or anxiety disorders with complications and length of stay, adjusted for clinical, demographic, and hospital characteristics.

RESULTS: Of 34 794 pneumonia hospitalizations, 3.5% involved a patient with a comorbid mood or anxiety disorder. Overall incidence of complications was 13.1%. Mean length of stay was 4.5 days. In adjusted models, comorbid mood or anxiety disorders were associated with greater odds of pneumonia complications in school-aged children (odds ratio 1.80; 95% confidence interval, 1.20–2.71) and adolescents (odds ratio 1.63; 95% confidence interval, 1.31–2.02). Hospitalizations with an associated mood or anxiety disorder were longer than those without, by 11.2% in school-aged children and 13.6% in adolescents ($P < .001$). The association of mood and anxiety disorders with longer hospital stay was not modified by the presence of pneumonia complications.

CONCLUSIONS: In pediatric patients hospitalized for pneumonia, a comorbid mood or anxiety disorder is associated with greater odds of complications and longer hospital stay. The presence of pneumonia complications did not influence the relationship between mood or anxiety disorders and length of stay.

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Authors:

Doupnik SK, Mitra N, Feudtner C, Marcus SC

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