Population health profile of the

Limestone Coast

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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This publication, the maps and supporting data, together with other publications on population health, are available from the PHIDU website (<u>www.publichealth.gov.au</u>).

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Population health profile

of the Limestone Coast Division of General Practice: supplement

This profile is a supplement to the *Population health profile of the Limestone Coast Division of General Practice*, dated November 2005, available from <u>www.publichealth.gov.au</u>. This supplement includes an update of the population of the Limestone Coast 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:

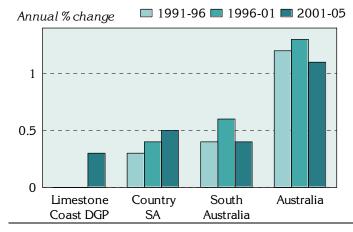
- Population [updated to June 2005]
- Additional socio-demographic indicators
- Unreferred attendances patient flow/ GP catchment
- Additional prevalence estimates: chronic diseases and risk factors combined
- Avoidable hospitalisations: hospital admissions resulting from ambulatory care sensitive conditions
- 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 Limestone Coast Division had an Estimated Resident Population of 63,499 at 30 June 2005.

Figure 1: Annual population change, Limestone Coast DGP, country South Australia, South Australia and Australia, 1991 to 1996, 1996 to 2001 and 2001 to 2005



Over the five years from 1991 to 1996, and from 1996 to 2001, there was no change in the Division's population, compared with small increases in country South Australia and South Australia. The Division's growth rate of 0.3% per year on average from 2001 to 2005 was below the annual increases for country South Australia (0.5%) and South Australia (0.4%).

Table 1: Population by age,	Limestone	Coast DGP	and Australia,	2005
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Age group (years)	Limeston DG		Austral	ia
_	No.	%	No.	%
0-14	13,617	21.4	3,978,221	19.6
15-24	7,847	12.4	2,819,834	13.9
25-44	17,337	27.3	5,878,107	28.9
45-64	16,072	25.3	4,984,446	24.5
65-74	4,456	7.0	1,398,831	6.9
75-84	3,121	4.9	954,143	4.7
85+	1,049	1.7	315,027	1.5
Total	63,499	100.0	20,328,609	100.0

As shown in the accompanying table and the age-sex pyramid (Figure 2), the Limestone Coast DGP had a relatively more children aged 0 to 14 years (21.4%) compared to Australia as a whole (with 19.6%) (Table 1). Conversely, the proportions of the Division's population aged 15 to 24 years (12.4%) and 25 to 44 years (27.3%) were lower than for Australia (with 13.9% and 28.9%).

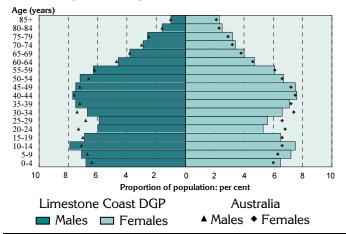
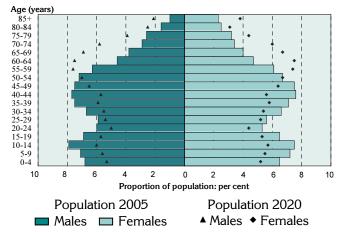


Figure 2: Population in Limestone Coast DGP and Australia, by age and sex, 2005

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

- at younger ages relatively more male and female children aged 0 to 14 years;
- from 15 to 34 years relatively fewer males and females; and
- from 45 years of age slightly more females aged 50 years and over, and more males between the ages of 45 and 54.

Figure 3: Population projections for Limestone Coast 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 and young people aged 0 to 19 years;
- from 20 to 54 years relatively fewer males and females; and
- from 55 years noticeably more males and females, particularly between 60 and 74 years of age.

Additional socio-demographic indicators

Please refer to the earlier *Population health profile of the Limestone Coast Division of General Practice*, dated November 2005, available from <u>www.publichealth.gov.au</u>, for other socio-demographic indicators.

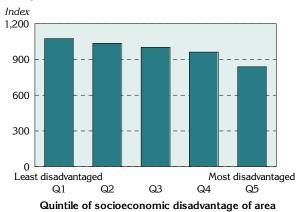


Figure 4: Index of Relative Socio-Economic Disadvantage, Limestone Coast DGP, 2001

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

The Limestone Coast DGP has an index score of 983, below the score for Australia of 1000: this score varies across the Division, from a low of 838 in the most disadvantaged areas to 1075 in the least disadvantaged areas.

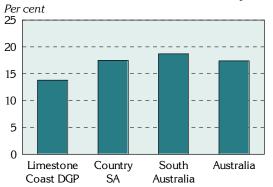
Note: each 'quintile' comprises approximately 20% of the population of the Division.

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 markedly fewer jobless families in the Limestone Coast DGP (13.8%), compared to country South Australia as a whole (17.5%) (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 higher proportion of people with private health insurance (47.2%), compared to country South Australia (43.5%) (Figure 5, Table 2).

Figure 5: Socio-demographic indicators, Limestone Coast DGP, country South Australia, South Australia and Australia, 2001

Jobless families with children under 15 years old



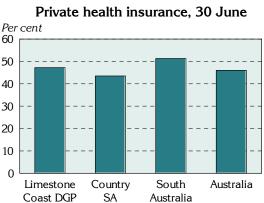
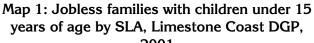
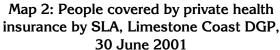


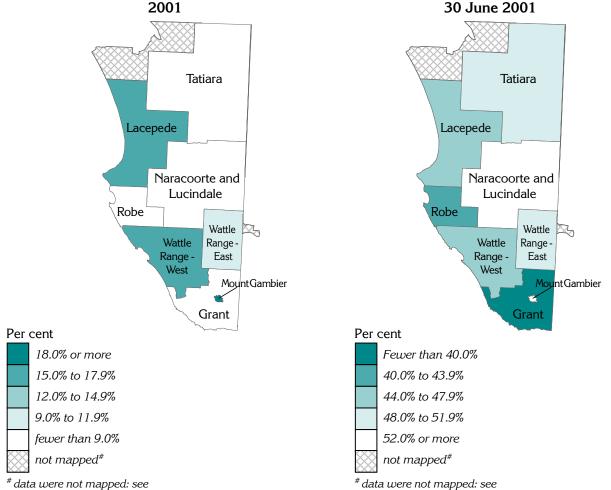
Table 2: Socio-demographic indicators, Limestone Coast DGP, country South Australia,South Australia and Australia, 2001

Indicator	Limestone Coast DGP		Country SA		South Australia		Australia	
	No.	%	No.	%	No.	%	No.	%
Jobless families with children under 15 years old	970	13.8	7,725	17.5	29,203	18.7	357,563	17.4
Private health insurance (30 June)	28,755	47.2	173,066	43.5	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.







" data were not mapped: see 'Mapping' note under Methods [#] data were not mapped: see 'Mapping' note under Methods

GP services to residents of the Limestone Coast 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.

The majority (92.3%) of all unreferred attendances to residents of Limestone Coast DGP were provided in the Division (ie. by a GP with a provider number in the Division): this represented 213,402 GP unreferred attendances (Table 3). A further 1.3% of unreferred attendances to residents were provided by GPs with a provider number in Adelaide Central and Eastern DGP, with 0.9% provided by GPs in Southern DGP.

Division		Unreferred attendances				
Number	Name	No.	% ³			
510	Limestone Coast DGP	213,402	92.3			
504	Adelaide Central and Eastern DGP	3,109	1.3			
505	Southern DGP	2,125	0.9			
501	Adelaide Western DGP	1,166	0.5			
324	Otway DGP	1,065	0.5			
330	West Victoria DGP	891	0.4			
502	Adelaide Northern DGP	891	0.4			
503	Adelaide North East DGP	834	0.4			
Other		7,766	3.3			
Total		231,249	100.0			

Table 3: Patient flow – People living¹ in Limestone Coast DGP by Division where attendance occurred², 2003/04

¹ Based on address in Medicare records

² Division of GP based on provider number

³ Proportion of all unreferred attendances of patients with an address in Division 510 by Division in which attendance occurred

The majority (95.6%) of unreferred attendances provided by GPs with a provider number in Limestone Coast DGP were also to people living in the Division (ie. their Medicare address was in the Division) (Table 4). The remaining 4.4% of unreferred attendances by GPs in the Division were to people living in surrounding Divisions.

Table 4: GP catchment – Unreferred attendances provided by GPs¹ in Limestone Coast DGP by Division of patient address², 2003/04

Division		Unreferred a	attendances
Number	Name	No.	% ³
510	Limestone Coast DGP	213,402	95.6
330	West Victoria DGP	1,630	0.7
324	Otway DGP	1,339	0.6
513	Murray Mallee DGP	1,212	0.5
502	Adelaide Northern DGP	978	0.4
505	Southern DGP	616	0.3
504	Adelaide Central and Eastern DGP	426	0.2
332	Mallee DGP	422	0.2
Other		3,262	1.5
Total		223,287	100.0

¹ Division of GP based on provider number

² Based on address in Medicare records

³ Proportion of all unreferred attendances to GPs with a provider number in Division 510 by Division of patient address

Additional prevalence estimates: chronic diseases and risk factors combined

Please refer to the earlier *Population health profile of the Limestone Coast Division of General Practice*, dated November 2005, available from <u>www.publichealth.gov.au</u>, 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 Limestone Coast DGP who had asthma and were smokers, compared to Australia as a whole (Figure 6, Table 5): that is, the prevalence rates per 1,000 population were higher (although below those in country South Australia overall). However, there were fewer people in Limestone Coast DGP who had type 2 diabetes and were overweight/ obese, compared to country South Australia or Australia.

Figure 6: Estimates of selected chronic diseases and risk factors, Limestone Coast DGP, country South Australia and Australia, 2001

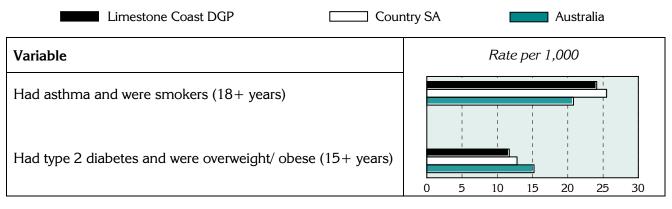


Table 5: Estimates of selected chronic diseases and risk factors, Limestone Coast DGP, country South Australia, South Australia and Australia, 2001

Variable	Limestone Coast DGP		Countr	Country SA		South Australia		Australia	
	No. ¹	Rate ²	No. ¹	Rate ²	No. ¹	Rate ²	No. ¹	Rate ¹	
Had asthma & smoked ³	1,405	24.1	9,057	25.5	32,487	22.3	397,734	20.8	
Had type 2 diabetes & were overweight/ obese	695 4	11.7	5,425	12.8	23,187	14.9	283,176	15.2	

¹ No. is a weighted estimate of the number of people in Limestone Coast DGP reporting these chronic conditions/ with these risk factors and is derived from synthetic predictions from the 2001 NHS

² Rate is the indirectly age-standardised rate per 1,000 population

³ Population aged 18 years and over

⁴ 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 <u>www.publichealth.gov.au</u>.

In 2001 to 2002, the 1,875 admissions from ambulatory care sensitive (ACS) conditions accounted for 9.2% of all admissions in the Limestone Coast DGP (Table 6, Figure 7), above the levels in South Australia (8.5) and Australia (8.7%).

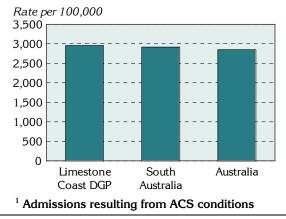
Table 6: Avoidable¹ and unavoidable hospitalisations, Limestone Coast DGP, South Australia, and Australia, 2001/02

Category	Limestone Coast DGP						A	Australia	
	No.	Rate ²	%	No.	Rate ²	%	No.	Rate ²	%
Avoidable ¹	1,875	2,952.9	9.2	47,247	2,915.7	8.5	552,786	2,847.5	8.7
Unavoidable	18,596	29,782.8	90.8	507,053	32,039.4	91.5	5,818,199	29,970.7	91.3
Total	20,471	32,737.6	100.0	554,300	34,952.2	100.0	6,370,985	32,818.2	100.0

¹ Admissions resulting from ACS conditions

² Rate is the indirectly age-standardised rate per 100,000 population

Figure 7: Avoidable hospitalisations¹, Limestone Coast DGP, South Australia and Australia, 2001/02

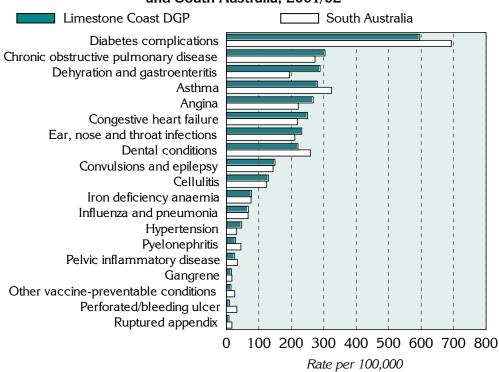


The rate of avoidable hospitalisations in Limestone Coast DGP is slightly higher, a rate of 2,952.9 admissions per 100,000 population, compared to both South Australia (a rate of 2,915.7), and Australia (2,847.5).

Diabetes complications, chronic obstructive pulmonary disease, dehydration and gastroenteritis, asthma and angina were the five conditions with the highest rates of avoidable hospitalisations in the Limestone Coast 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. The majority 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. Dehydration and gastroenteritis; and ear, nose and throat infections, have the highest rates of avoidable hospitalisations for the acute conditions.

Figure 8: Avoidable hospitalisations¹ by condition, Limestone Coast DGP and South Australia, 2001/02



¹ Admissions resulting from ACS conditions: excludes nutritional deficiencies as less than ten admissions

	anu Aus	tralla, 200	1/02			
Sub-category/ condition	Limeston DG		South A	ustralia	Austr	ralia
	No.	Rate ²	No.	Rate ²	No.	Rate ²
Vaccine-preventable	52	81.8	1,466	92.9	16,573	85.4
Influenza and pneumonia	43	67.6	1,075	67.0	13,021	67.1
Other vaccine preventable	9	14.2	391	25.9	3,552	18.3
Chronic ³	1,162	1,822.7	30,607	1,837.6	352,545	1,816
Diabetes complications	379	595.5	11,640	692.9	141,345	728.1
Iron deficiency anaemia	49	77.7	1,271	76.1	16,451	84.7
Hypertension	30	47.4	532	31.6	6,354	32.7
Congestive heart failure	160	249.9	3,900	219.1	42,447	218.6
Angina	171	267.6	3,778	221.6	49,963	257.4
Chronic obstructive pulmonary disease	194	303.8	4,710	272.9	54,853	282.6
Asthma	179	280.8	4,776	323.4	41,009	211.3
Acute	699	1,107.7	16,405	1,077.6	200,913	1,035
Dehydration and gastroenteritis	179	288.9	3,111	194.8	37,766	194.5
Convulsions and epilepsy	95	149.8	2,153	143.6	31,137	160.4
Ear, nose and throat infections	149	232.2	3,046	210.9	32,075	165.2
Dental conditions	141	220.6	3,831	259.2	43,667	224.9
Perforated/bleeding ulcer	6	9.4	555	32.5	5,795	29.9
Ruptured appendix	5	8.0	255	17.0	3,866	19.9
Pyelonephritis	17	28.1	681	44.7	7,386	38.0
Pelvic inflammatory disease	15	25.4	497	33.7	6,547	33.7
Cellulitis	82	129.6	1,987	124.1	28,204	145.3
Gangrene	10	15.7	289	17.1	4,470	23.0
Total avoidable hospitalisations ⁴	1,875	2,952.9	47,247	2,915.7	552,786	2,847.5

Table 7: Avoidable hospitalisations¹ by condition, Limestone Coast DGP, South Australia and Australia, 2001/02

¹ Admissions resulting from ACS conditions

² Rate is the indirectly age-standardised rate per 100,000 population

³ Excludes nutritional deficiencies as less than ten admissions

⁴ 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 www.publichealth.gov.au.

Nearly three quarters (72.0%) of all deaths in Limestone Coast DGP at ages 0 to 74 years over the period 1997 to 2001 are considered to be avoidable, consistent with the proportion for country South Australia (72.5%) (Table 8). Deaths amenable to health care (amenable mortality, a subset of avoidable mortality) accounted for 29.8% of all deaths at ages 0 to 74 years in Limestone Coast DGP, consistent with the 29.8% in country South Australia.

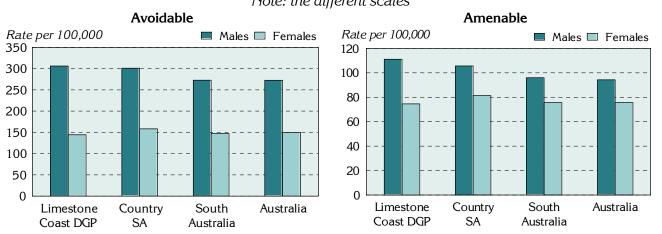
Mortality category	Limestone Coast DGP		Country SA		South Australia		Australia	
	No.	Rate ¹	No.	Rate ¹	No.	Rate ¹	No.	Rate ¹
Avoidable	686	225.9	4,852	230.3	15,938	210.4	189,845	211.8
% of total	72.0	••	72.5	••	71.4	••	71.5	
(Amenable)	(284)	(93.1)	(1,993)	(93.6)	(6,556)	(85.9)	(76,249)	(85.1)
(% of total)	(29.8)	()	(29.8)	()	(29.4)	()	(28.7)	()
Unavoidable	267	87.5	1,837	86.5	6,369	83.7	75,582	84.3
% of total	28.0		27.5		28.6		28.5	
Total mortality	953	313.5	6,688	316.8	22,307	294.1	265,427	296.1
%	100.0		100.0		100.0		100.0	

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

¹ 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. Limestone Coast DGP's rate of avoidable mortality for males was 306.0 deaths per 100,000 males, higher than the rate of 144.4 for females. Similarly, the rate of amenable mortality for males in the Division was higher, 111.1, compared to 74.6 for females, a rate ratio of 1.49 (Figure 9, Table 9).

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



Note: the different scales

Mortality category and sex	Limestone Coast DGP		Count	Country SA		South Australia		Australia	
	No.	Rate ¹	No.	Rate ¹	No.	Rate ¹	No.	Rate ¹	
Avoidable									
Males	472	306.0	3,259	300.9	10,326	272.8	123,026	272.6	
Females	214	144.4	1,593	158.3	5,612	147.2	66,819	150.1	
Total	686	225.9	4,852	230.3	15,938	210.4	189,845	211.8	
Rate ratio–M:F ²		2.12**	••	1.90**	••	1.85**		1.82*	
Amenable									
Males	173	111.1	1,169	105.6	3,671	96.0	42,568	94.3	
Females	111	74.6	824	81.4	2,884	75.7	33,681	75.7	
Total	284	93.1	1,993	93.6	6,556	85.9	76,249	85.1	
Rate ratio–M:F ²	••	1.49**	••	1.30**		1.27**		1.25*	

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

¹ Rate is the indirectly age-standardised rate per 100,000 population

² 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

Another way of measuring premature mortality is to calculate the number of years of life lost (YLL)¹, 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 Limestone Coast DGP, country South Australia, 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 72.0% of total YLL (0 to 74 years) for Limestone Coast DGP, lower than the 72.9% for country South Australia. The proportion of YLL from amenable mortality of 28.9% for Limestone Coast DGP was consistent with the 28.9% for country South Australia.

Mortality category	Limestone Coast DGP		Country	Country SA		South Australia		Australia	
	No.	% of	No.	% of	No.	% of	No.	% of	
		total		total		total		total	
Avoidable	11,658	72.0	83,705	72.9	273,135	71.8	3,327,375	71.9	
(Amenable)	(4,677)	(28.9)	(33,165)	(28.9)	(108,777)	(28.6)	(1,298,430)	(28.0)	
Unavoidable	4,541	28.0	31,059	27.1	107,223	28.2	1,303,289	28.1	
Total	16,198	100.0	114,764	100.0	380,358	100.0	4,630,664	100.0	

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

¹ 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 1,567.6 deaths per 100,000 population in the Limestone Coast 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 of 312.6 in the Limestone Coast Division.

Mortality category and age (years)	Limestone Coast DGP		Count	Country SA		South Australia		Australia	
	No.	Rate ¹	No.	Rate ¹	No.	Rate ¹	No.	Rate ¹	
Avoidable									
0-14	19	27.1	118	26.8	352	24.2	5,669	28.8	
15-24	16	40.7	159	67.5	523	52.4	7,045	52.8	
25-44	76	79.6	596	99.3	1,979	88.8	24,356	83.9	
45-64	218	312.6	1,640	333.3	5,130	297.8	64,282	304.9	
65-74	357	1,567.6	2,338	1439.0	7,954	1354.8	88,493	1,358.1	
Total	686	225.9	4,852	230.3	15,938	210.4	189,845	211.8	
Amenable									
0-24	17	14.8	101	14.1	324	13.3	5,083	15.4	
25-44	16	16.2	146	23.8	507	22.6	5,946	20.5	
45-64	93	133.9	710	144.8	2,248	130.1	27,464	130.3	
65-74	159	697.1	1,036	641.3	3,477	591.6	37,756	579.4	
Total	284	93.1	1,993	93.6	6,556	85.9	76,249	85.1	

Table 11: Avoidable and amenable mortality by age, Limestone Coast DGP,
country South Australia, South Australia and Australia, 1997 to 2001

¹ 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 Limestone Coast DGP were for cardiovascular diseases, a rate of 77.7 deaths per 100,000 population, and cancer, with a rate of 75.3 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 58.8 per 100,000 population and 20.6 per 100,000, respectively.

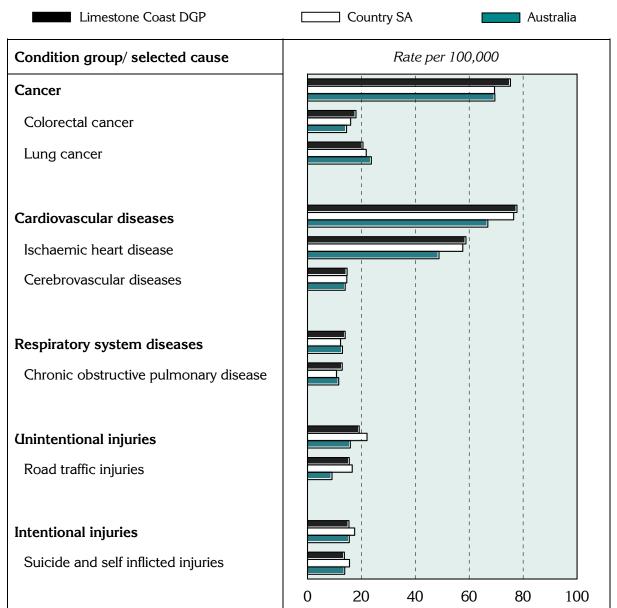
Condition group/ selected cause	Limestone Coast DGP		Country SA		South Australia		Australia	
selected cause	No.	Rate ¹	No.	Rate ¹	No.	Rate ¹	No.	Rate ¹
Cancer	229	75.3	1,489	69.4	5,209	67.8	62,338	69.5
Colorectal cancer	55	18.0	346	16.0	1,142	14.8	13,008	14.5
Lung cancer	63	20.6	477	21.8	1,728	22.3	21,208	23.7
Cardiovascular diseases	239	77.7	1,669	76.5	5,324	68.5	59,945	66.9
lschaemic heart disease	181	58.8	1,260	57.6	3,918	50.5	43,712	48.8
Cerebrovascular diseases	45	14.7	316	14.6	1,086	13.9	12,558	14.0
Respiratory system diseases	43	14.0	270	12.3	897	11.4	11,612	13.0
Chronic obstructive pulmonary disease	40	12.9	239	10.8	783	9.9	10,395	11.6
Unintentional injuries	56	19.2	412	22.1	1,085	15.5	14,224	15.9
Road traffic injuries	45	15.5	307	16.6	687	9.9	8,138	9.1
Intentional injuries Suicide and self inflicted injuries	45 40	15.4 13.7	329 293	17.5 15.6	1,138 1,018	16.3 14.5	13,891 12,393	15.5 13.8

Table 12: Avoidable mortality (0 to 74 years) by major condition group and selected cause	se,
Limestone Coast DGP, country South Australia, South Australia and Australia, 1997 to 2	001

¹ Rate is the indirectly age-standardised rate per 100,000 population

Rates in the Division were above or consistent with, those for country South Australia and Australia for all condition groups and selected causes other than for lung cancer, and the injury categories where rates were below those in country South Australia (Figure 10).

Figure 10: Avoidable mortality (0 to 74 years) by major condition group and selected cause, Limestone Coast DGP, country South Australia and Australia, 1997 to 2001



Notes on the data

Data sources and limitations

General

References to 'country South Australia' relate to South Australia excluding the Adelaide Statistical Division.

Data sources

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

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) ¹	
Additional socio-demograph	ic 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/ C	iP catchment	
Tables 3 and 4	Medicare Australia, 2003/04	
Additional prevalence estimation	ates: chronic diseases and risk factors combined	
Figure 6; Table 5	Estimated from 2001 National Health Survey (NHS), ABS (unpublished)	
Avoidable hospitalisations: h	nospital admissions resulting from ambulatory care sensitive conditions	
Tables 6 and 7; Figures 7 and 8	National Hospital Morbidity Database at Australian Institute of Health & Welf 2001/02; data produced in HealthWIZ by Prometheus Information (not availa 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)	

Table 13: Data sources

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 (ie. jobless families, people with health insurance): these areas are mapped with a pattern.

Statistical geography of the Limestone Coast DGP

For information on the postcodes in the Division, please refer the Department of Health and Ageing website <u>http://www.health.gov.au/internet/wcms/publishing.nsf/Content/health-pcd-programs-divisions-divspc.htm;</u> 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, the District Council of Wattle Range comprises two SLAs – Wattle Range - East and Wattle Range - West. Both of these SLAs and all of the other SLAs listed in Table 14 comprise the Division.

SLA code	SLA name	Per cent of the SLA's population in the Division [*]	Estimate of the SLA's 2005 population in the Division
42250	Grant	100.0	8,128
43360	Lacepede	100.0	2,344
44620	Mount Gambier	100.0	23,895
45090	Naracoorte and Lucindale	100.0	8,289
46860	Robe	100.0	1,406
47630	Tatiara	100.0	7,071
48341	Wattle Range - East	100.0	3,236
48344	Wattle Range - West	100.0	9,130

* 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

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

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