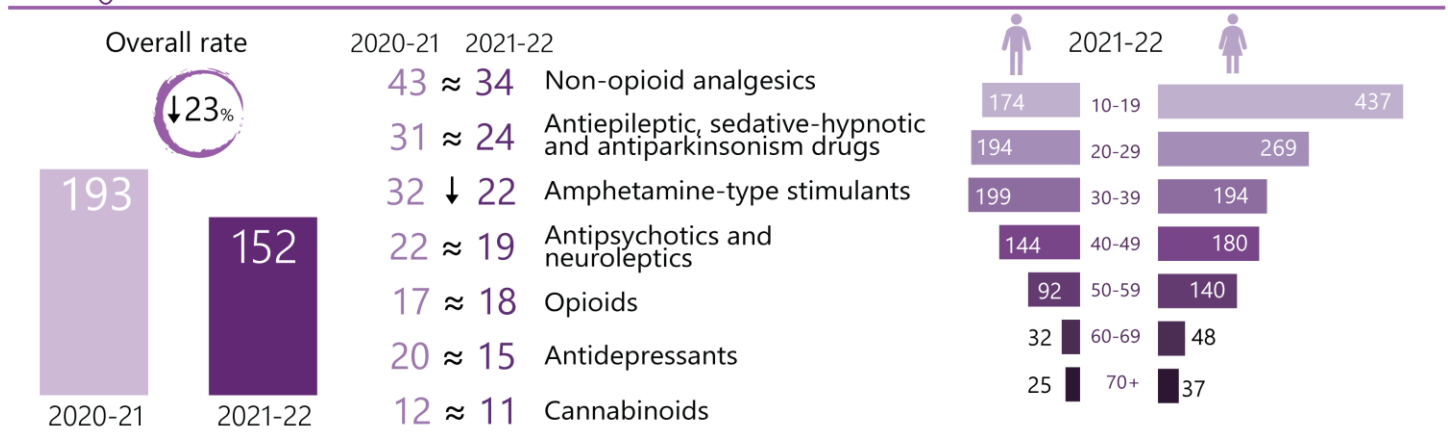


Australian Capital Territory



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



Note: Arrows indicate a statistically significant increase/decrease between 2020-21 and 2021-22 ($p < 0.05$); sign "≈" indicates no significant change.

There were 693 hospitalisations with a drug-related principal diagnosis in the [Australian Capital Territory](#) in 2021-22.

This is equivalent to 152 hospitalisations per 100,000 people, which was 21% lower than the rate in 2020-21 (193 hospitalisations per 100,000 people) (Table A17, [Appendix](#)) but higher than the rate observed from 2002-03 to 2013-14 ([Figure 1](#)).

Sex

The rate of hospitalisations was higher among [females](#) than males in 2021-22 (179 versus 123 hospitalisations per 100,000 people, respectively).

Age

In 2021-22, the rate of hospitalisations was [highest](#) among the 10-19 age group, followed by the 20-29 and 30-39 age groups (306, 235 and 197 hospitalisations per 100,000 people, respectively). Among males, the rate of drug-related hospitalisations was highest in the 30-39 age group, and among females in the 10-19 age group.

Remoteness Area of Usual Residence

Over 99.8% of the population in the Australian Capital Territory resided in major city areas and the remaining

resided in inner regional areas. For this reason, data on hospitalisations by remoteness area are not presented.

External Cause of Drug Poisoning

In 2021-22, 72% of drug-related hospitalisations in the Australian Capital Territory were due to drug poisoning. Furthermore, 80% of drug poisoning-related hospitalisations were intentional (88 hospitalisations per 100,000 people) and 16% were unintentional (18 hospitalisations per 100,000 people) ([Figure 2](#)).

Drug Type

In 2021-22, the rate of hospitalisations was [highest](#) where there was a principal diagnosis indicating non-opioid analgesics (34 hospitalisations per 100,000 people ([Figure 3](#))).

Compared to 2020-21, there was a significant decrease in the rate of hospitalisations involving amphetamine-type stimulants from 32 to 22 hospitalisations per 100,000 people in 2021-22. In contrast, the rates for all other drug classes remained relatively unchanged (Table A17, [Appendix](#)).

Figure 1. Age-standardised rate per 100,000 people of drug-related hospitalisations, by sex, Australian Capital Territory, 2002-03 to 2021-22.

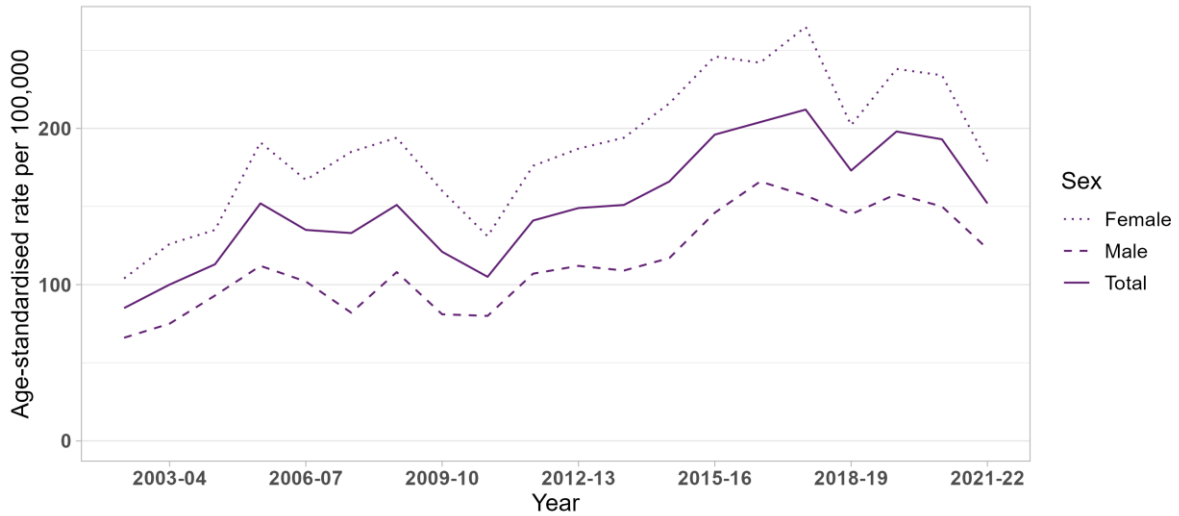
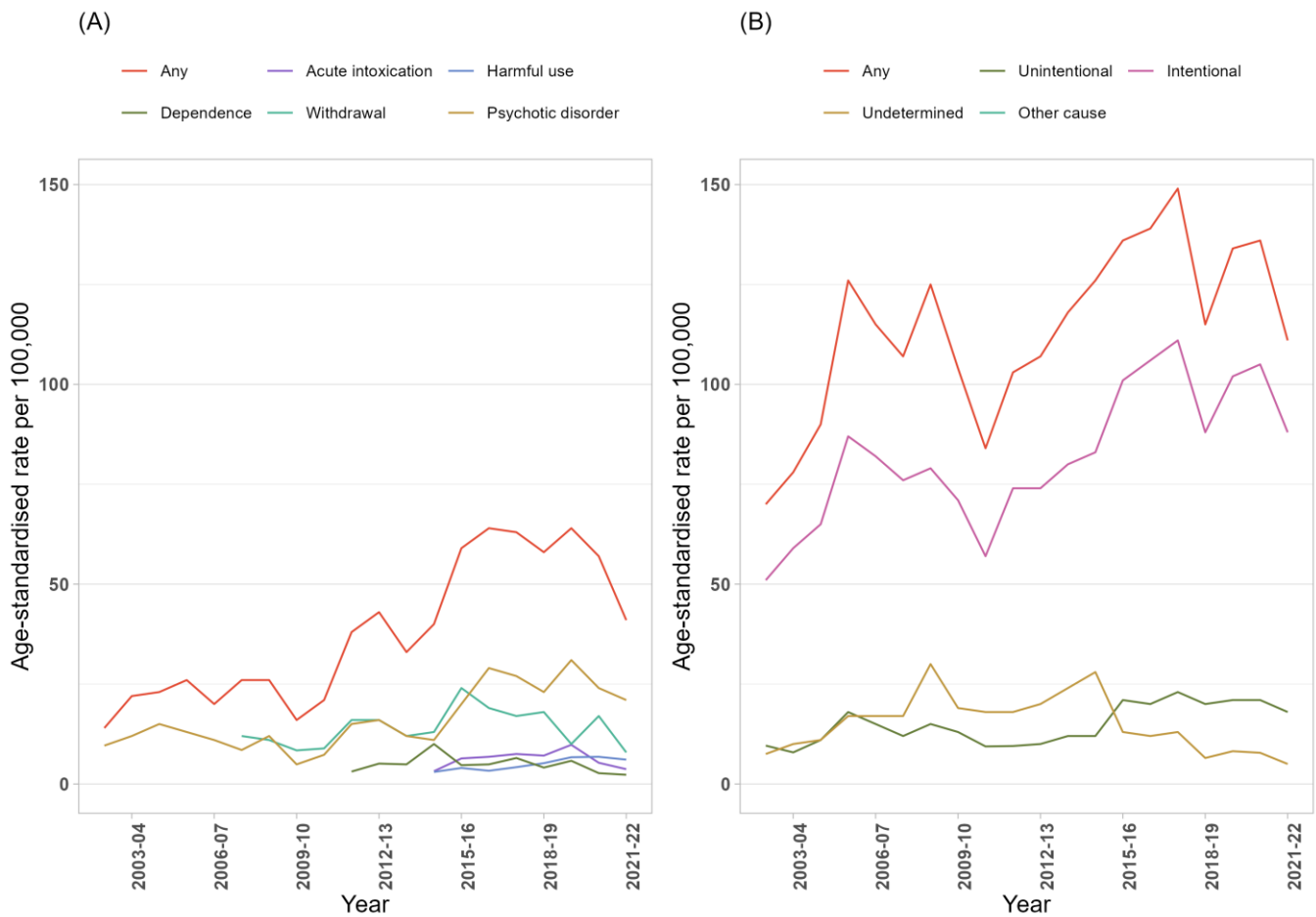
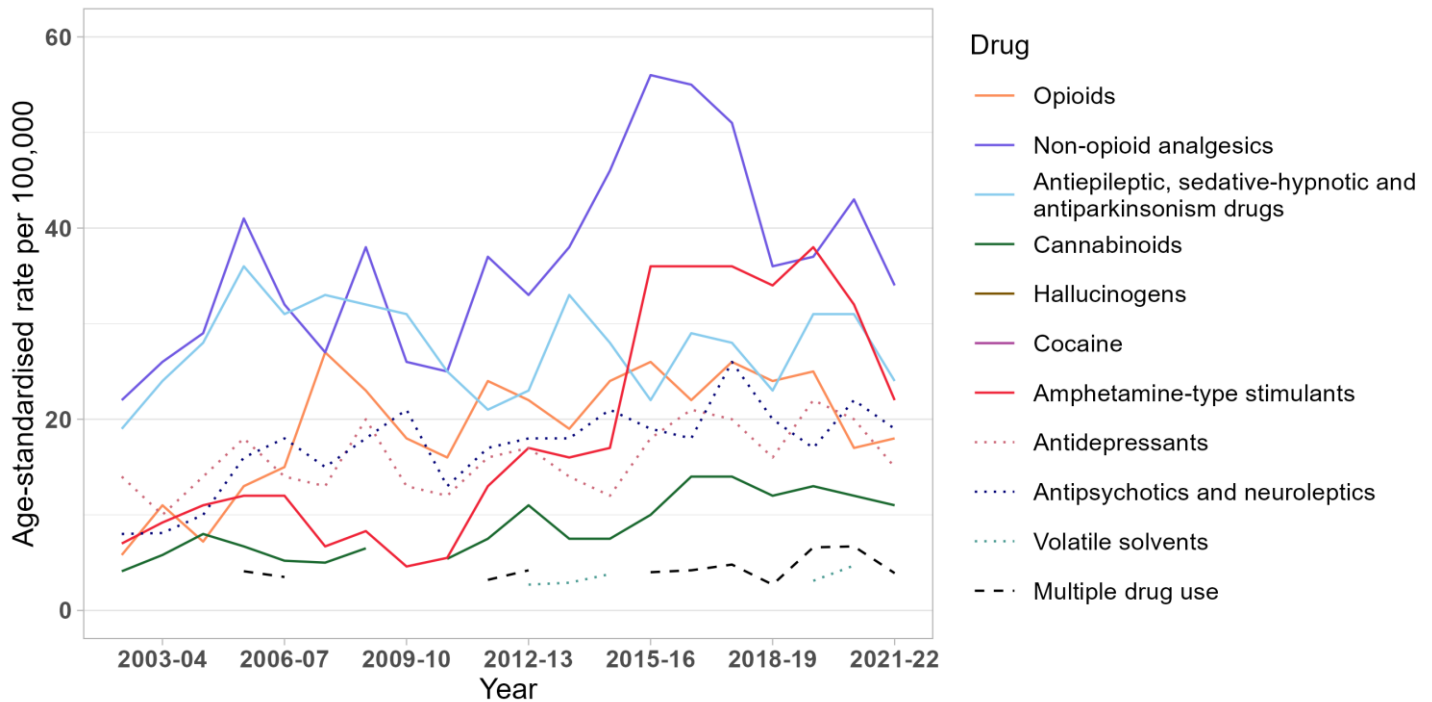


Figure 2. Age-standardised rate per 100,000 people of drug-related hospitalisations, by principal diagnosis of mental and behavioural disorder due to substance use (A) and external cause of poisoning (B), Australian Capital Territory, 2002-03 to 2021-22.



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.

Figure 3. Age-standardised rate per 100,000 people of drug-related hospitalisations, by drug identified in the principal diagnosis, Australian Capital Territory, 2002-03 to 2021-22.



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 A17. Age-standardised rate (per 100,000 people) of drug-related hospitalisations in 2021-22 and average percent change for difference compared to 2020-21, in Australian Capital Territory by drug type identified in the principal diagnosis

Drug	Rate in 2021-22 (95% CI)	Rate in 2020-21 (95% CI)	APC (95% CI)
All drugs	152 (141, 164)	193 (180, 206)	-21 (-29, -13)
Non-opioid analgesics	34 (29, 41)	43 (37, 49)	-19 (-35, 0)
Antiepileptic, sedative-hypnotic and antiparkinsonism drugs	24 (20, 29)	31 (26, 37)	-22 (-39, 0)
Amphetamine-type stimulants	22 (18, 26)	32 (27, 38)	-33 (-48, -14)
Antipsychotics and neuroleptics	19 (15, 24)	22 (18, 27)	-15 (-36, 14)
Opioids	18 (14, 22)	17 (13, 21)	7.2 (-21.6, 46.8)
Antidepressants	15 (12, 19)	20 (16, 25)	-23 (-44, 5)
Methamphetamine	14 (11, 18)	16 (12, 20)	-11 (-36, 24)
Cannabinoids	11 (8, 15)	12 (9, 16)	-8.0 (-37.0, 34.5)
Multiple drug use	3.9 (2.3, 6.1)	6.7 (4.6, 9.6)	-43 (-68, 2)

Note: 95% confidence intervals for the age-standardised rate and average percent change are shown in brackets. Please refer to our [methods](#) document on 'Presentation of results' for interpretation of average percent change. 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. Please refer to the online version at [Drug Trends](#).

Please contact the Drug Trends team with any queries regarding this publication: drugtrends@unsw.edu.au.

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Data source

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We acknowledge the traditional custodians of the land on which the work for this report was undertaken. We pay our respects to Elders past, present, and emerging.

Related Links

- Hospitalisations data visualisations: https://drugtrends.shinyapps.io/hospital_separations
- Full report and the methods document: <https://www.unsw.edu.au/research/ndarc/resources/trends-drug-related-hospitalisations-australia-2002-2022>
- For other Drug Trends publications on drug-related hospitalisations and drug-induced deaths in Australia, go to: [National Illicit Drug Indicators Project \(NIDIP\)](#)
- For more information on NDARC research, go to: [National Drug & Alcohol Research Centre | Medicine & Health - UNSW Sydney](#)
- For more information about the AIHW and NHMD, go to: <https://www.aihw.gov.au/>
- For more information on ICD coding go to: [ICD-10-AM/ACHI/ACS Eleventh Edition | Resources | IHACPA](#)
- For more research from the Drug Trends program go to: [Drug trends | National Drug & Alcohol Research Centre - UNSW Sydney](#)