# Population health profile of the

## **Adelaide Western**

# Division of General Practice: supplement

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Interpretation of differences between data in this profile and similar data from other sources needs to be undertaken with care, as such differences may be due to the use of different methodology to produce the data.

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# Population health profile of the Adelaide Western Division of General Practice: supplement

This profile is a supplement to the *Population health profile of the Adelaide Western Division of General Practice*, dated November 2005, available from <a href="www.publichealth.gov.au">www.publichealth.gov.au</a>. This supplement includes an update of the population of the Adelaide Western Division of General Practice, as well as additional indicators and aspects of the Division's socioeconomic status, use of GP services and health. The contents are:

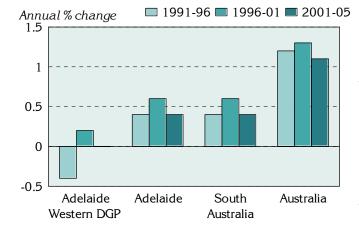
- Population [updated to June 2005]
- Additional socio-demographic indicators
- Unreferred attendances patient flow/ GP catchment
- Additional prevalence estimates: chronic diseases and risk factors combined
- Avoidable hospitalisations: hospital admissions resulting from ambulatory care sensitive conditions
- Avoidable mortality

For further information on the way Division totals in this report have been estimated, please refer to the 'Notes on the data' section of the *Population health profile*, November 2005 (www.publichealth.gov.au).

## Population

The Adelaide Western Division had an Estimated Resident Population of 219,568 at 30 June 2005.

Figure 1: Annual population change, Adelaide Western DGP, Adelaide, South Australia and Australia, 1991 to 1996, 1996 to 2001 and 2001 to 2005



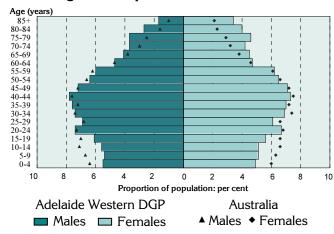
Over the five years from 1991 to 1996, the Division's population declined by 0.4% on average each year, compared to increases in Adelaide and South Australia (both 0.4%). From 1996 to 2001, the annual percentage increase in the Division was 0.2%, lower than the increases for Adelaide and South Australia (both 0.6%). There was no change in the Division's population from 2001 to 2005, compared to annual increases of 0.4% for Adelaide and South Australia. Population change at the national level was much higher in all periods.

Table 1: Population by age, Adelaide Western DGP and Australia, 2005

Age group (years)	Adelaide Western DGP		Australia
	No.	%	No. %
0-14	34,704	15.8	3,978,221 19.6
15-24	28,338	12.9	2,819,834 13.9
25-44	62,463	28.4	5,878,107 28.9
45-64	53,691	24.5	4,984,446 24.5
65-74	18,214	8.3	1,398,831 6.9
75-84	16,536	7.5	954,143 4.7
85+	5,622	2.6	315,027 1.5
Total	219,568	100.0	20,328,609 100.0

As shown in the accompanying table and the age-sex pyramid (Figure 2), the Adelaide Western DGP had relatively fewer children aged 0 to 14 years (15.8%) and young people aged 15 to 24 years (12.9%) than Australia as a whole (with 19.6% and 13.9%) (Table 1). Conversely, the proportions of the Division's population aged 65 years and over were higher than those for Australia.

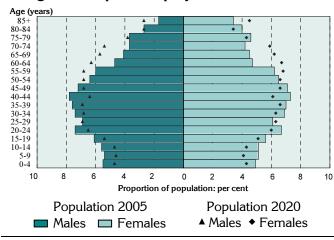
Figure 2: Population in Adelaide Western DGP and Australia, by age and sex, 2005



The most notable differences in the age distribution of the Division's population (when compared to Australia overall) are:

- at younger ages notably relatively fewer children at ages 0 to 14 years and young people aged 15 to 19 years;
- from 20 to 44 years slightly fewer females; and
- at older ages increasingly higher proportions, particularly for females.

Figure 3: Population projections for Adelaide Western DGP, by age and sex, 2005 and 2020



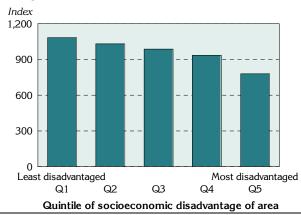
The population projections for the Division show a number of changes in age distribution, with the 2020 population projected to have:

- at younger ages relatively fewer children, young people and young adults, aged 0 to 24 years;
- from 30 to 49 years relatively fewer males and females; and
- at older ages relatively more males and females aged 50 years and over, excluding at ages 75 to 84 years, where the proportions are lower.

### Additional socio-demographic indicators

Please refer to the earlier *Population health profile of the Adelaide Western Division of General Practice*, dated November 2005, available from www.publichealth.gov.au, for other socio-demographic indicators.

Figure 4: Index of Relative Socio-Economic Disadvantage, Adelaide Western DGP, 2001



One of four socioeconomic indexes for areas produced at the 2001 ABS Census is the Index of Relative Socio-Economic Disadvantage.

The Adelaide Western DGP has an index score of 963, below the score for Australia of 1000: this score varies widely across the Division, from a low of 779 in the most disadvantaged areas to 1082 in the least disadvantaged areas.

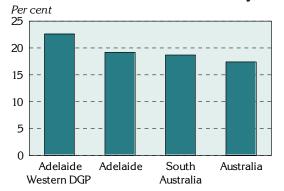
Note: each 'quintile' comprises approximately 20% of the population of the Division.

A new indicator, produced for the first time at the 2001 ABS Census, shows the number of jobless families with children under 15 years of age. There were notably more jobless families in the Adelaide Western DGP (22.6%), compared to Adelaide as a whole (19.2%) (Figure 5, Table 2).

With the introduction of the 30% rebate for private health insurance premiums, there was a once-off registration process, providing information of the postcode and residence of those who had such insurance (these data are not available at this area level for later dates). In 2001, the Division had a lower proportion of the population with private health insurance (51.4%), compared to Adelaide (54.2%) (Figure 5, Table 2).

Figure 5: Socio-demographic indicators, Adelaide Western DGP, Adelaide, South Australia and Australia, 2001





### Private health insurance, 30 June

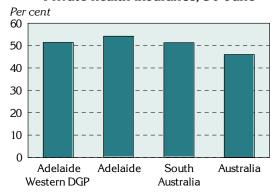


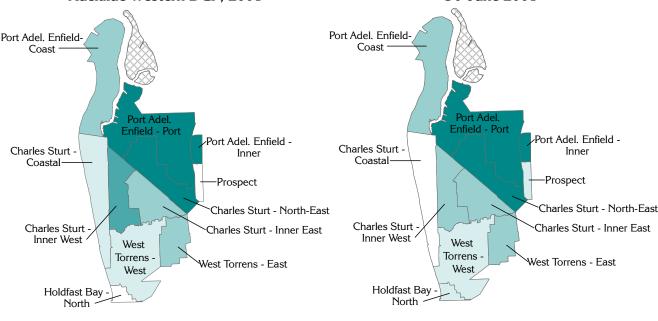
Table 2: Socio-demographic indicators, Adelaide Western DGP, Adelaide, South Australia and Australia, 2001

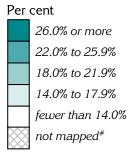
Indicator	Adelaide Western DGP		Adelaide		South Australia		Australia	
	No.	%	No.	%	No.	%	No.	%
Jobless families with children under 15 years old	4,511	22.6	21,478	19.2	29,203	18.7	357,563	17.4
Private health insurance (30 June)	108,740	51.4	581,532	54.2	754,598	51.3	8,671,106	46.0

Details of the distribution of jobless families (Map 1) and of the population covered by private health insurance (Map 2) are shown by Statistical Local Area (SLA) in Maps 1 and 2, respectively.

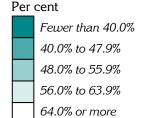
Map 1: Jobless families with children under 15 years of age by SLA, Adelaide Western DGP, 2001

Map 2: People covered by private health insurance by SLA, Adelaide Western DGP, 30 June 2001





<sup>&</sup>lt;sup>#</sup> data were not mapped: see 'Mapping' note under Methods



<sup>#</sup> data were not mapped: see
'Mapping' note under Methods

### GP services to residents of the Adelaide Western DGP

The following tables include information, purchased from Medicare Australia, of the movement of patients and GPs between Divisions. Note that the data only include unreferred attendances recorded under Medicare: unreferred attendances not included are those for which the cost is met by the Department of Veterans' Affairs or a compensation scheme; or are provided by salaried medical officers in hospitals, community health services or Aboriginal Medical Services, and which are not billed to Medicare. At any attendance, one or more services may have been provided.

Four fifths (80.0%) of all unreferred attendances to residents of Adelaide Western DGP were provided in the Division (ie. by a GP with a provider number in the Division): this represented 996,998 GP unreferred attendances (Table 3). A further 9.9% of unreferred attendances to residents were provided by GPs with a provider number in Adelaide Central and Eastern DGP, with 5.2% provided by GPs in Adelaide North East DGP.

Table 3: Patient flow – People living<sup>1</sup> in Adelaide Western DGP by Division where attendance occurred<sup>2</sup>, 2003/04

Division		Unreferred at	Unreferred attendances			
Number	Name	No.	%³			
501	Adelaide Western DGP	996,998	80.0			
504	Adelaide Central and Eastern DGP	123,915	9.9			
505	Southern DGP	54,561	4.4			
503	Adelaide North East DGP	30,686	2.5			
502	Adelaide Northern DGP	16,608	1.3			
Other		23,940	1.9			
Total		1,246,708	100.0			

<sup>&</sup>lt;sup>1</sup> Based on address in Medicare records

More than three quarters (77.2%) of unreferred attendances provided by GPs with a provider number in Adelaide Western DGP were also to people living in the Division (ie. their Medicare address was in the Division) (Table 4). A further 9.9% of unreferred attendances by GPs in the Division were to people living in Adelaide Central and Eastern DGP, with 4.4% to residents of Southern DGP.

Table 4: GP catchment – Unreferred attendances provided by GPs<sup>1</sup> in Adelaide Western DGP by Division of patient address<sup>2</sup>, 2003/04

Division		Unreferred at	tendances
Number	Name	No.	$\%^3$
501	Adelaide Western DGP	996,998	77.2
505	Southern DGP	90,269	7.0
503	Adelaide North East DGP	66,934	5.2
504	Adelaide Central and Eastern DGP	61,919	4.8
502	Adelaide Western DGP	46,411	3.6
Other		29,617	2.3
Total		1,292,148	100.0

<sup>&</sup>lt;sup>1</sup> Division of GP based on provider number

<sup>&</sup>lt;sup>2</sup> Division of GP based on provider number

<sup>&</sup>lt;sup>3</sup> Proportion of all unreferred attendances of patients with an address in Division 501 by Division in which attendance occurred

<sup>&</sup>lt;sup>2</sup> Based on address in Medicare records

<sup>&</sup>lt;sup>3</sup> Proportion of all unreferred attendances to GPs with a provider number in Division 501 by Division of patient address

# Additional prevalence estimates: chronic diseases and risk factors combined

Please refer to the earlier *Population health profile of the Adelaide Western Division of General Practice*, dated November 2005, available from <a href="www.publichealth.gov.au">www.publichealth.gov.au</a>, for the separate prevalence estimates of chronic disease; measures of self-reported health and risk factors. The process by which the estimates have been made, and details of their limitations, are also described in the 'Notes on the data' section of this earlier profile.

In this section two estimates, which combine the prevalence of selected chronic diseases with a risk factor, are shown for the Division. The measures are of people who *had asthma and were smokers*, and people who *had type 2 diabetes and were overweight or obese*: note that the estimates have been predicted from self-reported data, and are not based on clinical records or physical measures.

It is estimated that there were relatively more people in Adelaide Western DGP who had asthma and were smokers, compared to Adelaide or Australia as a whole (Figure 6, Table 5): that is, the prevalence rates per 1,000 population were higher. Similarly, there were relatively more people in Adelaide Western DGP who had type 2 diabetes and were overweight/ obese, compared to Adelaide or Australia.

Figure 6: Estimates of selected chronic diseases and risk factors, Adelaide Western DGP,
Adelaide and Australia, 2001



Table 5: Estimates of selected chronic diseases and risk factors, Adelaide Western DGP, Adelaide, South Australia and Australia, 2001

Variable	Adelaide Western DGP		Adelaide		South Australia		Australia	
	No. <sup>1</sup>	Rate <sup>2</sup>	No. <sup>1</sup>	Rate <sup>2</sup>	No. <sup>1</sup>	Rate <sup>2</sup>	No. <sup>1</sup>	Rate <sup>1</sup>
Had asthma & smoked <sup>3</sup>	4,850	22.2	23,430	21.3	32,487	22.3	397,734	20.8
Had type 2 diabetes & were overweight/ obese <sup>4</sup>	4,166	16.9	17,762	15.7	23,187	14.9	283,176	15.2

<sup>&</sup>lt;sup>1</sup> No. is a weighted estimate of the number of people in Adelaide Western DGP reporting these chronic conditions/ with these risk factors and is derived from synthetic predictions from the 2001 NHS

<sup>&</sup>lt;sup>2</sup> Rate is the indirectly age-standardised rate per 1,000 population

<sup>&</sup>lt;sup>3</sup> Population aged 18 years and over

<sup>&</sup>lt;sup>4</sup> Population aged 15 years and over

# Avoidable hospitalisations: hospital admissions resulting from ambulatory care sensitive conditions

The rationale underlying the concept of avoidable hospitalisations is that timely and effective care of certain conditions, delivered in a primary care setting, can reduce the risk of hospitalisation. Admissions to hospital for these ambulatory care sensitive (ACS) conditions can be avoided in three ways. Firstly, for conditions that are usually preventable through immunisation or nutritional intervention, disease can be prevented almost entirely. Secondly, diseases or conditions that can lead to rapid onset problems, such as dehydration and gastroenteritis, can be treated. Thirdly, chronic conditions, such as congestive heart failure, can be managed to prevent or reduce the severity of acute flare-ups to avoid hospitalisation.

This measure does not include other aspects of avoidable morbidity, namely potentially preventable hospitalisations (hospitalisations resulting from diseases preventable through population based health promotion strategies, e.g. alcohol-related conditions; and most cases of lung cancer) and hospitalisations avoidable through injury prevention (e.g. road traffic accidents).

For information on the ambulatory care sensitive conditions and ICD codes included in the analysis in this section, please refer to the *Atlas of Avoidable Hospitalisations in Australia: ambulatory care-sensitive conditions*, available from <a href="https://www.publichealth.gov.au">www.publichealth.gov.au</a>.

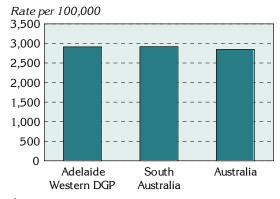
In 2001 to 2002, the 7,578 admissions from ambulatory care sensitive (ACS) conditions accounted for 8.0% of all admissions in the Adelaide Western DGP (Table 6, Figure 7), just below the levels in South Australia (8.5) and Australia (8.7%).

Table 6: Avoidable 1 and unavoidable hospitalisations, Adelaide Western DGP, South Australia, and Australia, 2001/02

Category	Adelai	de Western	DGP	Sou	ıth Australia	a	Australia			
	No.	Rate <sup>2</sup>	%	No.	Rate <sup>2</sup>	%	No.	Rate <sup>2</sup>	%	
Avoidable <sup>1</sup>	7,578	2,912.9	8.0	47,247	2,915.7	8.5	552,786	2,847.5	8.7	
Unavoidable	86,604	35,062.8	92.0	507,053	32,039.4	91.5	5,818,199	29,970.7	91.3	
Total	94,182	37,955.5	100.0	554,300	34,952.2	100.0	6,370,985	32,818.2	100.0	

<sup>&</sup>lt;sup>1</sup> Admissions resulting from ACS conditions

Figure 7: Avoidable hospitalisations<sup>1</sup>, Adelaide Western DGP, South Australia and Australia, 2001/02



The rate of avoidable hospitalisations in Adelaide Western DGP, 2,912.9 admissions per 100,000 population, is consistent with the rate in South Australia (a rate of 2,915.7), and higher than the rate for Australia (2,847.5).

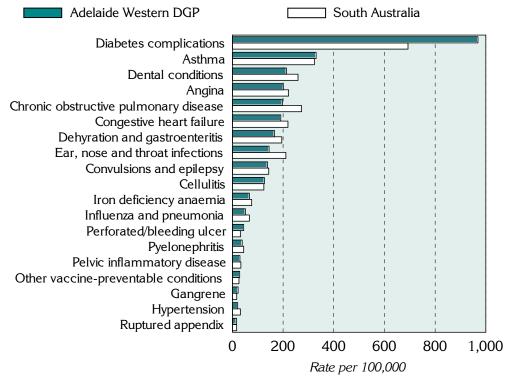
Diabetes complications, asthma, dental conditions, angina, chronic obstructive pulmonary disease and congestive heart failure were the six conditions with the highest rates of avoidable hospitalisations in the Adelaide Western DGP (Figure 8, Table 7).

Table 7 shows the number, rate and proportion of avoidable hospitalisations, for the individual ACS conditions, as well as the vaccine-preventable; acute; and chronic sub-categories. Two-thirds of avoidable hospitalisations are attributable to chronic health conditions. The predominance of hospitalisations for chronic conditions in this period can be primarily attributed to the large number of admissions for diabetes complications. Dental conditions and, dehydration and gastroenteritis, have the highest rates of avoidable hospitalisations for the acute conditions.

<sup>&</sup>lt;sup>2</sup> Rate is the indirectly age-standardised rate per 100,000 population

<sup>&</sup>lt;sup>1</sup> Admissions resulting from ACS conditions

Figure 8: Avoidable hospitalisations<sup>1</sup> by condition, Adelaide Western DGP and South Australia, 2001/02



<sup>1</sup> Admissions resulting from ACS conditions: excludes nutritional deficiencies as less than ten admissions

Table 7: Avoidable hospitalisations<sup>1</sup> by condition, Adelaide Western DGP, South Australia and Australia, 2001/02

Sub-category/ condition	Adelaide ' DG		South A	ustralia	Austr	ralia
	No.	Rate <sup>2</sup>	No.	Rate <sup>2</sup>	No.	Rate <sup>2</sup>
Vaccine-preventable	195	80.1	1,466	92.9	16,573	85.4
Influenza and pneumonia	131	51.2	1,075	67.0	13,021	67.1
Other vaccine preventable	64	28.9	391	25.9	3,552	18.3
Chronic <sup>3</sup>	5,445	1,977.3	30,607	1,837.6	352,545	1,816
Diabetes complications	2,726	968.9	11,640	692.9	141,345	728.1
Iron deficiency anaemia	187	67.1	1,271	76.1	16,451	84.7
Hypertension	59	20.9	532	31.6	6,354	32.7
Congestive heart failure	617	191.0	3,900	219.1	42,447	218.6
Angina	581	200.8	3,778	221.6	49,963	257.4
Chronic obstructive pulmonary disease	598	198.2	4,710	272.9	54,853	282.6
Asthma	677	330.4	4,776	323.4	41,009	211.3
Acute	2,142	942.5	16,405	1,077.6	200,913	1,035
Dehydration and gastroenteritis	422	166.4	3,111	194.8	37,766	194.5
Convulsions and epilepsy	300	139.0	2,153	143.6	31,137	160.4
Ear, nose and throat infections	282	144.6	3,046	210.9	32,075	165.2
Dental conditions	436	213.6	3,831	259.2	43,667	224.9
Perforated/bleeding ulcer	131	44.6	555	32.5	5,795	29.9
Ruptured appendix	35	16.6	255	17.0	3,866	19.9
Pyelonephritis	88	38.8	681	44.7	7,386	38.0
Pelvic inflammatory disease	64	29.9	497	33.7	6,547	33.7
Cellulitis	319	126.3	1,987	124.1	28,204	145.3
Gangrene	65	22.7	289	17.1	4,470	23.0
Total avoidable hospitalisations <sup>4</sup>	7,578	2,912.9	47,247	2,915.7	552,786	2,847.5

<sup>&</sup>lt;sup>1</sup> Admissions resulting from ACS conditions

<sup>&</sup>lt;sup>2</sup> Rate is the indirectly age-standardised rate per 100,000 population

<sup>&</sup>lt;sup>3</sup> Excludes nutritional deficiencies as less than ten admissions

<sup>&</sup>lt;sup>4</sup> Sub-category and condition numbers and rates do not add to the reported total avoidable admissions: five conditions (influenza & pneumonia, other vaccine preventable, diabetes complications, ruptured appendix and gangrene) are counted in 'any diagnosis', so may be included in more than one condition group

### Avoidable mortality

Avoidable and amenable mortality comprises those causes of death that are potentially avoidable at the present time, given available knowledge about social and economic policy impacts, health behaviours, and health care (the latter relating to the subset of amenable causes).

For information on the avoidable and amenable mortality conditions and ICD codes included in the analysis in this section, please refer to the *Australian and New Zealand Atlas of Avoidable Mortality*, available from <a href="https://www.publichealth.gov.au">www.publichealth.gov.au</a>.

Almost three quarters (72.3%) of all deaths in Adelaide Western DGP at ages 0 to 74 years over the period 1997 to 2001 are considered to be avoidable, slightly higher than the proportion for Adelaide (71.0%) (Table 8). However, the rate in the Division is notably higher than that in Adelaide, a differential of 1.12.

Deaths amenable to health care (amenable mortality, a subset of avoidable mortality) accounted for 28.4% of all deaths at ages 0 to 74 years in Adelaide Western DGP, compared to 29.2% in Adelaide.

Table 8: Avoidable and unavoidable mortality (0 to 74 years) by area, Adelaide Western DGP, Adelaide, South Australia and Australia, 1997 to 2001

Mortality category	Adelaide Western DGP		Adela	Adelaide South Aus		ustralia	stralia Australia	
	No.	Rate <sup>1</sup>	No.	Rate <sup>1</sup>	No.	Rate <sup>1</sup>	No.	Rate <sup>1</sup>
Avoidable	2,786	227.5	11,086	202.8	15,938	210.4	189,845	211.8
% of total	72.3	••	71.0		71.4	••	71.5	••
(Amenable)	(1,094)	(88.2)	(4,563)	(82.9)	(6,556)	(85.9)	(76,249)	(85.1)
(% of total)	(28.4)	()	(29.2)	()	(29.4)	()	(28.7)	()
Unavoidable	1,070	86.7	4,532	82.6	6,369	83.7	75,582	84.3
% of total	27.7	••	29.0	••	28.6	••	28.5	••
Total mortality	3,856	314.2	15,619	285.4	22,307	294.1	265,427	296.1
%	100.0		100.0	••	100.0	••	100.0	••

<sup>&</sup>lt;sup>1</sup> Rate is the indirectly age-standardised rate per 100,000 population

Rates of avoidable mortality were higher for males than for females in each of the comparator areas. Adelaide Western DGP's rate of avoidable mortality for males was 308.2 deaths per 100,000 males, twice the rate of 146.8 for females. Similarly, the rate of amenable mortality for males in the Division was higher, 104.7, compared to 71.7 for females, a rate ratio of 1.46 (Figure 9, Table 9).

Figure 9: Avoidable and amenable mortality by sex (0 to 74 years), Adelaide Western DGP, Adelaide, South Australia and Australia, 1997 to 2001

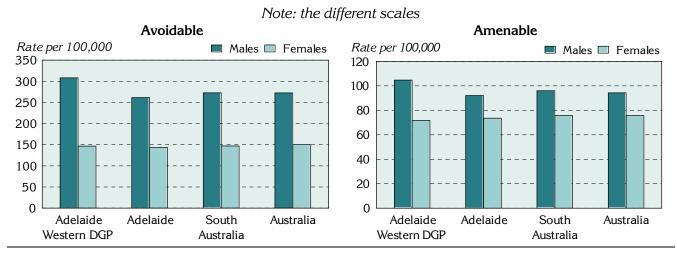


Table 9: Avoidable and amenable mortality (0 to 74 years) by sex, Adelaide Western DGP, Adelaide, South Australia and Australia, 1997 to 2001

Mortality category and sex	Adelaide Western DGP		Adela	laide South Austr		ustralia	tralia Australia	
	No.	Rate <sup>1</sup>	No.	Rate <sup>1</sup>	No.	Rate <sup>1</sup>	No.	Rate <sup>1</sup>
Avoidable								
Males	1,849	308.2	7,067	261.5	10,326	272.8	123,026	272.6
Females	937	146.8	4,019	143.3	5,612	147.2	66,819	150.1
Total	2,786	227.5	11,086	202.8	15,938	210.4	189,845	211.8
Rate ratio-M:F <sup>2</sup>	••	2.10**	••	1.82**	••	1.85**		1.82**
Amenable								
Males	638	104.7	2,503	92.1	3,671	96.0	42,568	94.3
Females	455	71.7	2,060	73.6	2,884	75.7	33,681	75.7
Total	1,094	88.2	4,563	82.9	6,556	85.9	76,249	85.1
Rate ratio-M:F <sup>2</sup>	••	1.46**		1.25**		1.27**	••	1.25**

<sup>&</sup>lt;sup>1</sup> Rate is the indirectly age-standardised rate per 100,000 population

Another way of measuring premature mortality is to calculate the number of years of life lost (YLL)<sup>1</sup>, which takes into account the years a person could have expected to live at each age of death based on the average life expectancy at that age.

The numbers of YLL for Adelaide Western DGP, Adelaide, South Australia and Australia over the period of analysis are shown in Table 10 by mortality category. However, given the substantial variation in the populations of these areas, a comparison of the proportion of YLL for each area is also shown.

YLL from avoidable mortality accounted for 72.6% of total YLL (0 to 74 years) for Adelaide Western DGP, higher than the 71.3% for Adelaide. The proportion of YLL from amenable mortality of 27.1% for Adelaide Western DGP was lower than the 28.5% for Adelaide.

Table 10: Years of life lost from avoidable mortality (0 to 74 years), Adelaide Western DGP, Adelaide, South Australia and Australia, 1997 to 2001

Mortality category	Adelaide Western DGP		Adela	Adelaide		South Australia		Australia	
	No.	% of	No.	% of	No.	% of	No.	% of	
		total		total		total		total	
Avoidable	46,213	72.6	189,430	71.3	273,135	71.8	3,327,375	71.9	
(Amenable)	(17,269)	(27.1)	(75,612)	(28.5)	(108,777)	(28.6)	(1,298,430)	(28.0)	
Unavoidable	17,408	27.4	76,164	28.7	107,223	28.2	1,303,289	28.1	
Total	63,622	100.0	265,594	100.0	380,358	100.0	4,630,664	100.0	

<sup>&</sup>lt;sup>2</sup> Rate ratio (M:F) is the ratio of male to female rates; rate ratios differing significantly from 1.0 are shown with p < 0.05; \*\* p < 0.01

<sup>&</sup>lt;sup>1</sup> Years of life lost were calculated using the remaining life expectancy method (this provides an estimate of the average time a person would have lived had he or she not died prematurely). The reference life table was the Coale and Demeny Model Life Table West level 26 female (for both males and females), with the YLL discounted to net present value at a rate of 3 per cent per year.

In each of the areas in Table 11, the majority of avoidable mortality at ages 0 to 74 years occurred in the 65 to 74 year age group (Table 11), with 1,451.1 deaths per 100,000 population in the Adelaide Western Division. The 45 to 64 year age group accounted for the next highest rate of avoidable death in all of the comparators, with a rate 326.8 in the Adelaide Western Division.

Table 11: Avoidable and amenable mortality by age, Adelaide Western DGP, Adelaide, South Australia and Australia, 1997 to 2001

Mortality category and age (years)	Adelaide Western DGP		Adela	aide	South A	South Australia		ralia
	No.	Rate <sup>1</sup>	No.	Rate <sup>1</sup>	No.	Rate <sup>1</sup>	No.	Rate <sup>1</sup>
Avoidable								
0-14	37	20.2	234	23.1	352	24.2	5,669	28.8
15-24	80	55.9	364	47.7	523	52.4	7,045	52.8
25-44	329	99.8	1,383	85.0	1,979	88.8	24,356	83.9
45-64	812	326.8	3,490	283.6	5,130	297.8	64,282	304.9
65-74	1,527	1,451.1	5,616	1322.6	7,954	1354.8	88,493	1,358.1
Total	2,786	227.5	11,086	202.8	15,938	210.4	189,845	211.8
Amenable								
0-24	39	12.1	223	12.9	324	13.3	5,083	15.4
25-44	71	21.8	361	22.1	507	22.6	5,946	20.5
45-64	326	130.2	1,538	124.3	2,248	130.1	27,464	130.3
65-74	658	621.8	2,441	572.8	3,477	591.6	37,756	579.4
Total	1,094	88.2	4,563	82.9	6,556	85.9	76,249	85.1

<sup>&</sup>lt;sup>1</sup> Rate is the indirectly age-standardised rate per 100,000 population

Table 12 shows the number and age-standardised death rate by selected major condition group and selected causes included in the avoidable mortality classification.

The highest rates of avoidable mortality for the selected major condition groups in the Adelaide Western DGP were for cardiovascular diseases, with a rate of 73.7 deaths per 100,000 population, and cancer, 71.1 deaths per 100,000 population (Table 12, Figure 10). For the selected causes within the condition groups, the two major causes of avoidable mortality were ischaemic heart disease and lung cancer, with rates of 52.4 per 100,000 population and 23.7 per 100,000, respectively.

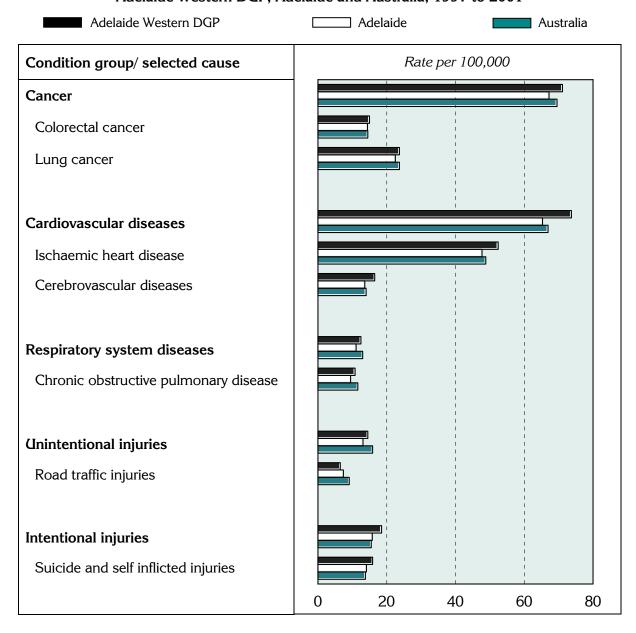
Table 12: Avoidable mortality (0 to 74 years) by major condition group and selected cause, Adelaide Western DGP, Adelaide, South Australia and Australia, 1997 to 2001

Condition group/ selected cause		Adelaide Western DGP		aide	South A	ustralia	Austi	ralia
	No.	Rate <sup>1</sup>	No.	Rate <sup>1</sup>	No.	Rate <sup>1</sup>	No.	Rate <sup>1</sup>
Cancer	888	71.1	3,720	67.2	5,209	67.8	62,338	69.5
Colorectal cancer	189	15.0	796	14.4	1,142	14.8	13,008	14.5
Lung cancer	302	23.7	1,251	22.5	1,728	22.3	21,208	23.7
Cardiovascular diseases	958	73.7	3,655	65.3	5,324	68.5	59,945	66.9
Ischaemic heart disease	676	52.4	2,658	47.7	3,918	50.5	43,712	48.8
Cerebrovascular diseases	219	16.5	770	13.6	1,086	13.9	12,558	14.0
Respiratory system diseases	169	12.5	627	11.1	897	11.4	11,612	13.0
Chronic obstructive pulmonary disease	148	10.8	544	9.5	783	9.9	10,395	11.6
Unintentional injuries	150	14.5	673	13.1	1,085	15.5	14,224	15.9
Road traffic injuries	67	6.5	380	7.4	687	9.9	8,138	9.1
Intentional injuries	192	18.5	809	15.8	1,138	16.3	13,891	15.5
Suicide and self inflicted injuries	165	15.9	725	14.1	1,018	14.5	12,393	13.8

<sup>&</sup>lt;sup>1</sup> Rate is the indirectly age-standardised rate per 100,000 population

With the exception of unintentional injuries, rates in the Division were above, or consistent with, those for Adelaide and Australia (Figure 10).

Figure 10: Avoidable mortality (0 to 74 years) by major condition group and selected cause, Adelaide Western DGP, Adelaide and Australia, 1997 to 2001



11

### Notes on the data

### Data sources and limitations

### General

References to 'Adelaide' relate to the Adelaide Statistical Division.

#### **Data sources**

Table 13 details the data sources for the material presented in this profile.

Table 13: Data sources

Section	Source			
Population				
Figures 1 and 2; Table 1	Estimated Resident Population, ABS, 30 June for the periods shown			
Figure 3	Estimated Resident Population, ABS, 30 June 2005; Population Projections, ABS, 30 June 2020 (unpublished) <sup>1</sup>			
Additional socio-demographic indicators				
Figure 4	ABS SEIFA package, Census 2001			
Table 2; Figure 5; Map 1	Jobless families, ABS, 2001 (unpublished)			
Table 2; Figure 5; Map 2	Private health insurance, from Hansard			
GP services – patient flow/ GP catchment				
Tables 3 and 4	Medicare Australia, 2003/04			
Additional prevalence estimates: chronic diseases and risk factors combined				
Figure 6; Table 5	Estimated from 2001 National Health Survey (NHS), ABS (unpublished)			
Avoidable hospitalisations: hospital admissions resulting from ambulatory care sensitive conditions				
Tables 6 and 7; Figures 7 and 8	National Hospital Morbidity Database at Australian Institute of Health & Welfare, $2001/02$ ; data produced in HealthWIZ by Prometheus Information (not available in public release dataset)			
Avoidable mortality				
Tables 8, 9, 10, 11 and 12; Figures 9 and 10	ABS Deaths 1997-2001; data produced in HealthWIZ by Prometheus Information (not available in public release dataset)			

<sup>&</sup>lt;sup>1</sup> The projected population at June 2020 is based on the 2002 ERP. As such, it is somewhat dated, and does not take into account more recent demographic trends: it is however the only projection series available at the SLA level for the whole of Australia.

### Methods

For background information on the additional prevalence estimates presented in this profile, please refer to the 'Notes on the data' section of the *Population health profile*, November 2005 (www.publichealth.gov.au).

Please also refer to the November 2005 profile for information on the data converters.

#### **Mapping**

In some Divisions the maps may include a very small part of an SLA which has not been allocated any population; or has a population of less than 100 or has less than 1% of the SLAs total population; or there were less than five cases (i.e. jobless families, people with health insurance): these areas are mapped with a pattern.

### Statistical geography of the Adelaide Western DGP

For information on the postcodes in the Division, please refer the Department of Health and Ageing website <a href="http://www.health.gov.au/internet/wcms/publishing.nsf/Content/health-pcd-programs-divisions-divspc.htm">http://www.health.gov.au/internet/wcms/publishing.nsf/Content/health-pcd-programs-divisions-divspc.htm</a>; also included in table format in the 'Notes on the data' section of the *Population health profile*, November 2005 (www.publichealth.gov.au).

Statistical Local Areas (SLAs) are defined by the Australian Bureau of Statistics to produce areas for the presentation and analysis of data. In this Division, most Local Government Areas (LGAs) have been split into SLAs. For example, Charles Sturt LGA is comprised of four SLAs - Coastal, Inner East, Inner West and North-East. All of these SLAs and all or parts of the other SLAs listed in Table 14 comprise the Division.

Table 14: SLAs and population in Adelaide Western DGP, 2005 on 2001 boundaries

SLA code	SLA name	Per cent of the SLA's population in the Division*	Estimate of the SLA's 2005 population in the Division
41061	Charles Sturt - Coastal	100.0	30,965
41064	Charles Sturt - Inner East	100.0	21,612
41065	Charles Sturt - Inner West	100.0	24,953
41068	Charles Sturt - North-East	99.1	25,690
42601	Holdfast Bay - North	35.6	7,013
44064	Marion - North	11.1	2,815
45894	Port Adelaide Enfield - Inner	21.8	4,203
45895	Port Adelaide Enfield - Coast	100.0	28,233
45898	Port Adelaide Enfield - Port	100.0	26,217
46510	Prospect	35.3	6,768
48411	West Torrens - East	75.0	17,909
48414	West Torrens - West	80.6	23,176
48899	Unincorporated Western	100.0	#

<sup>\*</sup> Proportions are approximate and are known to be incorrect in some cases, due to errors in the concordance used to allocate CDs to form postal areas. In addition, in a small number of cases, part(s) of an SLA can be allocated to another Division, sometimes several hundred kilometres away. Although adjustments have not been made to the concordance to correct these errors, the affected SLAs are highlighted in the table (shown in bold italic typeface)

## Acknowledgements

Funding for these profiles was provided by the Population Health Division of the Department of Health and Ageing (DoHA).

### Further developments and updates

When the re-aligned boundaries are released and DoHA have made known their geographic composition, PHIDU will examine the need to revise and re-publish these profiles (*Population health profile*, dated November 2005, and the *Population health profile*: supplement, dated March 2007).

### PHIDU contact details

For general comments, data issues or enquiries re information on the web site, please contact PHIDU:

Phone: 08-8303 6236 or e-mail: PHIDU@publichealth.gov.au

<sup>#</sup> Not shown as the total population is less than 100