Characteristics of Young People at First Alcohol-related Hospital Admissions and Emergency Department Presentations in Australia

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Introduction

- Alcohol-related harms are most common in early adulthood.1
- It is known that earlier alcohol use predicts later harm 2,3.
- Less is known whether the timing of the experience of alcohol-related harm similarly predicts further harm.
- Examining young people at their first-ever presentation to inpatient and emergency department (ED) services with an alcohol-related problem (their ‘first event’) can inform intervention strategies to reduce long-term costs to young peoples’ health.

Aims

i. Examine the profile of young people at their first alcohol-related hospital separation or ED presentation by age group:
   - Early adolescent (12-14 years)
   - Late adolescent (15-17 years)
   - Young adult (18-20 years)
ii. Examine correlates of age and sociodemographic and clinical characteristics at this first event.
iii. Examine rates of subsequent 12-month readmissions.

Methods

We use data from a subset of 10,300 people aged 12 to 20 years from the existing Data-Linkage Alcohol Cohort Study.4 This cohort consists of New South Wales hospital and ED records between January 1st, 2005 and December 31st, 2014 with an alcohol-related principal or additional diagnosis. Regression models (p < 0.05) were used to determine:

i. Whether sociodemographic and clinical characteristics were associated with age group at first event.
ii. Whether age at first event was associated with rates of subsequent 12-month hospitalisations and ED presentations.

Results

Compared to young adults, people who experienced their first event in early adolescence or late adolescence were:

- More likely to be female.
- More likely to present to an ED (vs being hospitalised).
- More likely to present with behavioural diagnoses such as intoxication.
- Less likely to present with other physical diagnoses such as alcoholic liver disease.

Compared to young adults, people who experienced their first event in early adolescence or late adolescence were 11-20% less likely to be hospitalised in the 12 months after their first alcohol-related event.

Compared to the general population of the same age:

- Early adolescents had 4.4 times more ED presentations and 8 times more hospitalisations.
- Late adolescents had 3.3 times more ED presentations and 5 times more hospitalisations.
- Young adults had 3.4 times more ED presentations and 4.3 times more hospitalisations.

Conclusions & Discussion

Young people who present to an emergency department or are admitted to hospital for the first time with an alcohol-related reason differ in their sociodemographic and clinical characteristics depending on the age at which they experience this event.

- Strategies to reduce alcohol-related harms should consider that females are at greater risk of hospital access for alcohol problems in adolescence whereas males are at greater risk in young adulthood.
- Adolescents likely had lower rates of subsequent 12-month hospitalisations compared to young adults due to differences in ease of access to alcohol and engagement in heavy episodic drinking.
- Rates of ED presentations and hospitalisations in the subsequent 12 months were much more elevated compared to the general population, highlighting the need to address alcohol-related harms in young people to prevent future harm.

References


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