Population health profile of the

Northern Sydney

Division of General Practice: supplement

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PHIDU

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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 Northern Sydney Division of General Practice: supplement

This profile is a supplement to the *Population health profile of the Northern Sydney 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 Northern Sydney 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

1

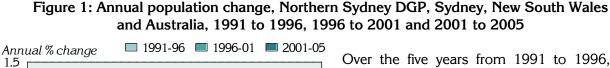
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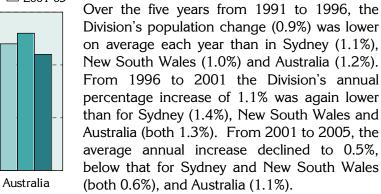
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Northern

Sydney DGP

The Northern Sydney Division had an Estimated Resident Population of 213,226 at 30 June 2005.





Age group (years)	Northern Sydney DGP No. %		Austral	ia
			No.	%
0-14	32,387	15.2	3,978,221	19.6
15-24	27,316	12.8	2,819,834	13.9
25-44	73,418	34.4	5,878,107	28.9
45-64	51,915	24.3	4,984,446	24.5
65-74	13,231	6.2	1,398,831	6.9
75-84	10,407	4.9	954,143	4.7
85+	4,551	2.1	315,027	1.5
Total	213,226	100.0	20,328,609	100.0

New South

Wales

Sydney

As shown in the accompanying table and the age-sex pyramid below (Figure 2), Northern Sydney DGP had a notably lower proportion of children at ages 0 to 14 years (15.2%) compared to Australia as a whole (19.6%). Conversely, the Division had a notably higher proportion of its population aged 25 to 44 years (34.4%, compared with 28.9% for Australia). The 75 to 85+ years age groups in the Division also had higher proportions compared to Australia.

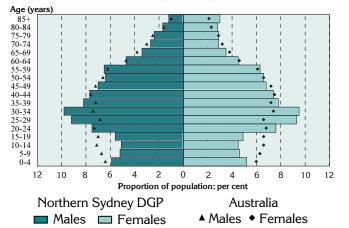


Figure 2: Population in Northern Sydney DGP and Australia, by age and sex, 2005

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

- at younger ages much lower proportions of children and young people aged 0 to 19 years;
- from 20 to 39 years higher proportions of both males and females; and
- at older ages marginally lower proportions of males and females aged 65 to 74 years; and higher proportions of females aged 80 to 84 years and over.

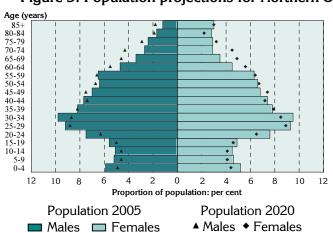


Figure 3: Population projections for Northern Sydney DGP, by age and sex, 2005 and 2020

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

- at younger ages lower proportions of males and females aged 0 to 34 years (only marginally lower at ages 5 to 19 years and 25 to 29 years);
- at ages 60 to 79 years higher proportions of males and females (most pronounced at ages 60 to 74 years); and
- slightly higher proportions of males aged 75 years and over.

Additional socio-demographic indicators

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



1,200 900 600 300 Least disadvantaged Q1 Q2 Q3 Q4 Q5 Q4 Q5 Q4 Q5 One of four socioeconomic indexes for areas produced at the 2001 ABS Census is the Index of Relative Socio-Economic Disadvantage.

The Northern Sydney DGP has an index score of 1129, well above the score for Australia of 1000: this score varies relatively little across the Division, from a (still high) score of 1068 in the most disadvantaged areas to 1173 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 substantially fewer jobless families in the Northern Sydney DGP (7.0%), compared to Sydney as a whole (15.6%) (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 higher proportion of the population with private health insurance (70.2%), compared to Sydney (50.2%) (Figure 5, Table 2).

Figure 5: Socio-demographic indicators, Northern Sydney DGP, Sydney, New South Wales and Australia, 2001

Jobless families with children under 15 years old



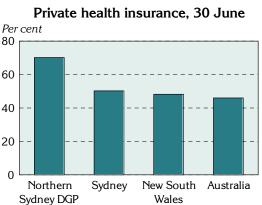
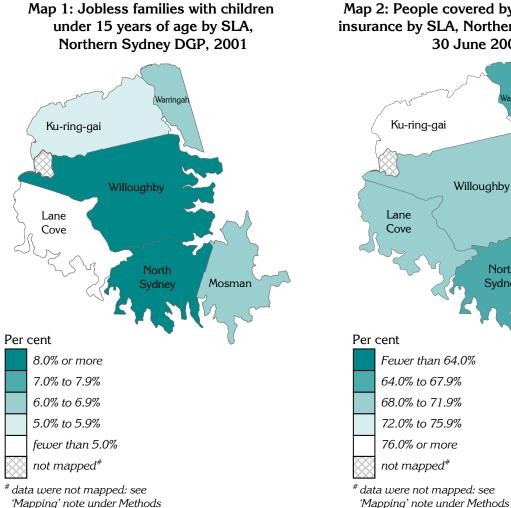


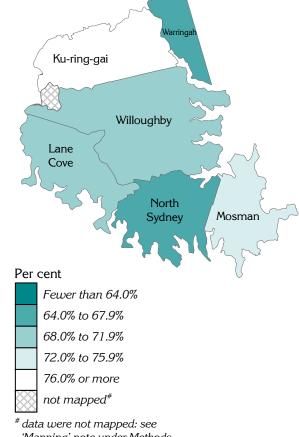
Table 2: Socio-demographic indicators, Northern Sydney DGP, Sydney, New South Wales and Australia, 2001

Indicator Norther Sydney D			Sydne	У	New So Wales	Australia		
	No.	%	No.	%	No.	%	No.	%
Jobless families with children under 15 years old	1,155	7.0	66,526	15.6	121,409	17.6	357,563	17.4
Private health insurance (30 June)	139,310	70.2	2,000,802	50.2	3,062,382	48.2	8,671,106	46.0

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



Map 2: People covered by private health insurance by SLA, Northern Sydney DGP, 30 June 2001



GP services to residents of the Northern Sydney 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.

More than three quarters (78.1%) of all unreferred attendances for residents of Northern Sydney DGP were provided in the Division (ie. by a GP with a provider number in the Division): this represented 727,419 GP unreferred attendances (Table 3). A further 5.5% of unreferred attendances to residents were provided by GPs with a provider number in Eastern Sydney DGP, with 4.5% provided by GPs in Hornsby Ku-ring-gai Ryde DGP.

Division		Unreferred a	ttendances
Number	Name	No.	% ³
208	Northern Sydney DGP	727,419	78.1
202	Eastern Sydney DGP	51,461	5.5
212	Hornsby Ku-ring-gai Ryde DGP	41,922	4.5
213	Manly Warringah DGP	38,655	4.2
201	Central Sydney DGP	22,463	2.4
206	Western Sydney DGP (now WentWest & part Hawkesbury-Hills)	7,974	0.9
203	South Eastern Sydney DGP	6,877	0.7
204	Canterbury DGP	2,977	0.3
209	St George DGP	2,604	0.3
Other		74,779	3.1
Total		1,958,263	100.0

Table 3: Patient flow – People living¹ in Northern Sydney 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 201 by Division in which attendance occurred

Almost two thirds (65.0%) of unreferred attendances provided by GPs with a provider number in Northern Sydney DGP were also to people living in the Division (ie. their Medicare address was in the Division) (Table 4). A further 14.0% of unreferred attendances by GPs in the Division were to people living in Hornsby Ku-ring-gai Ryde DGP, with 6.2% to residents from Manly Warringah DGP.

Table 4: GP catchment – Unreferred attendances provided by GPs ¹ in Northern Sydney DGP
by Division of patient address ² , $2003/04$

Division		Unreferred a	ttendances
Number	Name	No.	% ³
208	Northern Sydney DGP	727,419	65.0
212	Hornsby Ku-ring-gai Ryde DGP	156,444	14.0
213	Manly Warringah DGP	69,511	6.2
201	Central Sydney DGP	37,281	3.3
202	Eastern Sydney DGP	27,009	2.4
206	Western Sydney DGP (now WentWest & part Hawkesbury-Hills)	19,948	1.8
219	Central Coast DGP	10,050	0.9
203	South Eastern Sydney DGP	8,696	0.8
209	St George DGP	5,462	0.5
Other		57,131	5.1
Total		1,118,951	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 201 by Division of patient address

Additional prevalence estimates: chronic diseases and risk factors combined

Please refer to the earlier *Population health profile of the Northern Sydney 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 fewer people in Northern Sydney DGP who had asthma and were smokers, compared to Sydney and Australia as a whole (Figure 6, Table 5): that is, the prevalence rates per 1,000 population were lower, and markedly so in relation to the Australian rate. There were slightly lower rates of people in Northern Sydney DGP who had type 2 diabetes and were overweight/ obese, compared to Sydney and Australia.

Figure 6: Estimates of selected chronic diseases and risk factors, Northern Sydney DGP, Sydney and Australia, 2001

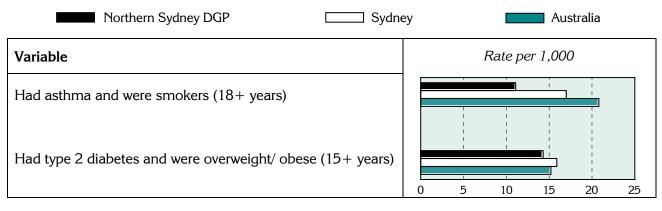


Table 5: Estimates of selected chronic diseases and risk factors, Northern Sydney DGP,Sydney, New South Wales and Australia, 2001

Variable	Northern Sydney DGP		Sydı	ney	New So Wale		Aust	ralia
-	No. ¹	Rate ²	No. ¹	Rate ²	No. ¹	Rate ²	No. ¹	Rate ¹
Had asthma and smoked ³	2,494	11.1	72,198	17.0	126,542	19.7	397,734	20.8
Had type 2 diabetes & were overweight/ obese 4	2,795	14.3	59,451	15.9	100,235	15.7	283,176	15.2

¹ No. is a weighted estimate of the number of people in Northern Sydney 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 3,449 admissions from ambulatory care sensitive (ACS) conditions accounted for 5.6% of all admissions in the Northern Sydney DGP (Table 6, Figure 7), markedly below the levels for both New South Wales (8.6%) and Australia (8.7%).

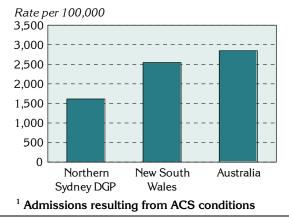
Table 6: Avoidable ¹ and unavoidable hospitalisations, Northern Sydney DGP,
New South Wales, and Australia, 2001/02

Category	Northern Sydney DGP			New	South Wale	Australia			
	No.	Rate ²	%	No.	Rate ²	%	No.	Rate ²	%
Avoidable ¹	3,449	1,612.9	5.6	170,066	2,543.8	8.6	552,786	2,847.5	8.7
Unavoidable	57,778	26,467.3	94.4	1,810,901	27,255.3	91.4	5,818,199	29,970.7	91.3
Total	61,227	28,097.0	100.0	1,980,967	29,798.8	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, Northern Sydney DGP, New South Wales and Australia, 2001/02

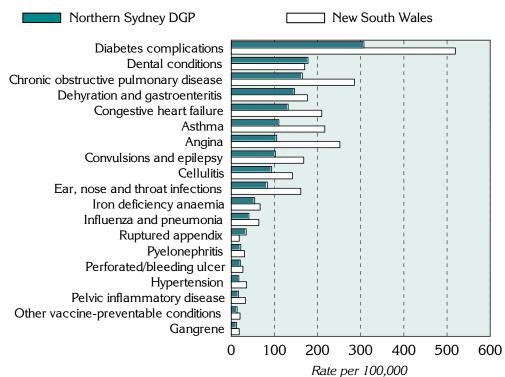


The rate of avoidable hospitalisations in Northern Sydney DGP is markedly lower, a rate of 1,612.9 admissions per 100,000 population, compared to both New South Wales (a rate of 2,543.8), and Australia (2,847.5).

Diabetes complications, dental conditions and chronic obstructive pulmonary disease, were the three conditions with the highest rates of avoidable hospitalisations in the Northern Sydney DGP (Figure 8, Table 7): however, rates for both diabetes complications and chronic obstructive pulmonary disease were markedly lower than the rates for New South Wales.

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 hospitalisations¹ by condition, Northern Sydney DGP and New South Wales, 2001/02



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

			ralla, 2001/0		A	
Sub-category/ condition		n Sydney GP	New So	uth Wales	Austi	ralia
	No.	Rate ²	No.	Rate ²	No.	Rate ²
Vaccine-preventable	117	54.7	5,630	84.5	16,573	85.4
Influenza and pneumonia	88	41.1	4,280	64.1	13,021	67.1
Other vaccine preventable	29	13.6	1,350	20.4	3,552	18.3
Chronic ³	1,946	891.7	106,803	1,587.0	352,545	1,816
Diabetes complications	663	307.6	34,975	519.5	141,345	728.1
Iron deficiency anaemia	123	54.3	4,494	67.0	16,451	84.7
Hypertension	40	17.6	2,398	35.7	6,354	32.7
Congestive heart failure	318	131.8	14,270	209.7	42,447	218.6
Angina	234	105.4	16,987	251.8	49,963	257.4
Chronic obstructive pulmonary disease	357	164.6	19,359	285.6	54,853	282.6
Asthma	211	110.4	14,289	216.8	41,009	211.3
Acute	1,478	711.3	62,543	946.0	200,913	1,035
Dehydration and gastroenteritis	332	146.4	11,725	176.4	37,766	194.5
Convulsions and epilepsy	208	102.3	11,093	168.1	31,137	160.4
Ear, nose and throat infections	154	83.6	10,615	161.1	32,075	165.2
Dental conditions	344	177.9	11,196	170.3	43,667	224.9
Perforated/bleeding ulcer	48	21.1	1,830	27.1	5,795	29.9
Ruptured appendix	69	34.8	1,212	18.5	3,866	19.9
Pyelonephritis	49	22.2	2,038	31.0	7,386	38.0
Pelvic inflammatory disease	40	17.1	2,134	32.7	6,547	33.7
Cellulitis	206	93.7	9,451	142.0	28,204	145.3
Gangrene	28	12.2	1,249	18.6	4,470	23.0
Total avoidable hospitalisations ⁴	3,449	1,612.9	170,066	2,543.8	552,786	2,847.5

Table 7: Avoidable hospitalisations ¹ by condition, Northern Sydney DGF),
New South Wales 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.

More than two thirds (69.4%) of all deaths in Northern Sydney DGP at ages 0 to 74 years over the period 1997 to 2001 are considered to be avoidable, below the proportion for Sydney (71.3%) (Table 8). However, the rate in the Division is markedly (29%) lower than that in Sydney, a differential of 0.71.

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 Northern Sydney DGP, compared to 28.6% in Sydney.

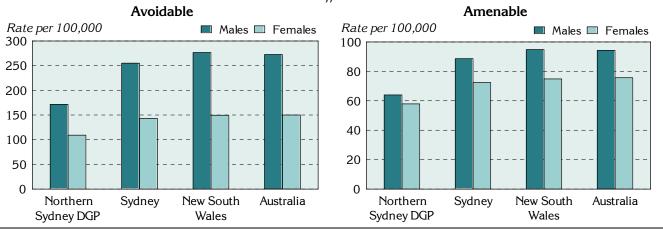
Mortality category	Northern Sydney DGP					New South Wales		Australia	
	No. Rate ¹		No.	Rate ¹	No.	Rate ¹	No.	Rate ¹	
Avoidable	1,342	141.0	36,709	199.5	66,151	213.6	189,845	211.8	
% of total	69.4		71.3		71.4		71.5		
(Amenable)	(576)	(61.1)	(14,736)	(80.6)	(26,374)	(85.0)	(76,249)	(85.1)	
(% of total)	(29.8)	()	(28.6)	()	(28.5)	()	(28.7)	()	
Unavoidable	592	62.8	14,768	80.6	26,468	85.3	75,582	84.3	
% of total	30.6		28.7		28.6		28.5		
Total mortality	1,934	203.8	51,477	280.1	92,619	299.0	265,427	296.1	
%	100.0		100.0		100.0		100.0		

Table 8: Avoidable and unavoidable mortality (0 to 74 years) by area, Northern Sydney DGP,Sydney, New South Wales 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. Northern Sydney DGP's rate of avoidable mortality for males was 171.7 deaths per 100,000 males, more than one and a half times the rate of 109.2 for females. Similarly, the rate of amenable mortality for males in the Division was higher, 64.0, compared to 57.9 for females, a rate ratio of 1.11 (Figure 9, Table 9).

Figure 9: Avoidable and amenable mortality by sex (0 to 74 years), Northern Sydney DGP, Sydney, New South Wales and Australia, 1997 to 2001



Note: the different scales

New South wales and Australia, 1997 to 2001								
Mortality category and sex	Northern Sydney Sydney New South DGP Wales		Australia					
	No.	Rate ¹	No.	Rate ¹	No.	Rate ¹	No.	Rate ¹
Avoidable								
Males	804	171.7	23,505	255.1	43,074	276.8	123,026	272.6
Females	539	109.2	13,204	143.2	23,077	149.6	66,819	150.1
Total	1,342	141.0	36,709	199.5	66,151	213.6	189,845	211.8
Rate ratio–M:F ²		1.57**	••	1.78**	••	1.85**		1.82**
Amenable								
Males	293	64.0	8,068	88.6	14,811	94.8	42,568	94.3
Females	284	57.9	6,667	72.4	11,562	74.9	33,681	75.7
Total	576	61.1	14,736	80.6	26,374	85.0	76,249	85.1
Rate ratio–M:F ²		1.11	••	1.22**	••	1.27**	••	1.25**

Table 9: Avoidable and amenable mortality (0 to 74 years) by sex, Northern Sydney DGP, Sydney, New South Wales 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 Northern Sydney DGP, Sydney, New South Wales and Australia over the period of the 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 70.2% of total YLL (0 to 74 years) for Northern Sydney DGP, lower than the 71.7% for Sydney. The proportion of YLL from amenable mortality for Northern Sydney DGP (29.3%) was higher than for Sydney (28.0%).

Table 10: Years of life lost from avoidable mortality (0 to 74 years), Northern Sydney DGP,
Sydney, New South Wales and Australia, 1997 to 2001

Mortality category	Northern Sydney DGP		Sydney		New South Wales		Australia	
	No.	% of	No.	% of	No.	% of	No.	% of
		total		total		total		total
Avoidable	23,352	70.2	644,323	71.7	1,147,183	71.8	3,327,375	71.9
(Amenable)	(9,757)	(29.3)	(251,183)	(28.0)	(444,143)	(27.8)	(1,298,430)	(28.0)
Unavoidable	9,918	29.8	254,314	28.3	451,496	28.2	1,303,289	28.1
Total	33,270	100.0	898,637	100.0	1,598,679	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 964.4 deaths per 100,000 population in Northern Sydney 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 199.2 in Northern Sydney Division.

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Avoidable $0-14$ 3320.01,09826.61,83627.55,15-244734.91,30344.92,24150.97,25-4416546.94,80274.38,11982.924,45-64463199.212,603289.922,358311.164,65-74635964.416,9031,307.331,5971,375.888,Total1,342141.036,709199.566,151213.6189,Amenable0-243712.91,01314.51,65814.85,25-444312.61,09317.21,87819.25,45-6420788.65,384123.99,444131.427,65-74289437.17,245559.013,394582.937,	Australia							
	o.	Rate ¹						
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$								
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	669	28.8						
45-64463199.212,603289.922,358311.164,65-74635964.416,9031,307.331,5971,375.888,Total1,342141.036,709199.566,151213.6189,Amenable </td <td>045</td> <td>52.8</td>	045	52.8						
65-74635964.416,9031,307.331,5971,375.888,Total1,342141.036,709199.566,151213.6189,Amenable0-243712.91,01314.51,65814.85,25-444312.61,09317.21,87819.25,45-6420788.65,384123.99,444131.427,65-74289437.17,245559.013,394582.937,	356	83.9						
Total1,342141.036,709199.566,151213.6189,Amenable0-243712.91,01314.51,65814.85,25-444312.61,09317.21,87819.25,45-6420788.65,384123.99,444131.427,65-74289437.17,245559.013,394582.937,	282	304.9						
Amenable0-243712.91,01314.51,65814.85,25-444312.61,09317.21,87819.25,45-6420788.65,384123.99,444131.427,65-74289437.17,245559.013,394582.937,	493 1	1,358.1						
0-243712.91,01314.51,65814.85,25-444312.61,09317.21,87819.25,45-6420788.65,384123.99,444131.427,65-74289437.17,245559.013,394582.937,	845	211.8						
25-444312.61,09317.21,87819.25,45-6420788.65,384123.99,444131.427,65-74289437.17,245559.013,394582.937,								
45-6420788.65,384123.99,444131.427,65-74289437.17,245559.013,394582.937,	083	15.4						
65-74 289 437.1 7,245 559.0 13,394 582.9 37,	946	20.5						
	464	130.3						
Total 576 61.1 14.736 80.6 26.374 85.0 76.	756	579.4						
	249	85.1						

Table 11: Avoidable and amenable mortality by age, Northern Sydney DGP, Sydney,
New South Wales 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 Northern Sydney DGP were for cardiovascular diseases, with a rate of 53.0 deaths per 100,000 population, and cancer, 39.5 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 28.4 per 100,000 population and 13.5 per 100,000, respectively.

Condition group/ selected cause	Northern Sydney DGP		Sydney		New South Wales		Austr	Australia	
-	No.	Rate ¹	No.	Rate ¹	No.	Rate ¹	No.	Rate ¹	
Cancer	504	53.0	11,919	65.5	21,158	68.1	62,338	69.5	
Colorectal cancer	109	11.5	2,382	13.1	4,318	13.9	13,008	14.5	
Lung cancer	126	13.5	3,983	22.1	7,297	23.4	21,208	23.7	
Cardiovascular diseases	369	39.5	11,824	65.4	21,925	70.3	59,945	66.9	
lschaemic heart disease	264	28.4	8,461	46.8	15,935	51.1	43,712	48.8	
Cerebrovascular diseases	89	9.5	2,641	14.6	4,656	14.9	12,558	14.0	
Respiratory system diseases	69	7.5	2,177	12.1	4,313	13.8	11,612	13.0	
Chronic obstructive pulmonary disease	64	6.9	1,916	10.7	3,882	12.4	10,395	11.6	
Unintentional injuries	86	8.6	2,513	13.0	4,540	15.0	14,224	15.9	
Road traffic injuries	38	3.8	1,249	6.5	2,528	8.4	8,138	9.1	
Intentional injuries Suicide and self inflicted injuries	115 109	11.1 10.5	2,558 2,211	13.1 11.3	4,497 3,941	14.9 13.0	13,891 12,393	15.5 13.8	

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

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

Rates in the Division were lower – in some cases markedly lower – than those for Sydney and Australia for all of the condition groups and selected causes (Figure 10).

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

Northern Sydney DGP	Sydney	Australia				
Condition group/ selected cause	Rate per 100,000					
Cancer						
Colorectal cancer						
Lung cancer						
Cardiovascular diseases						
Ischaemic heart disease						
Cerebrovascular diseases						
Respiratory system diseases						
Chronic obstructive pulmonary disease						
Unintentional injuries						
Road traffic injuries						
Intentional injuries						
Suicide and self inflicted injuries						
	0 10 20 30	40 50 60 70 80				

Notes on the data

Data sources and limitations

General

References to 'Sydney' relate to the Sydney 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-demograpl	nic 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 estim	ates: 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)			

Table 13: Data sources

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

Statistical geography of the Northern Sydney 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 the Northern Sydney Division, all of Lane Cove, Mosman, North Sydney and Willoughby lie within the Division, as do parts of Ku-ring-gai and Warringah (Table 14).

SLA code	SLA name	Per cent of the SLA's population in the Division [*]	Estimate of the SLA's 2005 population in the Division
14500	Ku-ring-gai	19.6	21,302
14700	Lane Cove	100.0	32,326
15350	Mosman	100.0	28,363
15950	North Sydney	100.0	60,944
18000	Warringah	4.5	6,331
18250	Willoughby	100.0	35,812

^{*} 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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