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9(2)(a)

RE Official information request CDHB 10476

I refer to your email dated 9 November 2020 requesting the following information under the Official Information Act from Canterbury DHB. **And clarified on 19/11/2020 as below.** Specifically:

1. Please provide a yearly breakdown of how many people were treated at Canterbury District Health Board from 2015 to 2020 to date (including through the COVID-19 period) for alcohol related harm. People who have alcohol poisoning.
 - a. Broken down by age groups of those treated and ethnicity.
2. Please provide a yearly breakdown of how many people were admitted to Canterbury District Health Board from 2015 to 2020 to date (including through the COVID-19 period) for alcohol related harm. Those who have injured themselves with alcohol in their system
 - a. Broken down by age groups of those admitted and ethnicity.
3. Please provide a yearly breakdown of how many people died from alcohol related harm at Canterbury District Health Board from 2015 to 2020 to date (including through the COVID-19 period) Those who have been injured by others with alcohol in their system.
4. Please provide a yearly breakdown of the cost for each person who was treated at Canterbury District Health Board from 2015 to 2020 to date (including through the COVID-19 period) for alcohol related causes. Those who may be referred to the hospital from concerns around mental health issues relating to alcohol.
5. Other health issues such as being admitted for diseases that could impact a patient's liver, heart, brain etc relating to long term use of a long term use of alcohol.

Please refer to **Appendix 1** (attached)

Q 3. We do not hold information on cause of death for our patients in an easily retrievable electronic data system. Whether alcohol may have been a major or minor contributing factor in a person's death is difficult to determine without reviewing individual patient records. We are therefore declining a response to this question pursuant to section 18(f) of the Official Information Act i.e. *...the information cannot be made available without substantial collation and research.*"

Q 4 - Regarding the costs of these patients we have established total costs based on an average cost across this cohort of patients.

For total emergency events (16,710) across the five full and one part years we estimate a cost of \$5.0m (based on an average cost of \$300 per ED attendance).

For total inpatient events (10,468) we estimate a cost of \$8.4m (based on the case weighted discharge patient information), this equates to \$8K per inpatient event

I trust this satisfies your interest in this matter.

You may, under section 28(3) of the Official Information Act, seek a review of our decision to withhold information by the Ombudsman. Information about how to make a complaint is available at www.ombudsman.parliament.nz; or Freephone 0800 802 602.

Please note that this response, or an edited version of this response, may be published on the Canterbury DHB website after your receipt of this response.

Yours sincerely

A handwritten signature in blue ink, appearing to read 'R La Salle'.

Ralph La Salle
Acting Executive Director
Planning, Funding & Decision Support

Appendix 1

Table 1(a) Emergency Department Presentations by Age Cohort (includes Christchurch and Ashburton).

	Alcohol contributed flag = y OR diagnosis like '%alcohol%' OR presenting complaint 'Alcohol/drug intoxication or withdrawal.								
	Age Cohort (Years)								Total
Calendar Year	0-20	21-30	31-40	41-50	51-60	61-70	71-80	81-90 +	
2015	664	955	362	389	228	105	46	15	2764
2016	660	955	386	378	243	104	45	18	2789
2017	719	981	387	394	234	133	28	24	2900
2018	679	1190	519	491	319	185	91	30	3504
2019	705	1081	538	661	426	236	145	34	3826
2020*	413	655	395	331	313	169	59	21	2356

Note: 10-month period 1 January – 31 October 2020

Table 1(b) Emergency Department Presentations by Ethnicity (includes Christchurch and Ashburton)

	Alcohol contributed flag = y OR diagnosis like '%alcohol%' OR presenting complaint 'Alcohol/drug intoxication or withdrawal.			
	Ethnicity			Total
Calendar Year	European	Maori	Pacific/Other ethnicity	
2015	1983	593	188	2764
2016	1992	597	200	2789
2017	2072	609	219	2900
2018	2536	730	238	3504
2019	2809	734	283	3826
2020*	1700	474	182	2356

Note: 10-month period 1 January – 31 October 2020

Table 2(a) Number of acute admissions where alcohol was coded by Age Cohort. Acute poisoning by, and exposure to alcohol

	Age Cohort (Years)							Total
Calendar Year	0-20	21-30	31-40	41-50	51-60	61-70	71-90+	
2015	66	75	57	71	44	8	6	326
2016	41	68	48	65	35	18	3	278
2017	60	82	55	75	38	15	2	326
2018	42	91	63	78	29	19	-	321
2019	54	79	44	60	44	15	9	305
2020*	38	63	45	28	23	12	2	208

Note: 10-month period 1 January – 31 October 2020

Table 2(b) Number of acute admissions where alcohol was coded by Ethnicity. Acute poisoning by, and exposure to alcohol

	Ethnicity			Total
Calendar Year	European	Maori	Pacific/Other ethnicity	
2015	260	48	18	326
2016	234	38	6	278
2017	243	65	18	326
2018	246	58	17	321
2019	236	49	20	305
2020*	155	42	11	208

Note: 10-month period 1 January – 31 October 2020

Table 3 Mental and Behavioural Disorders due to use of alcohol – could be Acute or Chronic by Age Cohort

Calendar Year	Age Cohort (Years)							Total
	0-20	21-30	31-40	41-50	51-60	61-70	71-90+	
2015	129	272	226	381	338	270	208	1824
2016	119	232	247	355	295	246	171	1665
2017	136	270	237	347	321	212	199	1722
2018	134	270	253	374	351	273	224	1879
2019	127	258	225	436	367	286	259	1958
2020*	87	209	184	237	318	221	164	1420

Note: 10-month period 1 January – 31 October 2020

Table 3(a) Mental and Behavioural Disorders due to use of alcohol – could be Acute or Chronic by Ethnicity

Calendar Year	Ethnicity			Total
	European	Maori	Pacific/Other ethnicity	
2015	1476	274	74	1824
2016	1331	248	86	1665
2017	1306	312	104	1722
2018	1474	329	76	1879
2019	1540	294	124	1958
2020*	1086	227	107	1420

Note: 10-month period 1 January – 31 October 2020