Population health profile of the Ipswich & West Moreton 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 (www.publichealth.gov.au).

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Population health profile of the Ipswich & West Moreton Division of General Practice: supplement

This profile is a supplement to the *Population health profile of the Ipswich & West Moreton Division of General Practice*, dated November 2005, available from www.publichealth.gov.au. This supplement includes an update of the population of the Ipswich & West Moreton 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:

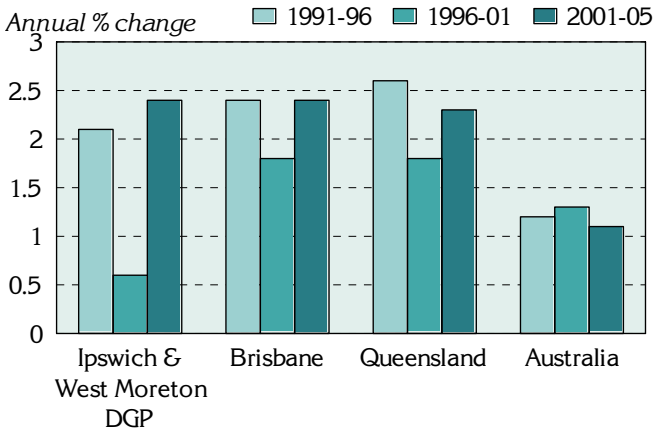
- Population [updated to June 2005]
- Additional socio-demographic indicators
- Unreferred attendances – patient flow/ GP catchment
- Additional prevalence estimates: chronic diseases and risk factors combined
- Avoidable hospitalisations: hospital admissions resulting from ambulatory care sensitive 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 Ipswich & West Moreton Division had an Estimated Resident Population of 186,876 at 30 June 2005.

Figure 1: Annual population change, Ipswich & West Moreton DGP, Brisbane, Queensland and Australia, 1991 to 1996, 1996 to 2001 and 2001 to 2005



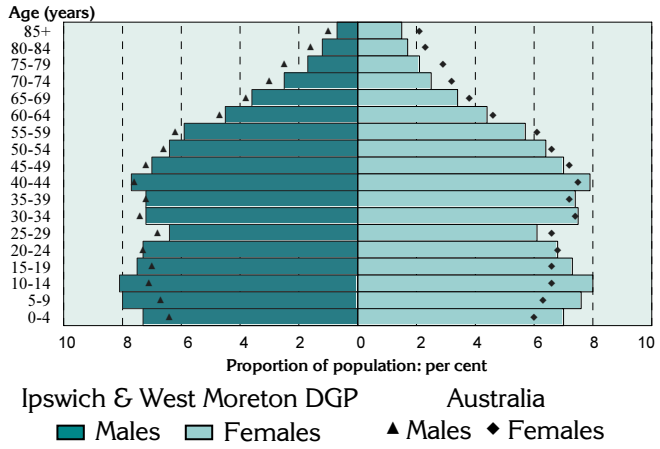
Over the five years from 1991 to 1996, the Division's population increased by 2.1% on average each year, below the increases for Brisbane (2.4%) and Queensland (2.6%). From 1996 to 2001, the annual percentage increase in the Division fell to 0.6%, much lower than for Brisbane and Queensland (both 1.8%). The growth rate increased to 2.4% per year from 2001 to 2005, consistent with the annual increases for Brisbane (2.5%), Queensland (2.3%).

Table 1: Population by age, Ipswich & West Moreton DGP and Australia, 2005

Age group (years)	Ipswich & West Moreton DGP		Australia	
	No.	%	No.	%
0-14	42,901	23.0	3,978,221	19.6
15-24	26,970	14.4	2,819,834	13.9
25-44	53,552	28.7	5,878,107	28.9
45-64	44,114	23.6	4,984,446	24.5
65-74	11,128	6.0	1,398,831	6.9
75-84	6,175	3.3	954,143	4.7
85+	2,036	1.1	315,027	1.5
Total	**186,876**	**100.0**	**20,328,609**	**100.0**

As shown in the accompanying table and the age-sex pyramid below, Ipswich & West Moreton DGP had relatively more children than Australia as a whole, with 23.0% at ages 0 to 14 years and young people, with 14.4% at ages 15 to 24 (compared to 19.6% and 13.9%, respectively) (Table 1). Conversely, the proportions of the Division's population aged 45 years and over were lower than those for Australia.

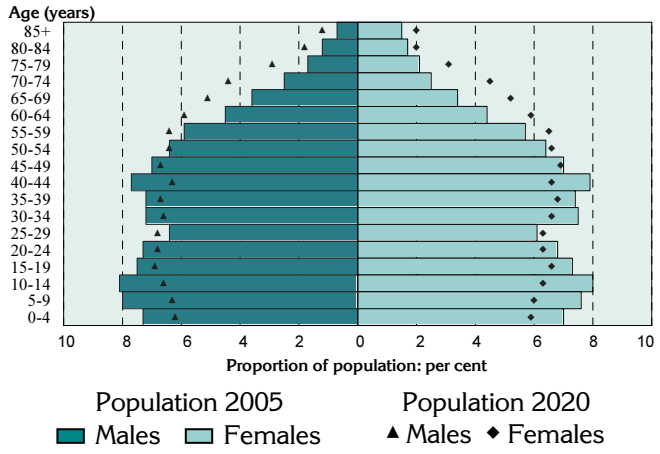
Figure 2: Population in Ipswich & West Moreton DGP and Australia, by age and sex, 2005



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

- at younger ages – relatively more children aged 0 to 14 years, and young people aged 15 to 19 years;
- from 25 to 34 years – relatively fewer males, and females (25 to 29 years); and
- at older ages - relatively fewer males and females from 45 years of age.

Figure 3: Population projections for Ipswich & West Moreton DGP, by age and sex, 2005 and 2020



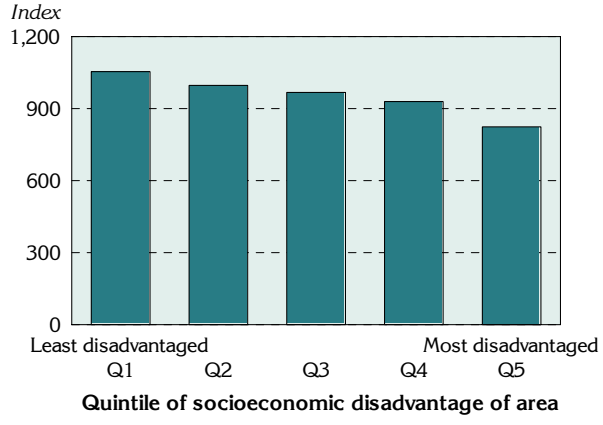
The population projections for the Division show a number of changes in age distribution, with the 2020 population projected to have:

- at ages under 50 years – relatively fewer males and females aged 0 to 49 years (except at ages 25 to 29 years); and
- from age 55 years – relatively more males and females (most pronounced at ages 60 to 74 years).

Additional socio-demographic indicators

Please refer to the earlier *Population health profile of the Ipswich & West Moreton 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, Ipswich & West Moreton DGP, 2001



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

The Ipswich & West Moreton DGP has an index score of 954, below the score for Australia of 1000: this score varies across the Division, from a low of 824 in the most disadvantaged areas to 1054 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 more jobless families in the Ipswich Division (22.8%), than for Brisbane as a whole (17.7%) (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 markedly lower proportion of the population with private health insurance (35.6%), compared to Brisbane (43.5%) (Figure 5, Table 2).

Figure 5: Socio-demographic indicators, Ipswich & West Moreton DGP, Brisbane, Queensland and Australia, 2001

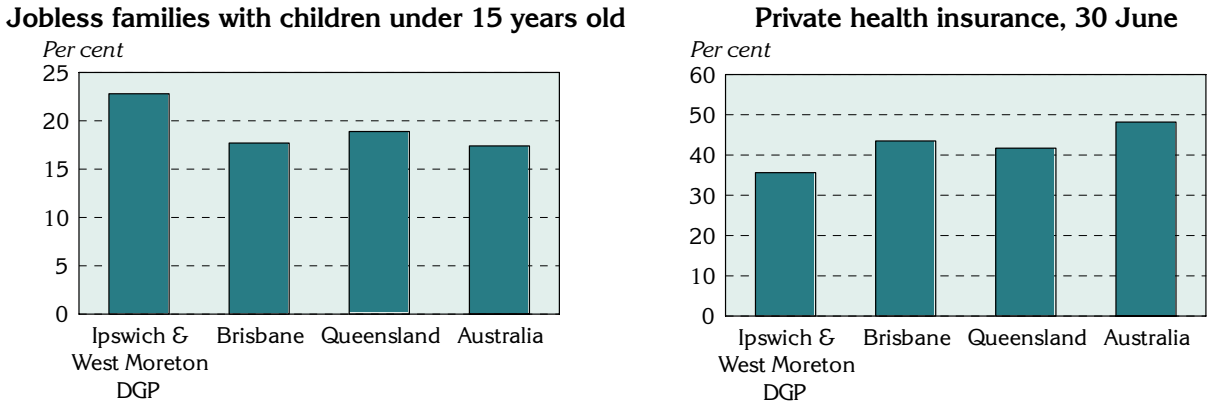
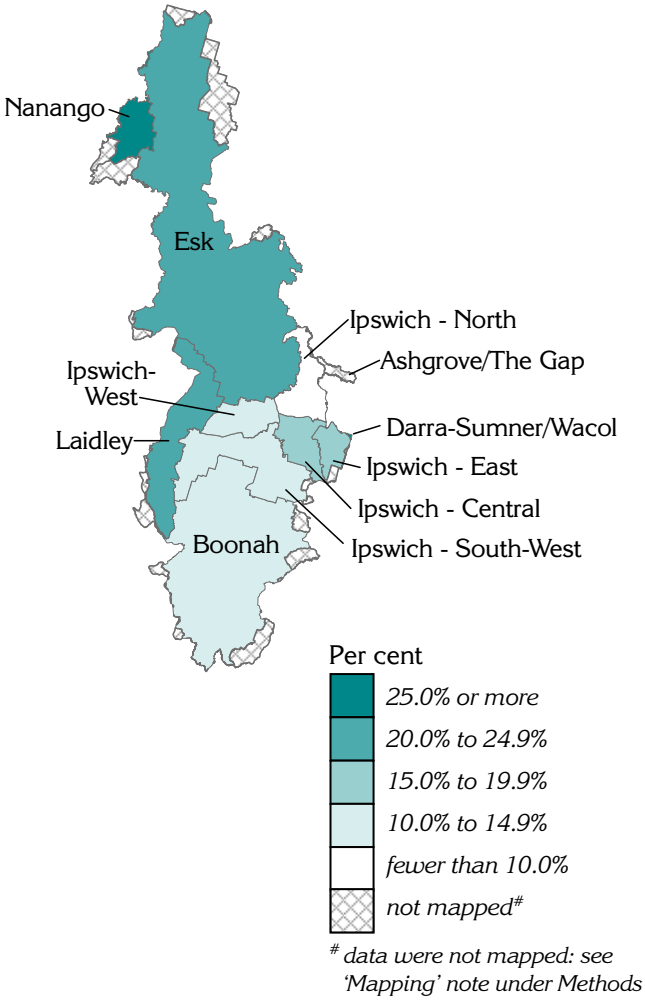


Table 2: Socio-demographic indicators, Ipswich & West Moreton DGP, Brisbane, Queensland and Australia, 2001

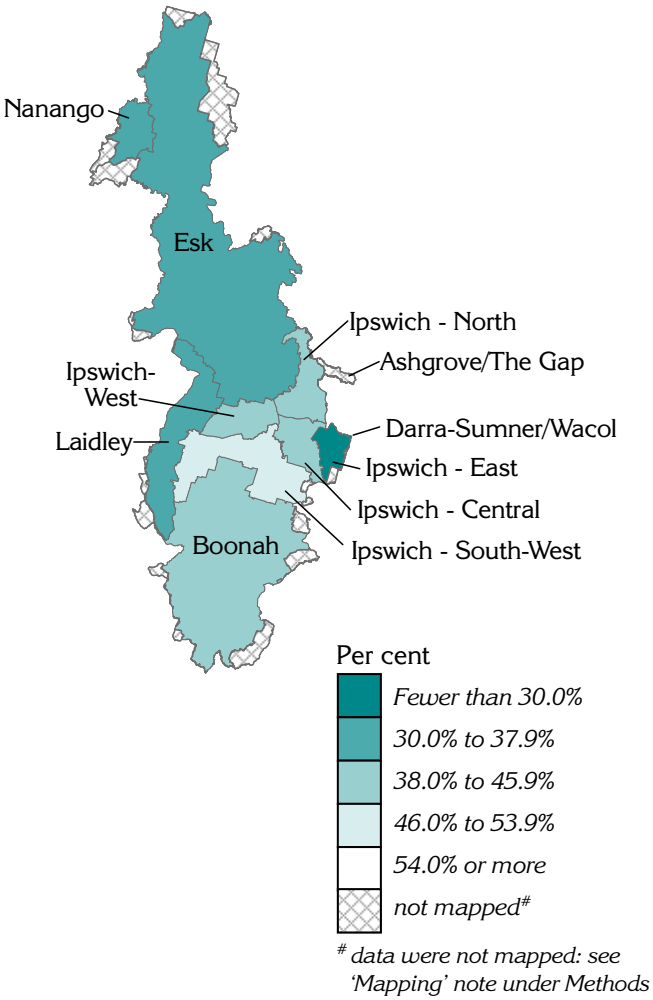
Indicator	Ipswich & West Moreton DGP		Brisbane		Queensland		Australia	
	No.	%	No.	%	No.	%	No.	%
Jobless families with children under 15 years old	4,671	22.8	31,941	17.7	74,942	18.9	357,563	17.4
Private health insurance (30 June)	58,939	35.6	698,753	43.5	1,511,613	41.7	8,671,106	46.0

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, Ipswich & West Moreton DGP, 2001



Map 2: People covered by private health insurance by SLA, Ipswich & West Moreton DGP, 30 June 2001



GP services to residents of the Ipswich & West Moreton 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 (80.3%) of all unreferred attendances to residents of Ipswich & West Moreton DGP were provided in the Division (ie. by a GP with a provider number in the Division): this represented 698,331 GP unreferred attendances (Table 3). A further 6.8% of unreferred attendances to residents were provided by GPs with a provider number in Brisbane South DGP, with 3.6% to residents of GPpartners DGP.

Table 3: Patient flow – People living[1] in Ipswich & West Moreton DGP by Division where attendance occurred[2], 2003/04

Division		Unreferred attendances	
Number	Name	No.	%[3]
408	Ipswich & West Moreton DGP	698,331	80.3
402	Brisbane South DGP	59,197	6.8
405	GPpartners DGP	31,114	3.6
409	GP Connections DGP	24,768	2.8
401	South East Alliance (Brisbane) DGP	12,223	1.4
404	Logan Area DGP	11,467	1.3
414	Southern Queensland Rural DGP	8,730	1.0
406	Gold Coast DGP	3,439	0.4
Other	..	23,482	2.7
Total	..	**870,122**	**100.0**

[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 408 by Division in which attendance occurred

The majority (92.8%)of unreferred attendances provided by GPs with a provider number in Ipswich & West Moreton DGP were also to people living in the Division (ie. their Medicare address was in the Division) (Table 4). A further 1.6% of unreferred attendances by GPs in the Division were to people living in Brisbane South DGP.

Table 4: GP catchment – Unreferred attendances provided by GPs[1] in Ipswich & West Moreton DGP by Division of patient address[2], 2003/04

Division		Unreferred attendances	
Number	Name	No.	%[3]
408	Ipswich & West Moreton DGP	698,331	92.8
402	Brisbane South DGP	12,367	1.6
409	GP Connections DGP	5,833	0.8
405	GPpartners DGP	5,797	0.8
404	Logan Area DGP	5,213	0.7
414	Southern Queensland Rural DGP	3,124	0.4
Other	..	21,668	2.9
Total	..	**752,333**	**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 408 by Division of patient address

Additional prevalence estimates: chronic diseases and risk factors combined

Please refer to the earlier *Population health profile of the Ipswich & West Moreton Division of General Practice*, dated November 2005, available from www.publichealth.gov.au, 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 markedly more people in Ipswich & West Moreton DGP who had asthma and were smokers, compared to Brisbane and Australia as a whole (Figure 6, Table 5): that is, the prevalence rates per 1,000 population were higher. There were slightly more people in Ipswich & West Moreton DGP who had type 2 diabetes and were overweight/ obese, compared to Brisbane and Australia.

Figure 6: Estimates of selected chronic diseases and risk factors, Ipswich & West Moreton DGP, Brisbane and Australia, 2001

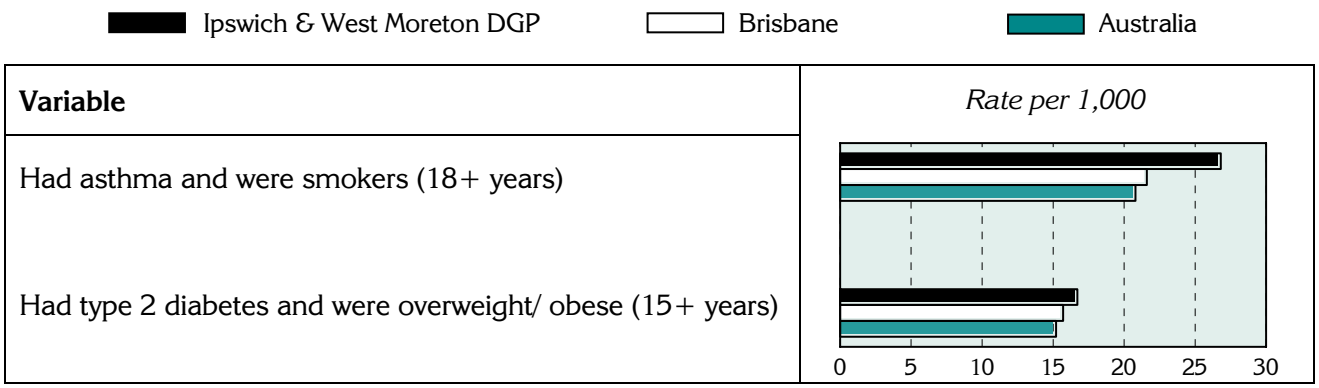


Table 5: Estimates of selected chronic diseases and risk factors, Ipswich & West Moreton DGP, Brisbane, Queensland and Australia, 2001

Variable	Ipswich & West Moreton DGP		Brisbane		Queensland		Australia	
	No.[1]	Rate[2]	No.[1]	Rate[2]	No.[1]	Rate[2]	No.[1]	Rate[1]
Had asthma & smoked[3]	4,386	26.8	37,177	21.6	83,759	23.2	397,734	20.8
Had type 2 diabetes & were overweight/obese[4]	2,466	16.7	23,133	15.7	52,952	15.0	283,176	15.2

[1] No. is a weighted estimate of the number of people in Ipswich & West Moreton 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 www.publichealth.gov.au.

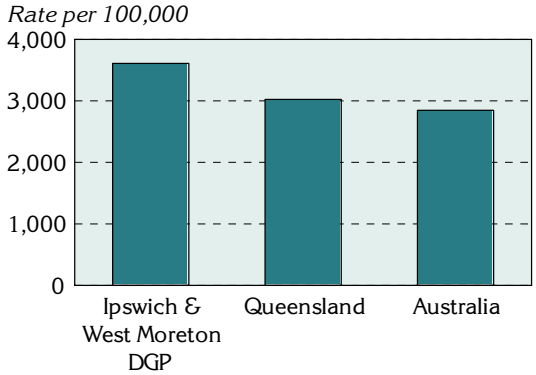
In 2001 to 2002, the 5,646 admissions from ambulatory care sensitive (ACS) conditions accounted for 9.1% of all admissions in the Ipswich & West Moreton DGP (Table 6, Figure 7), above the levels in Queensland (8.5%) and Australia (8.7%).

Table 6: Avoidable[1] and unavoidable hospitalisations, Ipswich & West Moreton DGP, Queensland, and Australia, 2001/02

Category	Ipswich & West Moreton DGP			Queensland			Australia		
	No.	Rate[2]	%	No.	Rate[2]	%	No.	Rate[2]	%
Avoidable[1]	5,646	3,609.3	9.1	106,884	3,025.0	8.5	552,786	2,847.5	8.7
Unavoidable	56,316	35,481.0	90.9	1,153,519	32,410.1	91.5	5,818,199	29,970.7	91.3
Total	**61,962**	**39,087.1**	**100.0**	**1,260,403**	**35,435.5**	**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 hospitalisations[1], Ipswich & West Moreton DGP, Queensland and Australia, 2001/02



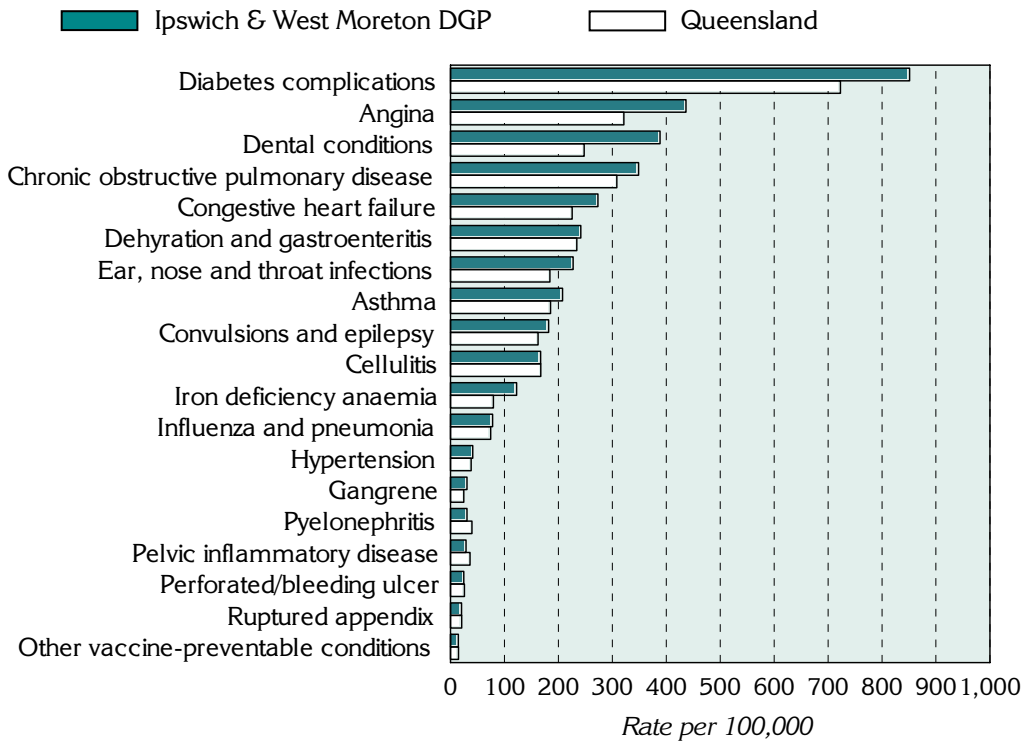
[1] **Admissions resulting from ACS conditions**

The rate of avoidable hospitalisations in Ipswich & West Moreton DGP is markedly higher, a rate of 3,609.3 admissions per 100,000 population, compared to Queensland (a rate of 3,025.0), and Australia (2,847.5).

Diabetes complications, angina, dental conditions, chronic obstructive pulmonary disease and congestive heart failure were the five conditions with the highest rates of avoidable hospitalisations in the Ipswich & West Moreton 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. Almost 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.

Figure 8: Avoidable hospitalisations[1] by condition, Ipswich & West Moreton DGP and Queensland, 2001/02



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

Table 7: Avoidable hospitalisations[1] by condition, Ipswich & West Moreton DGP, Queensland and Australia, 2001/02

Sub-category/ condition	Ipswich & West Moreton DGP		Queensland		Australia	
	No.	Rate[2]	No.	Rate[2]	No.	Rate[2]
Vaccine-preventable	**149**	**92.6**	**3,188**	**89.6**	**16,573**	**85.4**
Influenza and pneumonia	124	78.0	2,646	74.6	13,021	67.1
Other vaccine preventable	25	14.6	542	15.0	3,552	18.3
Chronic[3]	**3,356**	**2,281.7**	**65,455**	**1,882.0**	**352,545**	**1,816**
Diabetes complications	1,249	851.2	25,175	722.9	141,345	728.1
Iron deficiency anaemia	181	122.7	2,772	79.7	16,451	84.7
Hypertension	60	41.3	1,324	38.3	6,354	32.7
Congestive heart failure	370	273.3	7,617	225.5	42,447	218.6
Angina	630	436.7	11,134	321.5	49,963	257.4
Chronic obstructive pulmonary disease	491	348.8	10,619	308.5	54,853	282.6
Asthma	375	207.7	6,814	185.6	41,009	211.3
Acute	**2,296**	**1,342.0**	**41,300**	**1,143.3**	**200,913**	**1,035**
Dehydration and gastroenteritis	376	241.6	8,278	234.1	37,766	194.5
Convulsions and epilepsy	316	182.0	5,902	162.3	31,137	160.4
Ear, nose and throat infections	425	227.5	6,829	184.4	32,075	165.2
Dental conditions	700	388.6	9,101	247.8	43,667	224.9
Perforated/bleeding ulcer	36	24.8	892	25.8	5,795	29.9
Ruptured appendix	35	20.4	754	20.7	3,866	19.9
Pyelonephritis	50	30.5	1,437	39.8	7,386	38.0
Pelvic inflammatory disease	49	28.8	1,315	36.2	6,547	33.7
Cellulitis	264	167.1	5,930	167.4	28,204	145.3
Gangrene	45	30.7	862	24.8	4,470	23.0
Total avoidable hospitalisations[4]	**5,646**	**3,609.3**	**106,884**	**3,025.0**	**552,786**	**2,847.5**

[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.

Almost three quarters (71.9%) of all deaths in Ipswich & West Moreton DGP at ages 0 to 74 years over the period 1997 to 2001 are considered to be avoidable, marginally lower than the proportion for Brisbane (72.7%) (Table 8). However, the rate in the Division is notably higher than that in Brisbane, a differential of 1.14.

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 Ipswich & West Moreton DGP, compared to 28.6% in Brisbane.

Table 8: Avoidable and unavoidable mortality (0 to 74 years) by area, Ipswich & West Moreton DGP, Brisbane, Queensland and Australia, 1997 to 2001

Mortality category	Ipswich & West Moreton DGP		Brisbane		Queensland		Australia	
	No.	Rate[1]	No.	Rate[1]	No.	Rate[1]	No.	Rate[1]
Avoidable	1,697	240.6	14,656	211.2	35,515	220.6	189,845	211.8
% of total	**71.9**	**..**	**72.7**	**..**	**72.8**	**..**	**71.5**	**..**
(Amenable)	(702)	(100.1)	(5,940)	(86.4)	(14,323)	(89.3)	(76,249)	(85.1)
(% of total)	**(29.8)**	**(..)**	**(29.5)**	**(..)**	**(29.3)**	**(..)**	**(28.7)**	**(..)**
Unavoidable	662	94.1	5,498	79.7	13,291	82.7	75,582	84.3
% of total	**28.1**	**..**	**27.3**	**..**	**27.2**	**..**	**28.5**	**..**
Total mortality	**2,359**	**334.7**	**20,154**	**291.0**	**48,806**	**303.4**	**265,427**	**296.1**
%	**100.0**	..	**100.0**	..	**100.0**	..	**100.0**	..

[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. Ipswich & West Moreton DGP's rate of avoidable mortality for males was 301.2 deaths per 100,000 males, notably higher than the rate of 179.7 for females. Similarly, the rate of amenable mortality for males in the Division was higher, 111.6, compared to 88.3 for females, a rate ratio of 1.26 (Figure 9, Table 9).

Figure 9: Avoidable and amenable mortality by sex (0 to 74 years), Ipswich & West Moreton DGP, Brisbane, Queensland and Australia, 1997 to 2001

Note: the different scales

Table 9: Avoidable and amenable mortality (0 to 74 years) by sex, Ipswich & West Moreton DGP, Brisbane, Queensland and Australia, 1997 to 2001

Mortality category and sex	Ipswich & West Moreton DGP		Brisbane		Queensland		Australia	
	No.	Rate[1]	No.	Rate[1]	No.	Rate[1]	No.	Rate[1]
Avoidable								
Males	1,089	301.2	9,362	269.5	23,316	285.3	123,026	272.6
Females	607	179.7	5,294	152.0	12,199	155.1	66,819	150.1
Total	**1,697**	**240.6**	**14,656**	**211.2**	**35,515**	**220.6**	**189,845**	**211.8**
Rate ratio–M:F[2]	**..**	**1.68****	**..**	**1.77****	**..**	**1.84****	**..**	**1.82****
Amenable								
Males	402	111.6	3,249	95.2	8,181	100.4	42,568	94.3
Females	300	88.3	2,691	77.4	6,142	78.0	33,681	75.7
Total	**702**	**100.1**	**5,940**	**86.4**	**14,323**	**89.3**	**76,249**	**85.1**
Rate ratio–M:F[2]	**..**	**1.26****	**..**	**1.23****	**..**	**1.29****	**..**	**1.25****

[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 Ipswich & West Moreton DGP, Brisbane, Queensland 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 71.3% of total YLL (0 to 74 years) for Ipswich & West Moreton DGP, lower than the 72.8% for Brisbane. The proportion of YLL from amenable mortality of 29.0% for Ipswich & West Moreton DGP was consistent with that for Brisbane (28.9%).

Table 10: Years of life lost from avoidable mortality (0 to 74 years), Ipswich & West Moreton DGP, Brisbane, Queensland and Australia, 1997 to 2001

Mortality category	Ipswich & West Moreton DGP		Brisbane		Queensland		Australia	
	No.	% of total	No.	% of total	No.	% of total	No.	% of total
Avoidable	30,530	71.3	260,170	72.8	629,779	72.9	3,327,375	71.9
(Amenable)	(12,400)	(29.0)	(103,340)	(28.9)	(247,893)	(28.7)	(1,298,430)	(28.0)
Unavoidable	12,278	28.7	97,013	27.2	234,699	27.1	1,303,289	28.1
Total	**42,808**	**100.0**	**357,183**	**100.0**	**864,478**	**100.0**	**4,630,664**	**100.0**

[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 1,562.8 deaths per 100,000 population in Ipswich & West Moreton 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 360.3 in Ipswich & West Moreton Division.

Table 11: Avoidable and amenable mortality by age, Ipswich & West Moreton DGP, Brisbane, Queensland and Australia, 1997 to 2001

Mortality category and age (years)	Ipswich & West Moreton DGP		Brisbane		Queensland		Australia	
	No.	Rate[1]	No.	Rate[1]	No.	Rate[1]	No.	Rate[1]
Avoidable								
0-14	60	29.4	500	30.1	1,208	32.2	5,669	28.8
15-24	72	61.0	562	44.8	1,386	54.3	7,045	52.8
25-44	215	84.4	1,916	77.8	4,527	84.9	24,356	83.9
45-64	642	360.3	5,107	301.7	12,543	322.5	64,282	304.9
65-74	707	1,562.8	6,571	1410.9	15,851	1404.6	88,493	1,358.1
Total	**1,697**	**240.6**	**14,656**	**211.2**	**35,515**	**220.6**	**189,845**	**211.8**
Amenable								
0-24	58	17.2	451	15.9	1,059	16.8	5,083	15.4
25-44	61	23.6	491	20.1	1,165	21.8	5,946	20.5
45-64	274	154.7	2,236	132.2	5,352	137.9	27,464	130.3
65-74	308	685.0	2,762	591.5	6,748	599.1	37,756	579.4
Total	**702**	**100.1**	**5,940**	**86.4**	**14,323**	**89.3**	**76,249**	**85.1**

[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 Ipswich & West Moreton DGP were for cardiovascular diseases, with a rate of 80.0 deaths per 100,000 population, and cancer, 79.1 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 60.2 per 100,000 population and 26.9 per 100,000, respectively.

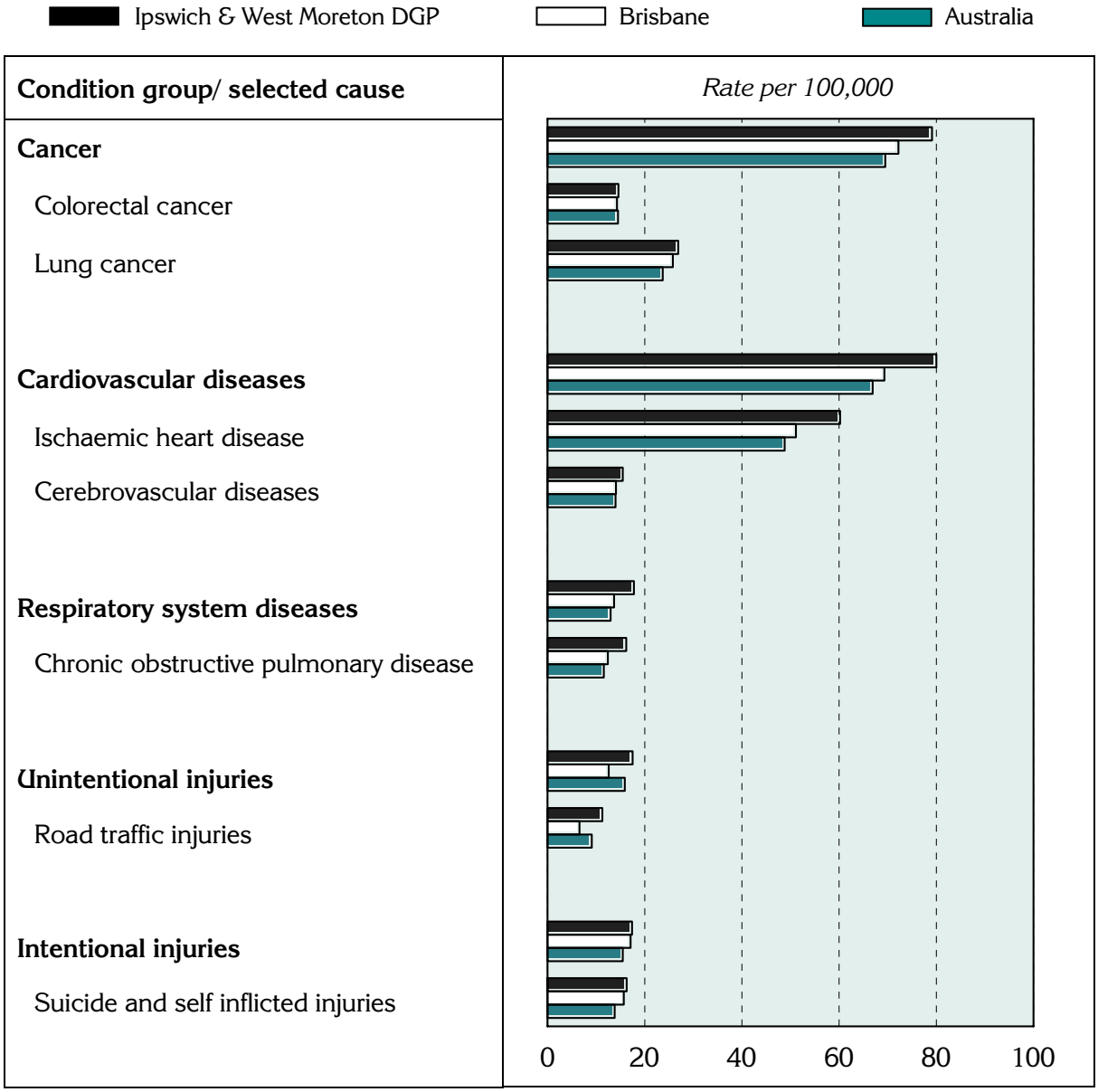
Table 12: Avoidable mortality (0 to 74 years) by major condition group and selected cause, Ipswich & West Moreton DGP, Brisbane, Queensland and Australia, 1997 to 2001

Condition group/ selected cause	Ipswich & West Moreton DGP		Brisbane		Queensland		Australia	
	No.	Rate[1]	No.	Rate[1]	No.	Rate[1]	No.	Rate[1]
Cancer	**547**	**79.1**	**4,928**	**72.2**	**11,618**	**72.6**	**62,338**	**69.5**
Colorectal cancer	101	14.6	967	14.3	2,392	15.0	13,008	14.5
Lung cancer	184	26.9	1,733	25.8	4,062	25.4	21,208	23.7
Cardiovascular diseases	**541**	**80.0**	**4,648**	**69.3**	**11,294**	**71.0**	**59,945**	**66.9**
Ischaemic heart disease	409	60.2	3,429	51.1	8,434	52.9	43,712	48.8
Cerebrovascular diseases	103	15.5	947	14.1	2,210	14.0	12,558	14.0
Respiratory system diseases	**118**	**17.8**	**906**	**13.7**	**2,168**	**13.7**	**11,612**	**13.0**
Chronic obstructive pulmonary disease	106	16.2	811	12.4	1,970	12.5	10,395	11.6
Unintentional injuries	**136**	**17.5**	**968**	**12.6**	**2,630**	**15.8**	**14,224**	**15.9**
Road traffic injuries	89	11.3	511	6.6	1,565	9.4	8,138	9.1
Intentional injuries	**134**	**17.4**	**1,305**	**17.1**	**3,017**	**18.2**	**13,891**	**15.5**
Suicide and self inflicted injuries	125	16.3	1,198	15.7	2,719	16.4	12,393	13.8

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

Rates in the Division for the condition groups and selected causes were above or consistent with those in Brisbane and Australia (Figure 10).

Figure 10: Avoidable mortality (0 to 74 years) by major condition group and selected cause, Ipswich & West Moreton DGP, Brisbane and Australia, 1997 to 2001



Notes on the data

Data sources and limitations

General

References to 'Brisbane' relate to the Brisbane 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)[1]
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)

[1] **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 Ipswich & West Moreton DGP

For information on the postcodes in the Division, please refer the Department of Health and Ageing website http://www.health.gov.au/internet/wcms/publishing.nsf/Content/health-pcd-programs-divisions-divspc.htm; 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 Ipswich, SLAs are based on suburbs: as many of these have very small populations, they have in some cases been grouped to form areas of larger population: the groupings are those used in HealthWIZ. The individual suburbs and groups of suburbs that comprise the Division are listed in Table 14. The SLA group name does not in all cases include the names of all suburbs (SLAs) in the group: all relevant SLA codes are shown in the table.

Table 14: SLAs and population in Ipswich & West Moreton DGP, 2005 on 2001 boundaries

SLA code[1]	SLA/ SLA group name	Per cent of SLA/ SLA group population in the Division*	Estimate of the SLA/ SLA group's 2005 population in the Division
31031, 31566	Ashgrove/ The Gap	0.2	#
30800	Boonah	100.0	8,622
31167, 31596	Darra-Sumner/Wacol	22.4	2,013
33050	Esk	99.0	15,353
31306, 33966	Ipswich - North	100.0	70,490
33974	Ipswich - South-West	100.0	4,347
33976	Ipswich - West	100.0	8,444
33962	Ipswich Central	100.0	49,502
33965	Ipswich-East	100.0	13,844
34450	Laidley	87.7	12,309
35650	Nanango	21.5	1,875

* **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**

 # Not shown as the total population is less than 100

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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