



MEDIA BACKGROUNDER

EMBARGOED until 1:00am AEDT, Tuesday 11 December 2018

2018 ATLAS HIGHLIGHTS

The Third Australian Atlas of Healthcare Variation 2018

The Australian Atlas of Healthcare Variation (the Atlas) is produced by the Australian Commission on Safety and Quality in Health Care in partnership with the Australian Institute of Health and Welfare.

The Atlas maps healthcare use across Australia to identify and promote investigation of variations in health care use, reduce unwarranted variation and promote appropriate care by recommending actions.

The third Atlas has identified potential inappropriate use across a number of clinical areas. This includes the care provided to the youngest members of the community as well as care provided to older Australians.

Key findings and recommendations from some of the clinical areas examined are outlined below.

1. Early planned caesarean section - without medical or obstetric indication

Planned early birth is an important intervention in maternity care, but the timing of birth should be carefully considered to optimise the outcome.

Waiting until 39 weeks' gestation is recommended if there are no medical or obstetric reasons for an earlier birth as emerging evidence indicates that planned caesareans section before 39 weeks' gestation can increase:

- Short-term risks, including neonatal respiratory problems and the risk of hospitalisation for infections in the first five years of life
- Long-term developmental problems, poorer school performance and attention deficit hyperactivity disorder (ADHD).

Findings:

- The Atlas found high rates of early planned caesarean section without medical or obstetric indication for the four states and territories that had sufficient data.
- In 2015, in the four states or territories with sufficient data:
 - 42% to 60% of planned caesarean section births performed before 39 weeks did not have a medical or obstetric indication
 - 10% to 22% of planned caesarean section births performed before 37 weeks did not have a medical or obstetric indication.
- Rates of early planned caesarean section were generally higher for privately funded patients than for publicly funded patients:
 - The percentage of planned caesarean sections performed before 39 weeks without medical or obstetric indication was 60 % for privately funded patients compared with 52% for publicly funded patients
 - The percentage of planned caesarean sections performed before 37 weeks without medical or obstetric indication was 20% for privately funded patients compared to 14% for publicly funded patients.

2. Antibiotics in children

Most upper respiratory tract infections in children are due to viruses. Antibiotics are frequently prescribed despite being ineffective in treating these infections. There are harms associated with high use of antibiotics in children:

- Antibiotics affect the normal gut bacteria, and this may increase the risk of autoimmune diseases such as asthma and Crohn's disease, and weight gain.
- Increased antimicrobial resistance, meaning that antibiotic medicines may be less effective in the future for the child and others in the community.

Findings:

- In 2016-17, more than 3 million antibiotic prescriptions were dispensed for children aged 0-9 years.
- Australia has high rates of antibiotic medicine use in children aged 0-9 years compared with other similar countries. For example, the use of antibiotics in children of this age group in Australia is three times the rates of Norway and the Netherlands.

3. Inappropriate proton pump inhibitor medicines in infants

Proton pump inhibitor (PPI) medicines are sometimes prescribed to treat infants with symptoms such as irritability and crying in case this is due to reflux, even though there is evidence that they are not effective in these situations. PPI medicines:

- Reduce the level of stomach acid in children taking them and may increase their likelihood of infections such as gastroenteritis and pneumonia
- Change the normal gut microbiome, which may increase the child's risk of developing allergies.

Findings:

- There were nearly 23,000 Pharmaceutical Benefits Scheme (PBS) prescriptions dispensed for PPI medicines to infants aged 1 year and under in 2016-17.
- The Atlas found almost a four-fold difference between the lowest and highest state and territory rate in PBS dispensing of PPI medicines for infants aged 1 year and under in Australia.

4. Colonoscopy hospitalisations

Most colonoscopies are performed to detect polyps or bowel cancer. More than half (51%) of Australia's bowel cancer burden is attributed to preventable risk factors such as physical inactivity, obesity, smoking, heavy alcohol consumption and poor diet.

Findings:

- Hospitalisation rates for inpatient colonoscopy was 7.4 times higher in the area with the highest rate compared to the area with the lowest rate – suggesting that some people may be exposed to unnecessary risk from the procedure while others risk potential harm because a necessary procedure is not being performed.
- The Atlas found low rates of hospitalisation for colonoscopy in the following groups, raising concerns about their access to colonoscopy services:
 - Aboriginal and Torres Strait Islander Australians
 - People living in outer regional and remote areas
 - People living in areas of low socioeconomic status

5. Gastroscopy hospitalisations

Gastroscopy is used predominantly to investigate upper gastrointestinal symptoms such as heartburn and dyspepsia. It is also used to exclude a diagnosis of cancer.

Findings:

- Rates of gastroscopy have risen nearly 3% per year from 2008 to 2017, despite low and stable rates of oesophageal and stomach cancers. The pattern suggests overuse of gastroscopy.
- Rates of gastroscopy were 7.4 times as high in the area with the highest rate compared to the area with the lowest rate.
- Lower rates of gastroscopy for Aboriginal and Torres Strait Islander Australians warrant further investigation.

6. Combined gastroscopy and colonoscopy hospitalisations

Same day upper and lower gastrointestinal endoscopy is indicated in only a limited number of conditions, so high rates of combined gastroscopy and colonoscopy hospitalisations suggest inappropriate use.

Findings:

- In 2016-17, 36% of hospitalisations for colonoscopy included a gastroscopy.
- Rates of concurrent use should be reviewed so gastroscopies of little benefit are minimised, and theatre time can be allocated to people with greater need for a timely colonoscopy.

7. Antipsychotic prescriptions dispensed, 65 years and over (repeat analyses)

The rate of antipsychotic medicines dispensing to people aged 65 years and over was mapped in the first Atlas in 2015, which found very high rates of prescribing. Improving use of antipsychotic medicines in this age group is of national importance because of concern about overuse to manage behavioural and psychological disturbances related to dementia or delirium and before secondary causes have been excluded or non-pharmacological treatment has been tried.

Findings:

- In 2016-17, there were 947,941 PBS prescriptions dispensed for antipsychotic medicines to people aged 65 years and over.
- While prescription rates decreased during the four-year period, the volume of antipsychotics supplied on any given day in the Australian community remained stable, indicating little overall change during this period.

To see all Atlas 2018 findings and recommendations, visit: <https://www.safetyandquality.gov.au/Atlas>

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Associate Professor Penelope Bryant	<ul style="list-style-type: none">▪ Antibiotics use in children▪ PPI medicines dispensing, 1 year and under	Consultant in Paediatric Infectious Diseases and Medical Lead, Hospital-in-the-Home, The Royal Children's Hospital
Dr Liz Marles	<ul style="list-style-type: none">▪ Medicine prescribing▪ Antipsychotic medicines▪ Opioids▪ Antimicrobial medicines	General Practitioner; past president of Royal Australian College of General Practitioners, and Director, Hornsby-Brooklyn GP Unit, Hornsby Hospital
Ms Susan Morris	<ul style="list-style-type: none">▪ Colonoscopy / gastroscopy▪ Consumer perspective	Consumer representative, Lynch Syndrome Australia