

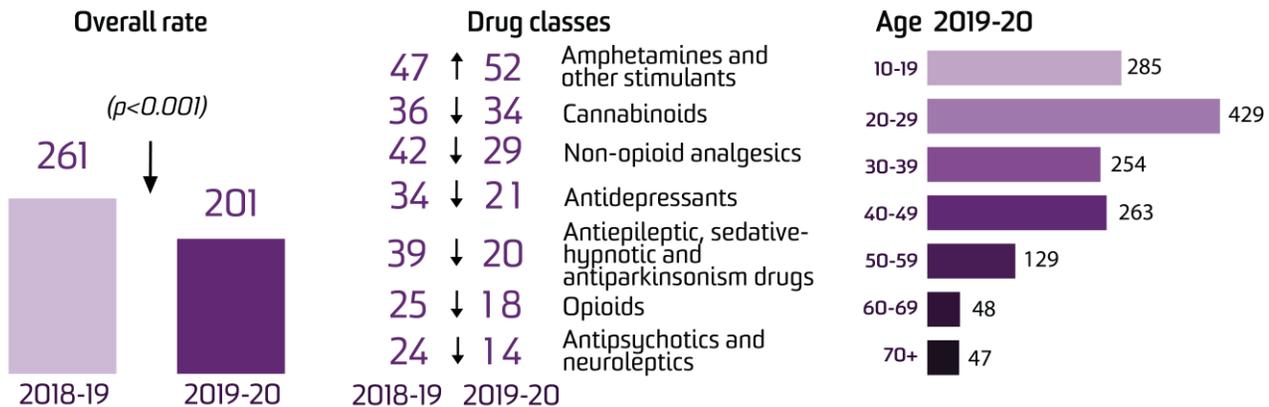
Trends in drug-related hospitalisations, 1999-2020

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Tasmania



Drug-related hospitalisations per 100,000 people (excluding alcohol and tobacco)



Note: Arrows indicate a statistically significant increase/decrease between 2018-19 and 2019-20 ($p < 0.05$)

There were 969 hospitalisations with a drug-related principal diagnosis in [Tasmania](#) in 2019-20.

This is equivalent to 201 hospitalisations per 100,000 people, which was a significant decrease from 2018-19 (261 hospitalisations per 100,000 people; $p < 0.001$) ([Table 1](#)) but higher than reported in 1999-00 (127 hospitalisations per 100,000 people) ([Figure 1](#)).

Sex

The rate of hospitalisations was higher among [females](#) than males in 2019-20 (241 versus 163 hospitalisations per 100,000 people).

Age

In 2019-20, the rate of hospitalisations was [highest](#) among the 20-29 age group, followed by the 10-19 and 40-49 age groups (429, 285, and 263 hospitalisations per 100,000 people, respectively).

Remoteness Area of Usual Residence

The highest number and rate of hospitalisations in 2019-20 was observed in [inner regional](#) Tasmania (756 hospitalisations, 223 hospitalisations per 100,000 people; noting there are no major cities in Tasmania) ([Figure 2](#)).

External Cause of Drug Poisoning

In 2019-20, 48% of drug-related hospitalisations in Tasmania were due to drug poisoning. Furthermore, 82% of drug poisoning related hospitalisations were intentional (78 hospitalisations per 100,000 people) and 11% were unintentional (9.2 hospitalisations per 100,000 people) ([Figure 3](#)).

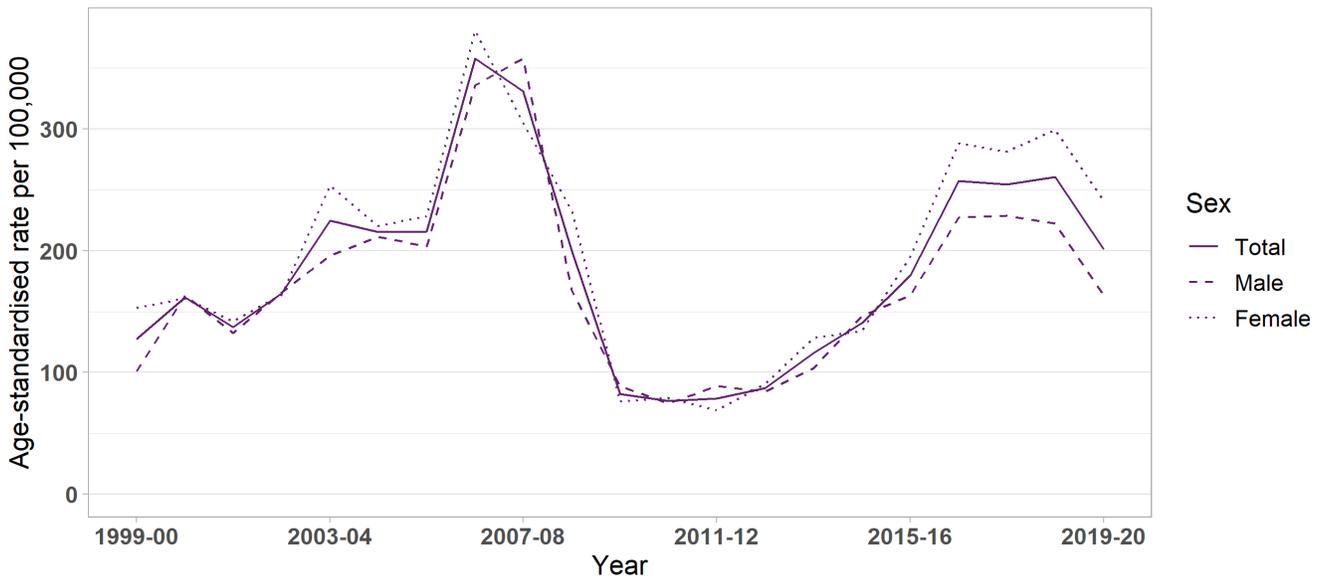
Drug Type

In 2019-20, the rate of hospitalisations was [highest](#) where there was a principal diagnosis indicating amphetamines and other stimulants (52 hospitalisations per 100,000 people) ([Figure 4](#)).

Compared to 2018-19, there were significant decreases in 2019-20 in the rates of hospitalisations related to cannabinoids; non-opioid analgesics; antidepressants; antiepileptic, sedative-hypnotic and antiparkinsonism drugs; opioids; and antipsychotics and neuroleptics ($p < 0.050$) ([Table 1](#)).

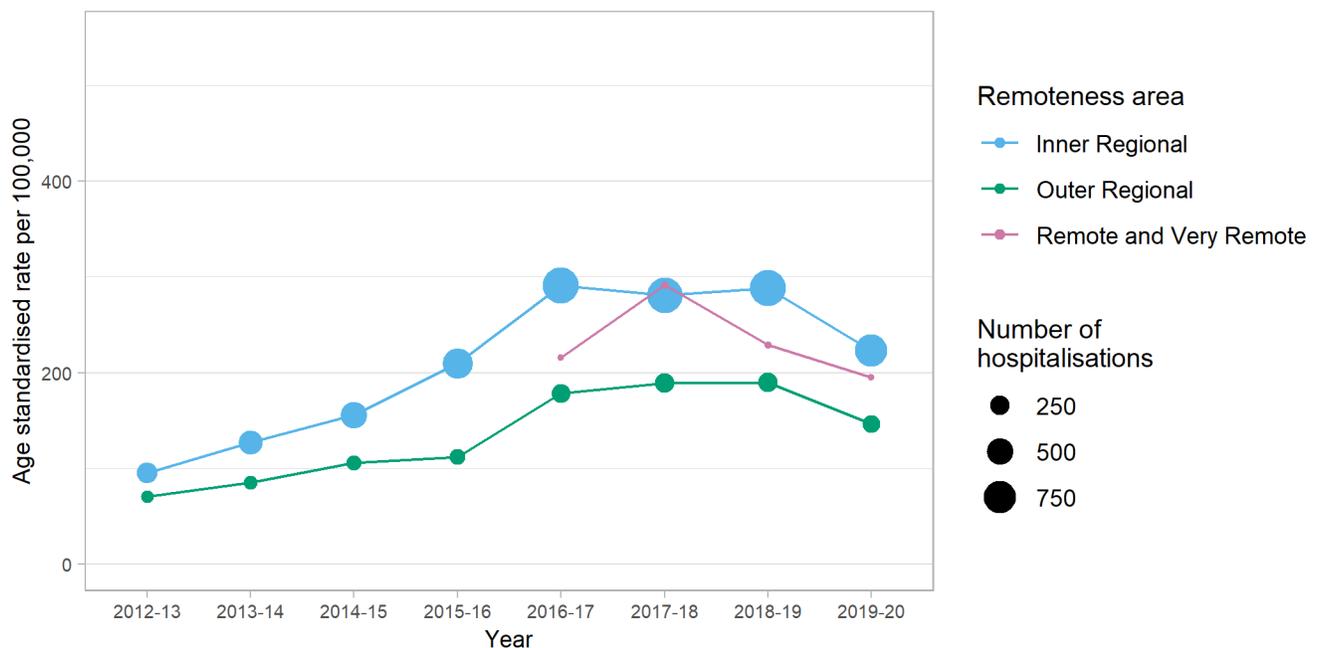
In contrast, there was a significant increase in the rate of hospitalisations related to amphetamines and other stimulants ($p < 0.050$) ([Table 1](#)).

Figure 1. Age-standardised rate per 100,000 people of drug-related hospitalisations, by sex, Tasmania, 1999-00 to 2019-20.



Provision of Tasmanian data between 2008-09 and 2015-16 was limited to drug related hospitalisations based on selected drug-related ICD-10-AM codes (see the [methods](#) for the list of ICD-10-AM codes). Estimates of drug-related hospitalisations for this period are likely to be underestimated.

Figure 2. Age-standardised rate per 100,000 people of drug-related hospitalisations, by remoteness, Tasmania, 2012-13 to 2019-20.



Note: The size (area) of the bubble is proportional to the number of hospitalisations. Data on remoteness are only available from 2012-13. There are no major cities in Tasmania. Where the number of hospitalisations for remote and very remote Tasmania were small (less than or equal to 10) age-standardised rates were not calculated. Please refer to our [methods](#) document for details.

Figure 3. Age-standardised rate per 100,000 people of drug-related hospitalisations, by principal diagnosis of mental and behavioural disorder due to substance use (A) and external cause of poisoning (B), Tasmania, 1999-00 to 2019-20.

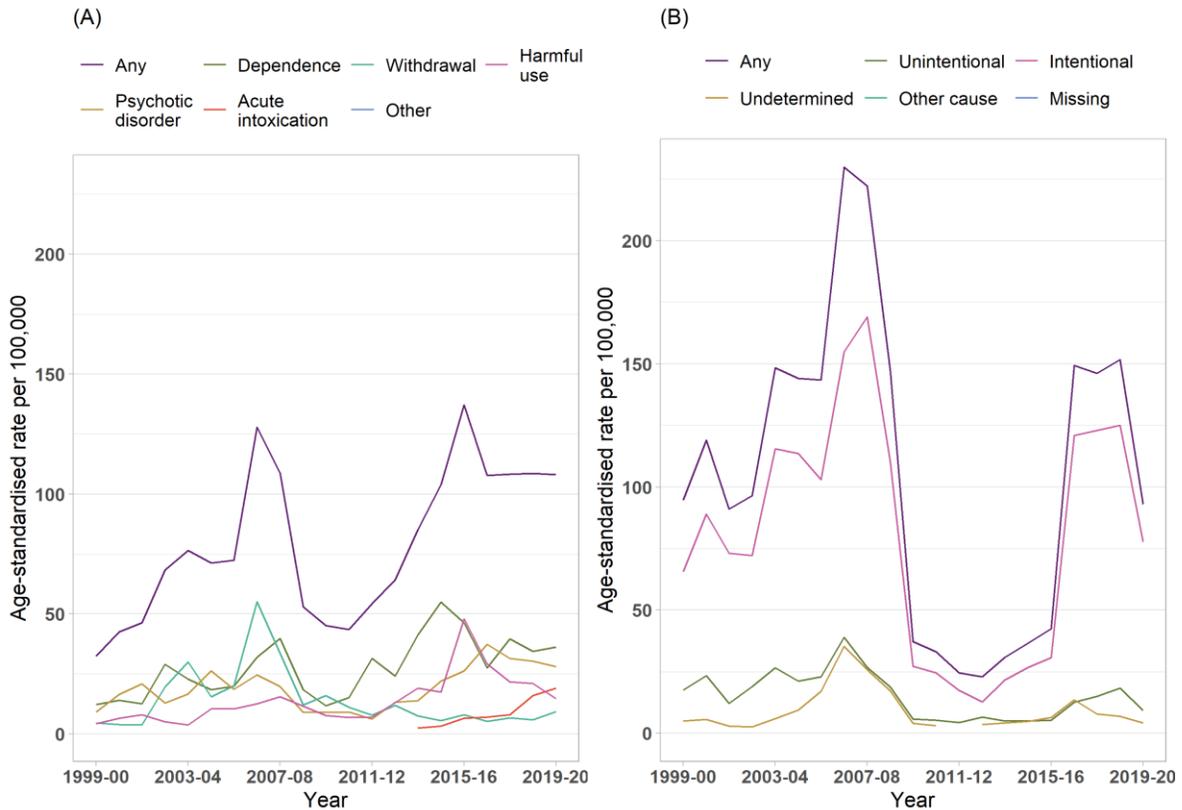
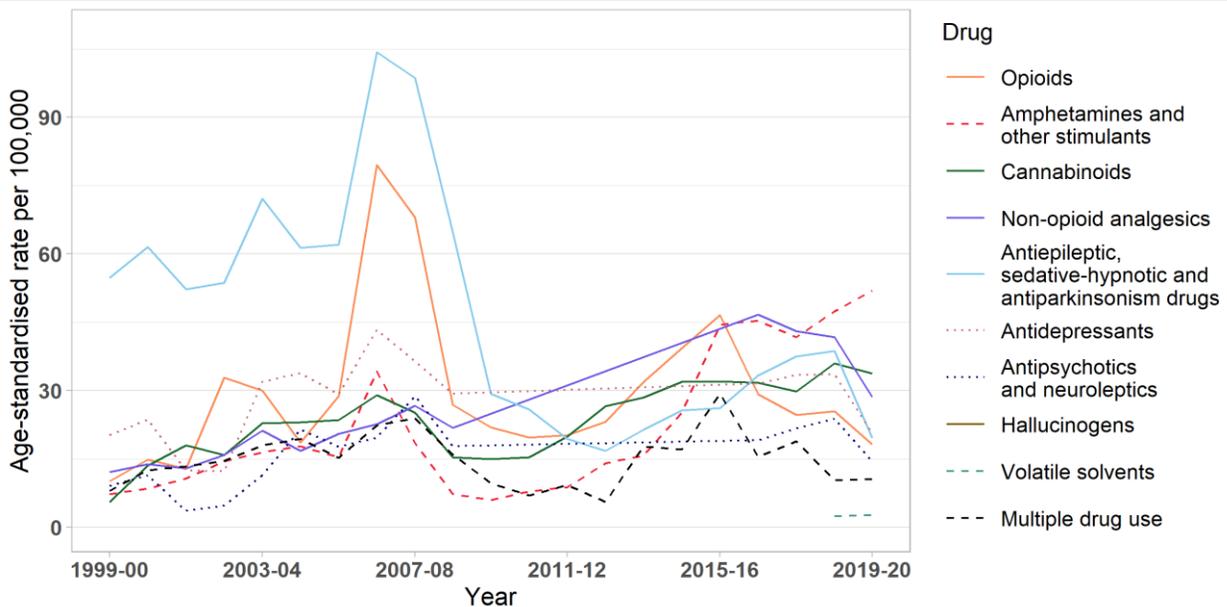


Figure 4. Age-standardised rate per 100,000 people of drug-related hospitalisations, by drug identified in the principal diagnosis, Tasmania, 1999-00 to 2019-20.



Note: Age-standardised rates were not calculated if the number of hospitalisations was less than or equal to 10 (please refer to our [methods](#) document for details). Suppressed data are visible as gaps in the data series.

Table 1. Age-standardised rate (per 100,000 people) of drug-related hospitalisations in 2019-20 and rate ratio and p-value for difference compared to 2018-19, in Tasmania by drug type identified in the principal diagnosis

Drug	Rate in 2019-20 (95% CI)	Rate in 2018-19 (95% CI)	Rate ratio	P-value
All drugs	201 (188.7,214.5)	261 (246,276)	0.77 (0.76,0.78)	<0.001
Amphetamines and other stimulants	52 (45.5, 59.1)	47 (41,54)	1.10 (1.07,1.13)	<0.001
Cannabinoids	34 (28.7, 39.5)	36 (31,42)	0.94 (0.91,0.97)	<0.001
Non-opioid analgesics	29 (24.0, 33.8)	42 (36,48)	0.68 (0.66,0.71)	<0.001
Antidepressants	21 (16.8, 25.3)	34 (29,39)	0.62 (0.59,0.64)	<0.001
Antiepileptic, sedative-hypnotic and antiparkinsonism drugs	20 (16.0, 23.8)	39 (33,45)	0.51 (0.49,0.53)	<0.001
Opioids	18 (14.7, 22.4)	25 (21,30)	0.72 (0.69,0.75)	<0.001
Antipsychotics and neuroleptics	14 (11.2, 18.4)	24 (20,29)	0.61 (0.58,0.64)	<0.001
Multiple drug use	11 (7.8, 14.0)	10 (8,14)	1.03 (0.97,1.10)	0.352
Volatile solvents	2.7 (1.41, 4.61)	2.4 (1.2, 4.1)	1.12 (0.99,1.27)	0.081

Note: 95% confidence intervals for the age-standardised rate and rate ratio are shown in brackets. Please refer to our [methods](#) document on 'Presentation of results' for interpretation of rate ratios. Please also refer to our [methods](#) document on 'Scope of the data' and 'Coding of hospitalisations' for specifications of data selected and all exclusions.

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Please note that as with all statistical reports there is the potential for minor revisions to data in this report over its life. Please refer to the online version at [Drug Trends](#).

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Related Links

- Hospitalisations data visualisations: https://drugtrends.shinyapps.io/hospital_separations
- Hospitalisations methods document: <https://ndarc.med.unsw.edu.au/resource-analytics/trends-drug-related-hospitalisations-australia-1999-2020>
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