



## **PREVENTABLE HOSPITALISATIONS OF PEOPLE WITH INTELLECTUAL DISABILITY UP TO EIGHT TIMES HIGHER THAN GENERAL POPULATION**

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THE rates of potentially preventable hospitalisations for people with intellectual disability are up to eight times higher than for the general population, according to research published by the *Medical Journal of Australia*.

Researchers from the UNSW Sydney, led by Professor Julian Trollor, Chair of Intellectual Disability Mental Health, analysed data from 92 542 people with intellectual disability in NSW and potentially preventable hospitalisations data for NSW published by HealthStats NSW.

“Between 2001–02 and 2014–15, the age-standardised rate of potentially preventable hospitalisations of people with intellectual disability ranged between 5286 and 6301 per 100 000 persons; the age-standardised rate for the NSW population ranged between 1278 and 1511 per 100 000 persons,” Trollor and colleagues wrote.

“We found that rates were particularly high for hospitalisations for acute conditions, for which overall rates for people with intellectual disability were five to eight times as high as for the general population; the rates for admissions with vaccine-preventable conditions were about three times as high.

“Differences in rates between people with intellectual disability and the general population were greatest for admissions related to convulsions and epilepsy, which were 22 times higher; also substantially higher were admissions for dental conditions (6 times higher) and chronic lung conditions such as bronchiectasis (3 times higher), but rates were lower for asthma.”

Trollor and colleagues wrote that in order to avert potentially preventable hospitalisations, “understanding their main drivers is critical, but there is a dearth of research in this area for the general population, and even less regarding people with intellectual disability”.

“Our findings provide additional evidence that the Australian health care system, particularly primary and community health care, are not sufficiently equipped to meet the complex health care needs of people with intellectual disability.

“Systemic action to remedy this problem could include a national population health strategy for people with intellectual disability, reforming Australian health care and improving the capacity of health care providers to meet their needs, and improving the health literacy of people with intellectual disability and people in their support networks.”

The authors wrote that their conclusion could not have been reached by directly assessing medical records, as “intellectual disability status is not adequately recorded in Australian medical health records”.



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