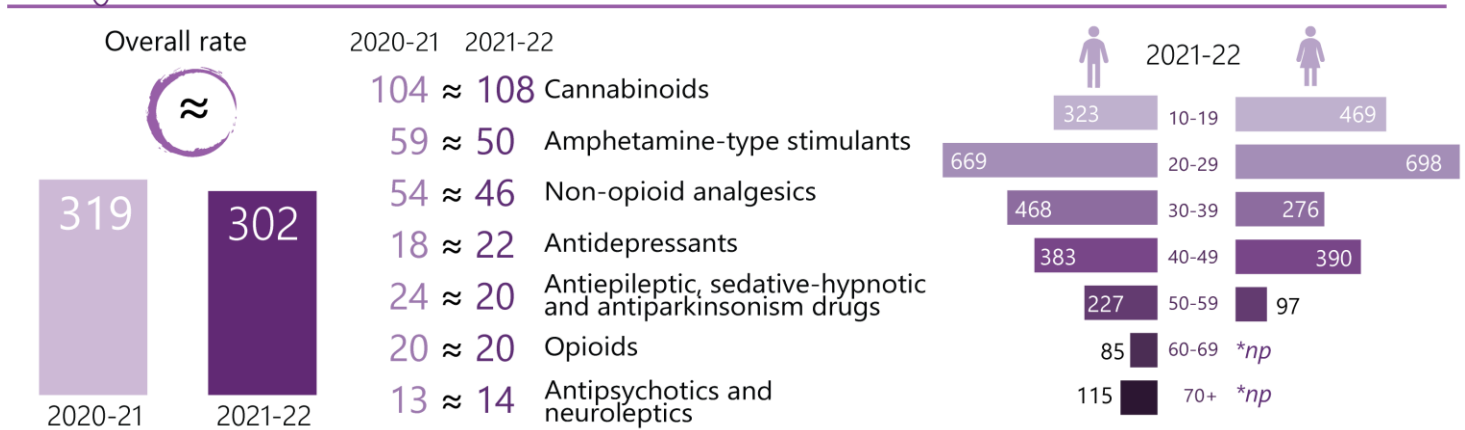


## Northern Territory



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; \*np means data not publishable due to small numbers

There were 788 hospitalisations with a drug-related principal diagnosis in the [Northern Territory](#) in 2021-22.

This is equivalent to 302 hospitalisations per 100,000 people, which was similar to the 2020-21 rate (319 hospitalisations per 100,000 people) (Table A19, [Appendix](#)), although over twice the rate reported between 2002-03 and 2012-13 ([Figure 1](#)).

### Sex

The rate of hospitalisations was higher among [males](#) than females in 2021-22 (213 versus 284 hospitalisations per 100,000 people, respectively).

### Age

In 2021-22, the rate of hospitalisations was [highest](#) among the 20-29 age group, followed by the 10-19, 40-49 and 30-39 age groups (693, 408, 386 and 371 hospitalisations per 100,000 people, respectively). Among both males and females, the rates of drug-related hospitalisations were highest in the 20-29 age group.

### Remoteness Area of Usual Residence

The highest rate of hospitalisations in 2021-22 was observed in the [remote and very remote](#) Northern

Territory (401 hospitalisations, 369 per 100,000 people), followed by the outer regional Northern Territory (380 hospitalisations, 251 per 100,000 people), noting there are no major city areas or inner regional areas in the Northern Territory ([Figure 2](#)).

### External Cause of Drug Poisoning

In 2021-22, 38% of drug-related hospitalisations in the Northern Territory were due to drug poisoning. Furthermore, 75% of drug poisoning-related hospitalisations were intentional (88 hospitalisations per 100,000 people) and 19% were unintentional (22 hospitalisations per 100,000 people) ([Figure 3](#)).

### Drug Type

In 2021-22, the rate of hospitalisations was [highest](#) where there was a principal diagnosis indicating cannabinoids (108 hospitalisations per 100,000 people) ([Figure 4](#)).

Compared to 2020-21, there were no statistically significant changes in rates of hospitalisation with principal diagnosis related to any of the drug classes (Table A19, [Appendix](#)).

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

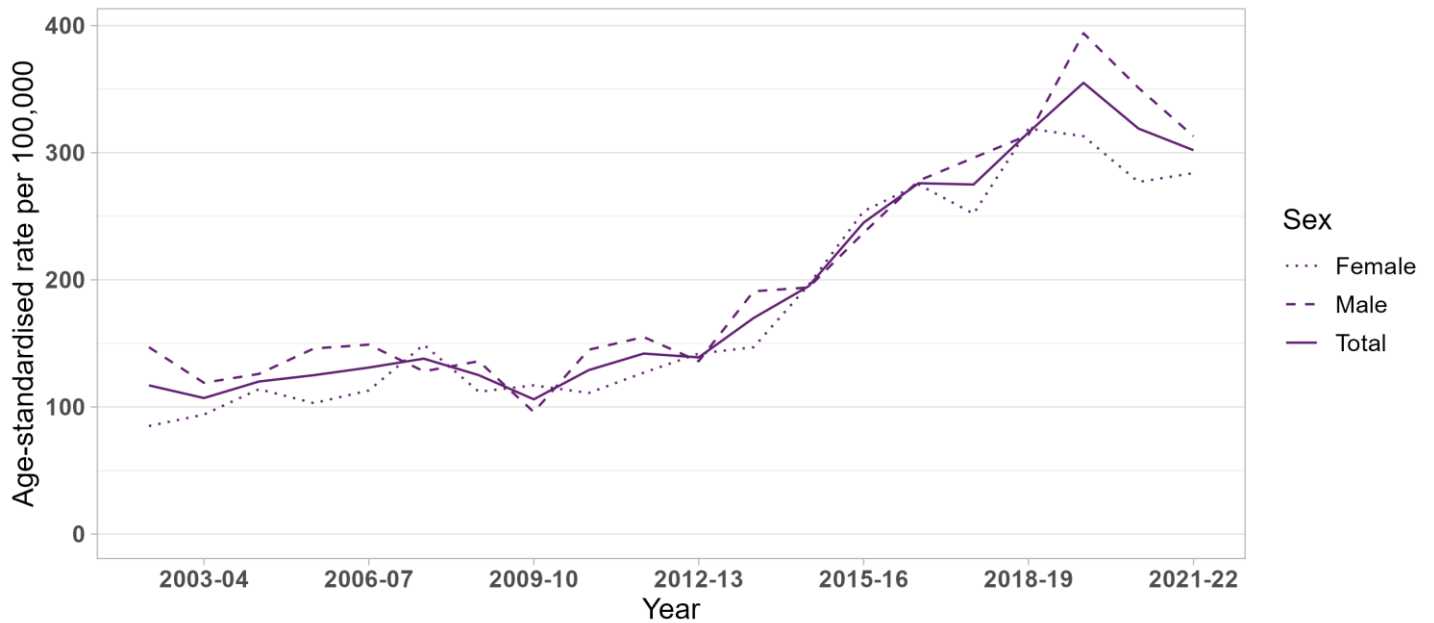
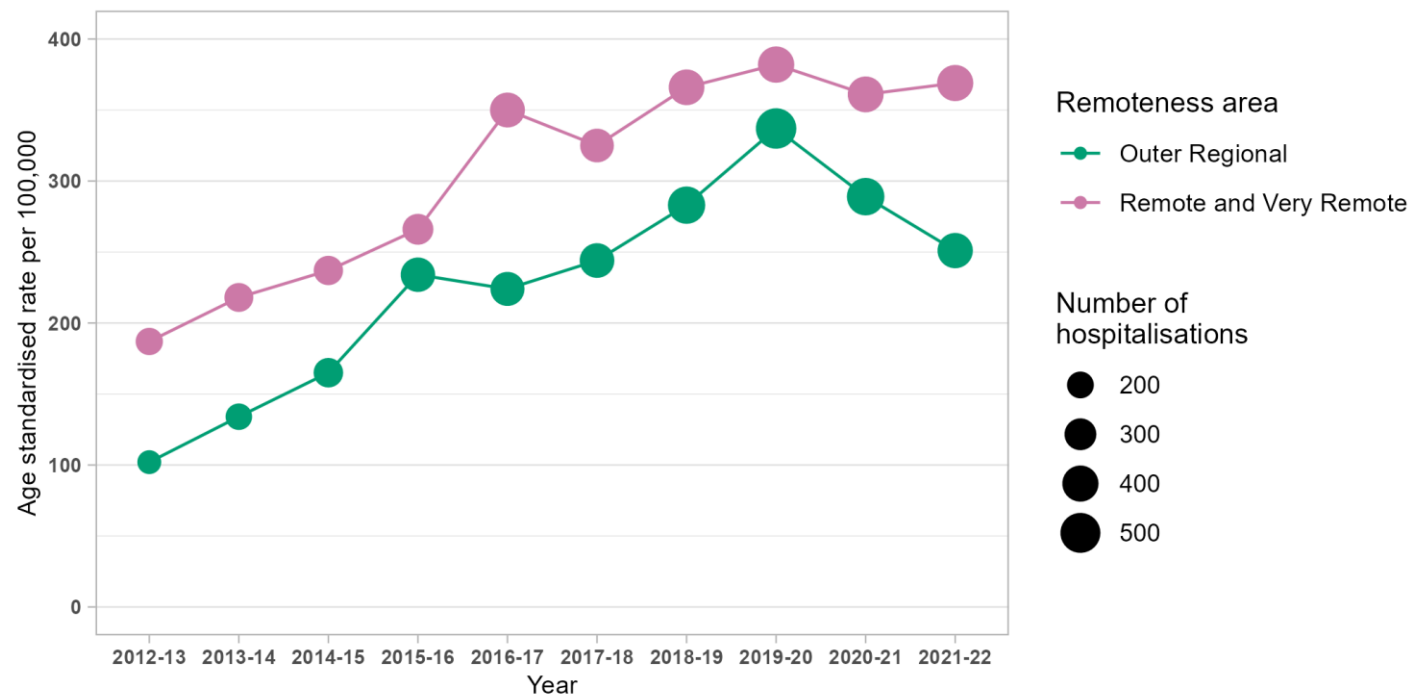


Figure 2. Age-standardised rate per 100,000 people of drug-related hospitalisations, by remoteness, Northern Territory, 2012-13 to 2021-22.



Note: The size (area) of the bubble is proportional to the number of hospitalisations. There are no major city areas and inner regional areas in the Northern Territory. Data on remoteness are only available from 2012-13.

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), Northern Territory, 2002-03 to 2021-22.

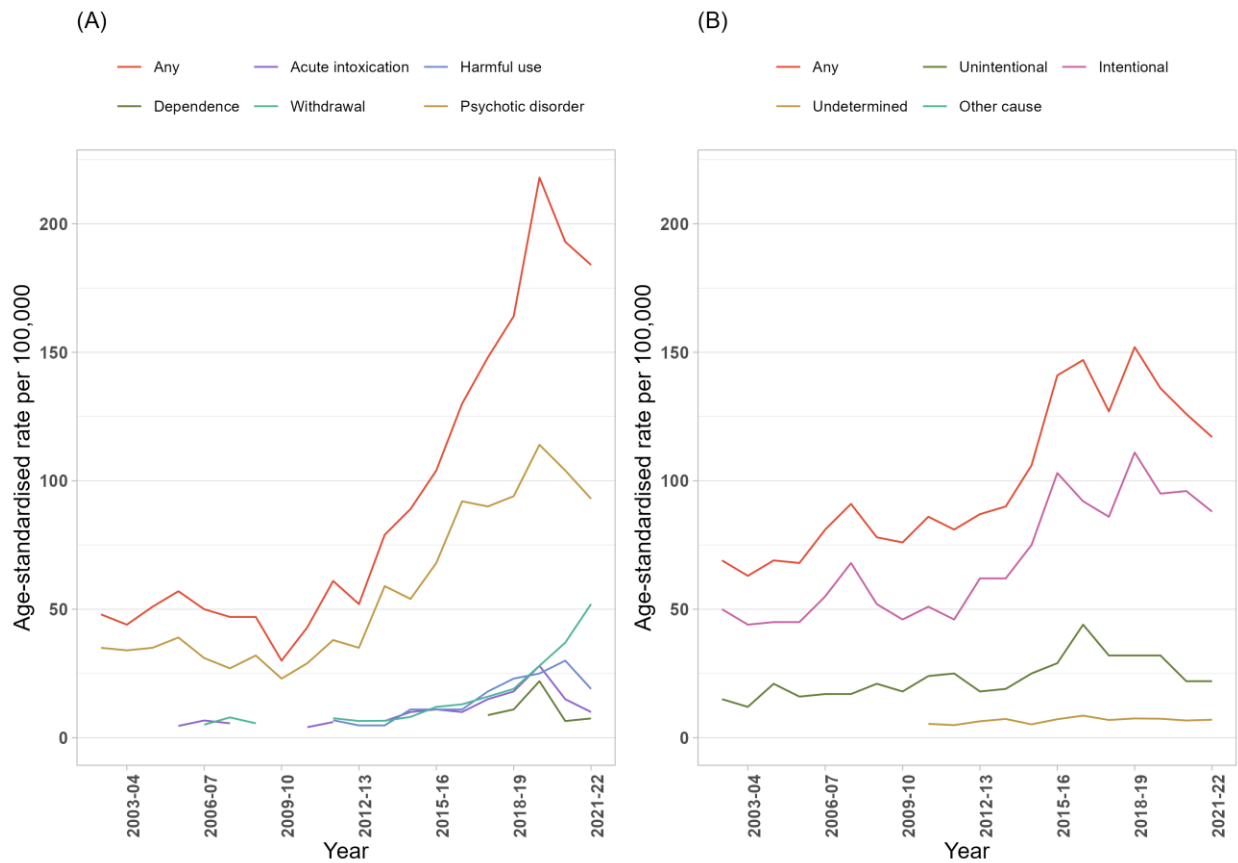
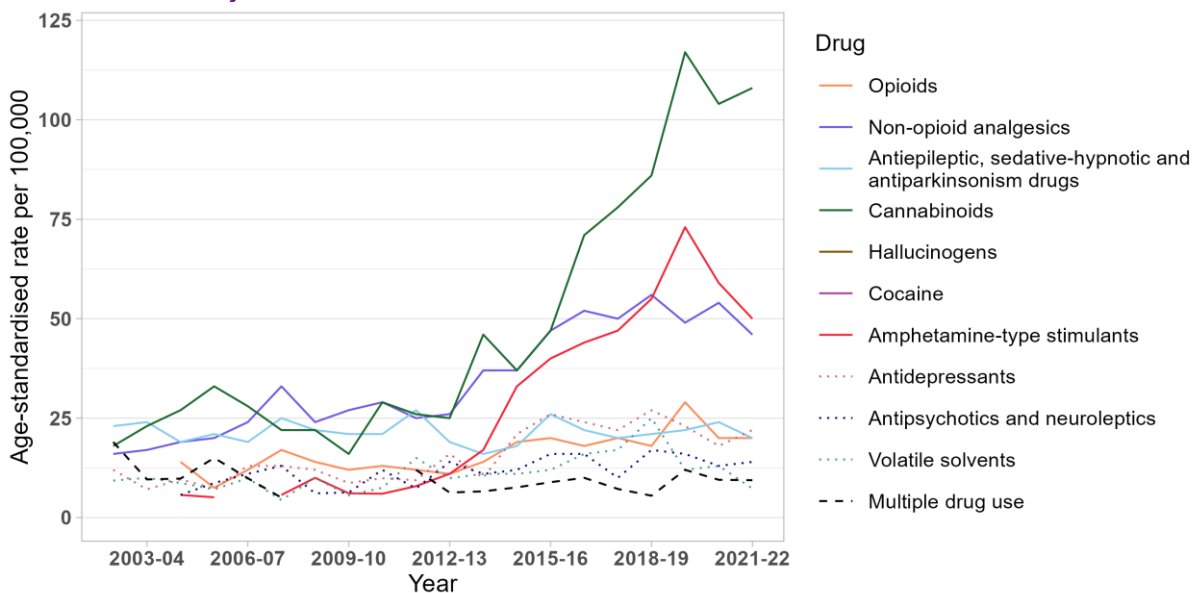


Figure 4. Age-standardised rate per 100,000 people of drug-related hospitalisations, by drug identified in the principal diagnosis, Northern Territory, 2002-03 to 2021-22.



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 19. 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 Northern 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	302 (281, 324)	319 (297, 342)	-5.4 (-14.2, 4.4)
Cannabinoids	108 (96, 121)	104 (92, 117)	4.2 (-11.7, 23.0)
Amphetamine-type stimulants	50 (42, 59)	59 (50, 69)	-15 (-33, 7)
Non-opioid analgesics	46 (38, 56)	54 (45, 64)	-14 (-33, 11)
Methamphetamine	41 (34, 50)	43 (36, 52)	-4.2 (-26.1, 24.3)
Antidepressants	22 (17, 29)	18 (13, 24)	23 (-17, 81)
Antiepileptic, sedative-hypnotic and antiparkinsonism drugs	20 (15, 27)	24 (19, 31)	-17 (-43, 20)
Opioids	20 (15, 27)	20 (15, 27)	1.2 (-32.6, 52.0)
Antipsychotics and neuroleptics	14 (10, 20)	13 (9, 18)	14 (-29, 83)
Multiple drug use	9.4 (6.1, 13.7)	9.5 (6.1, 14.0)	-1.3 (-43.1, 71.5)
Volatile solvents	7.3 (4.3, 11.5)	13 (9, 18)	-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](mailto: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](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](#)