

# Canterbury

District Health Board

Te Poari Hauora o Waitaha

## CORPORATE OFFICE

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15 March 2018

[REDACTED]  
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Email: [REDACTED]

Dear [REDACTED]

### RE Official information request CDHB 9797

I refer to your email dated 19 February 2018 requesting the following information under section 12 of the Official Information Act from Canterbury DHB.

**Please provide, for the 2008 and 2017 calendar years (broken down by year):**

- 1. The number of people admitted to emergency departments who were given a clinical code (either as primary diagnosis or otherwise) related to amphetamine use, abuse, withdrawal, dependence, so on)?**

We do not code our records for people who present at our Emergency Department. We can however provide you with information for the number of inpatients discharged from Canterbury DHB hospitals (excluding mental health) with ICD codes that specifically mention amphetamine.

Please refer to **Appendix 1, Table one** and **Fig (1)** (attached) for the number of inpatients discharged with ICD Codes:

- T43.61 - Psychostimulants with potential for use disorder, methyl-amphetamine
- T43.62 - Methylenedioxy methamphetamine and
- T43.69 (with some exclusions i.e. caffeine) - Other psychostimulants with potential for use disorder (With alternative description relating to MDMA/ECSTASY, AMPHETAMINE, METHAMPHETAMINE/ METHYLAMPHETAMINE)

### Please note:

- That although you only asked for the years 2008 and 2017 we have provided you with the years in between as well to give you a broader picture and
- All but three patients were admitted from ED.

## **2. The same for patients admitted to acute mental health services?**

In 2008, eight people, admitted to Canterbury DHB Specialist Mental Health Services acute mental health inpatient units, were given an amphetamine related diagnosis. For 2017, this figure was six people.

Please note that an amphetamine related diagnosis may not always be entered against an admission if it was not the primary focus of treatment for example someone may be admitted with a drug-induced psychosis, this will be recorded as psychosis.

## **3. The same for CADS**

In 2008, 108 people assessed by CADS (Community Alcohol and Drugs Service) were given an amphetamine related diagnosis. In 2017, this figure dropped to 33.

The management of referrals and assessments for alcohol and drug treatment changed during this period. In 2008 GPs and others referred patients seeking alcohol and drug treatment to CADS. Today there is a centralised access pathway run largely by community/NGO providers where GPs refer their patients to. CADS is no longer a central access point to the AOD System and they now specialise in treating people with co-existing problems (moderate to severe mental illness and addiction) and supporting the wider system with clinical expertise.

**Please note** the reduction in amphetamine related referrals to CADS from 108 to 33 reflects the change in the pathway rather than fewer people referred overall. Latest data from the AOD Central Co-ordination Service shows that for calendar year 2017, of the total 2163 referrals, 248 were methamphetamine related, i.e. 11.5% of the total referrals received for the period.

I trust that this satisfies your interest in this matter.

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

Yours sincerely



Carolyn Gullery  
**General Manager**  
**Planning, Funding & Decision Support**

**Appendix 9797 Amphetamine Related Activity Christchurch Hospitals (excluding mental health)**

**Table One:** Inpatients discharged with ICD Code T43.61, T43.62 or T43.69 (with some exclusions i.e. caffeine).

Calendar Year Patient Discharged	T43.61 - Psychostimulants with potential for use disorder, methylamphetamine	T43.62 - Methylendioxy methamphetamine	T43.69 - Other psychostimulants with potential for use disorder <i>(With alternative description relating to MDMA/ECSTACY AMPHETAMINE METHAMPHETAMINE/ METHYLAMPHETAMINE)</i>
2008	2	0	2
2009	3	0	4
2010	3	0	6
2011	2	0	5
2012	4	0	5
2013	1	0	5
2014	6	0	8
2015	7	4	4
2016	14	8	4
2017	11	11	2

**Note** all but 3 patients were admitted from ED.

**Fig (1)**

