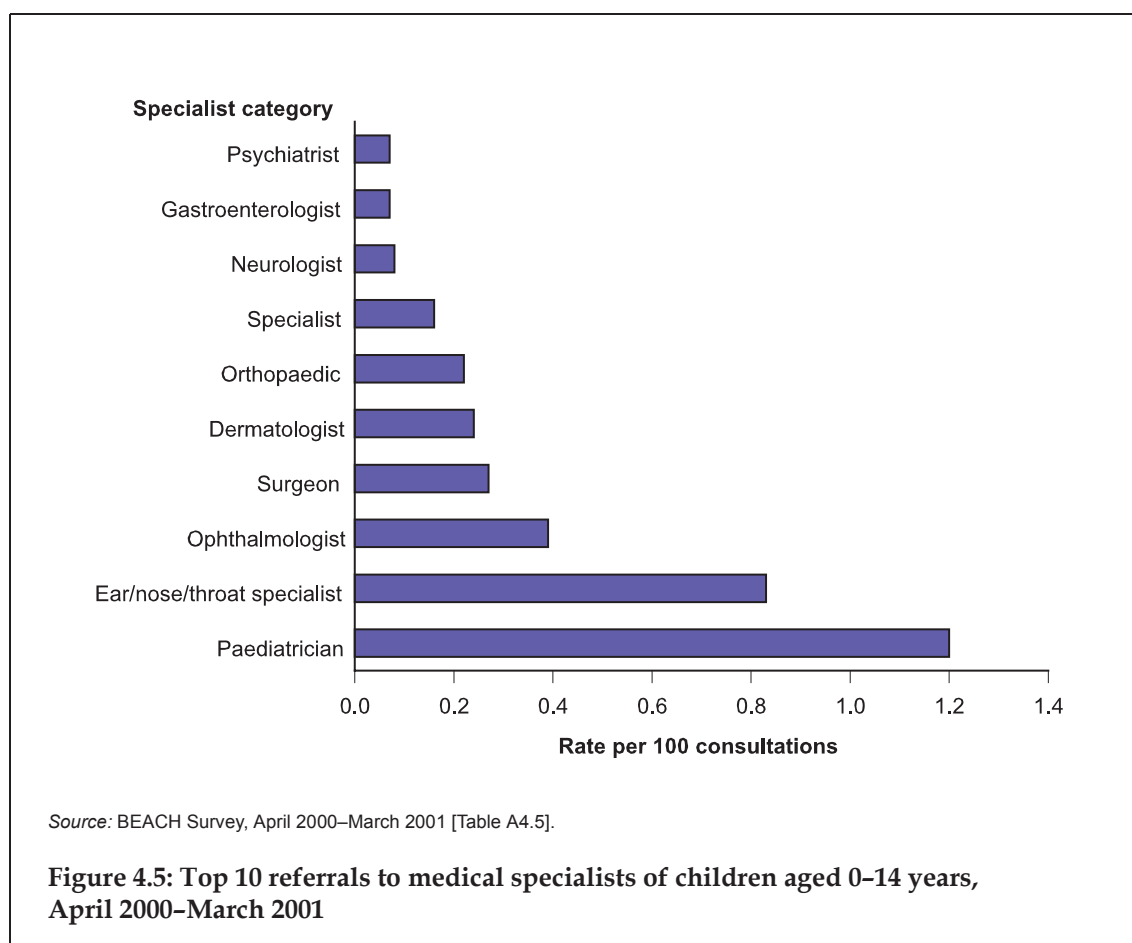


Medical specialists



- Referrals to medical specialists were most frequently to a paediatrician.
- Almost half of all referrals were to a specialist in child health or to an ear, nose and throat specialist. Just over 10% of specialist referrals were to an eye specialist.

Allied health services

General practitioners referred child patients to an allied health specialist at a rate of 1.0 per 100 consultations. Just under half of these referrals were for hearing tests or physiotherapy. Referrals to dentists, optometrists, speech therapists, podiatrists were made in about equal numbers, each representing less than 2% of total referrals.

Pathology and imaging investigations

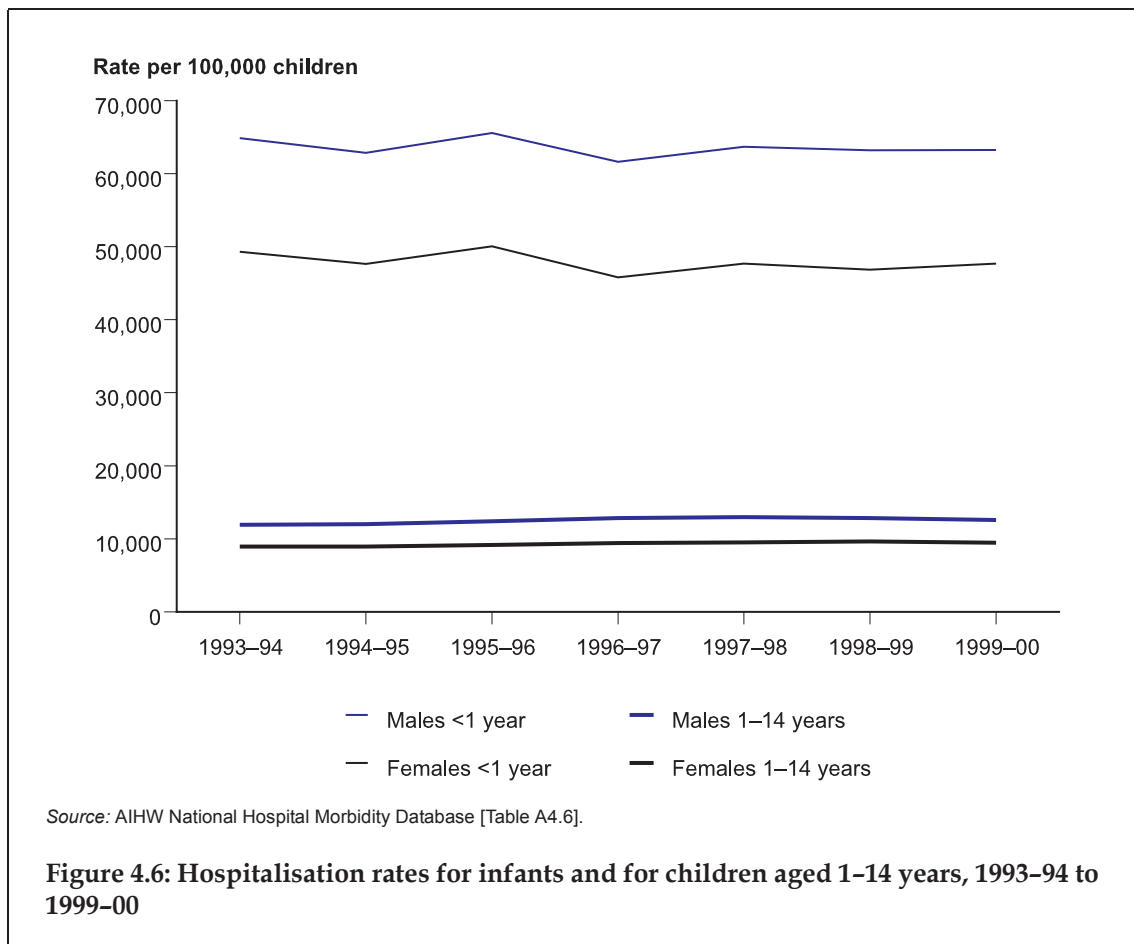
The ordering rates of pathology and imaging tests by GPs were fairly low. Imaging tests were ordered at a rate of 3.8 per 100 encounters and included x-ray, ultrasound and CT scans. Among tests ordered for which the type of imaging test was known, x-rays represented the highest proportion (90%) and were most often ordered for wrist, ankle, knee, finger(s)/thumb, forearm and hand.

Pathology tests were ordered at a rate of 7.2 per 100 consultations and were most commonly for urine, full blood count or liver function tests.

Hospitalisations

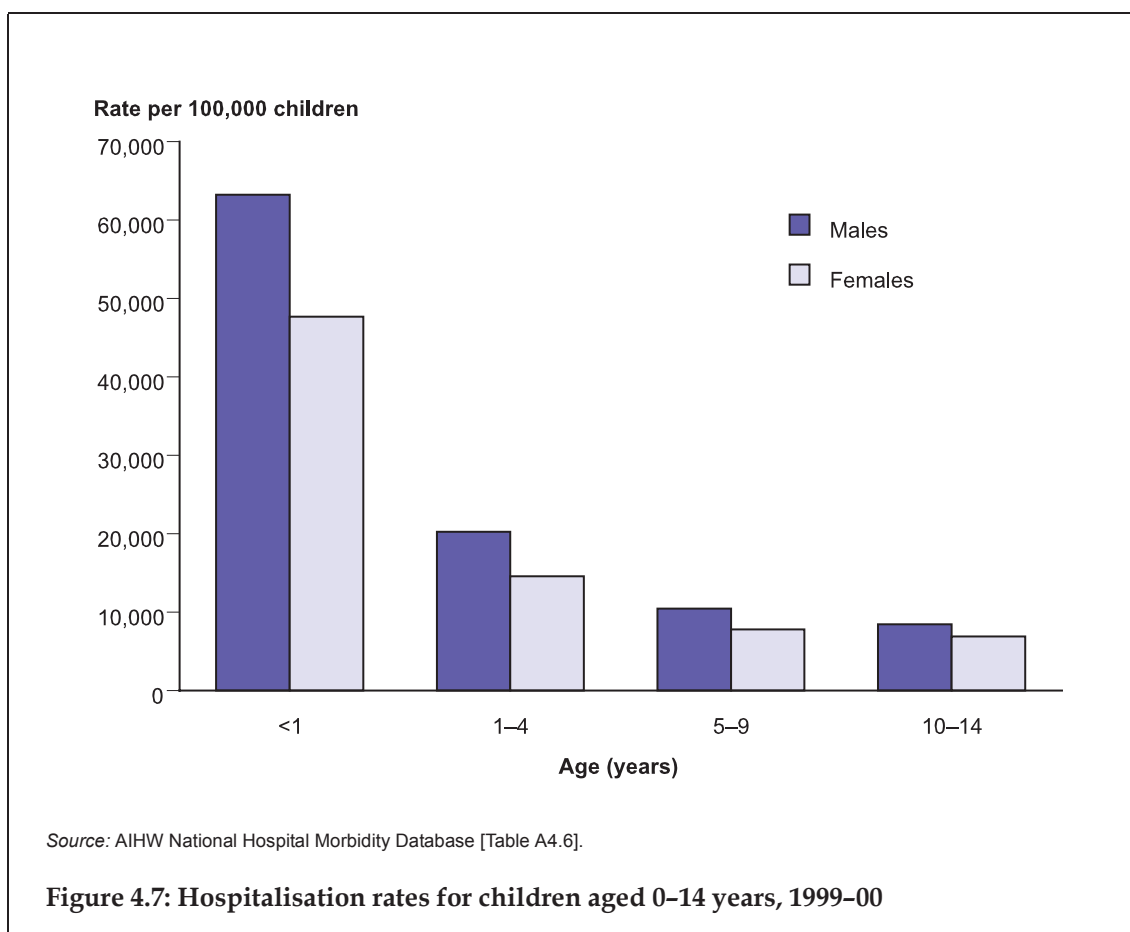
Hospitalisation rates can be used as a proxy indicator of the level of serious illness in the community, although they can be affected by access and admission practices. The following hospitalisation data do not include hospitalisations for healthy newborns. In 1999-00, 190,335 or 77% of newborn babies in hospital were healthy and did not require any treatment.

The indicator for hospitalisation rates for children aged 1-14 years is the number of hospitalisations for children aged 1-14 years in a given year as a rate per 100,000 children (Figure 4.6).



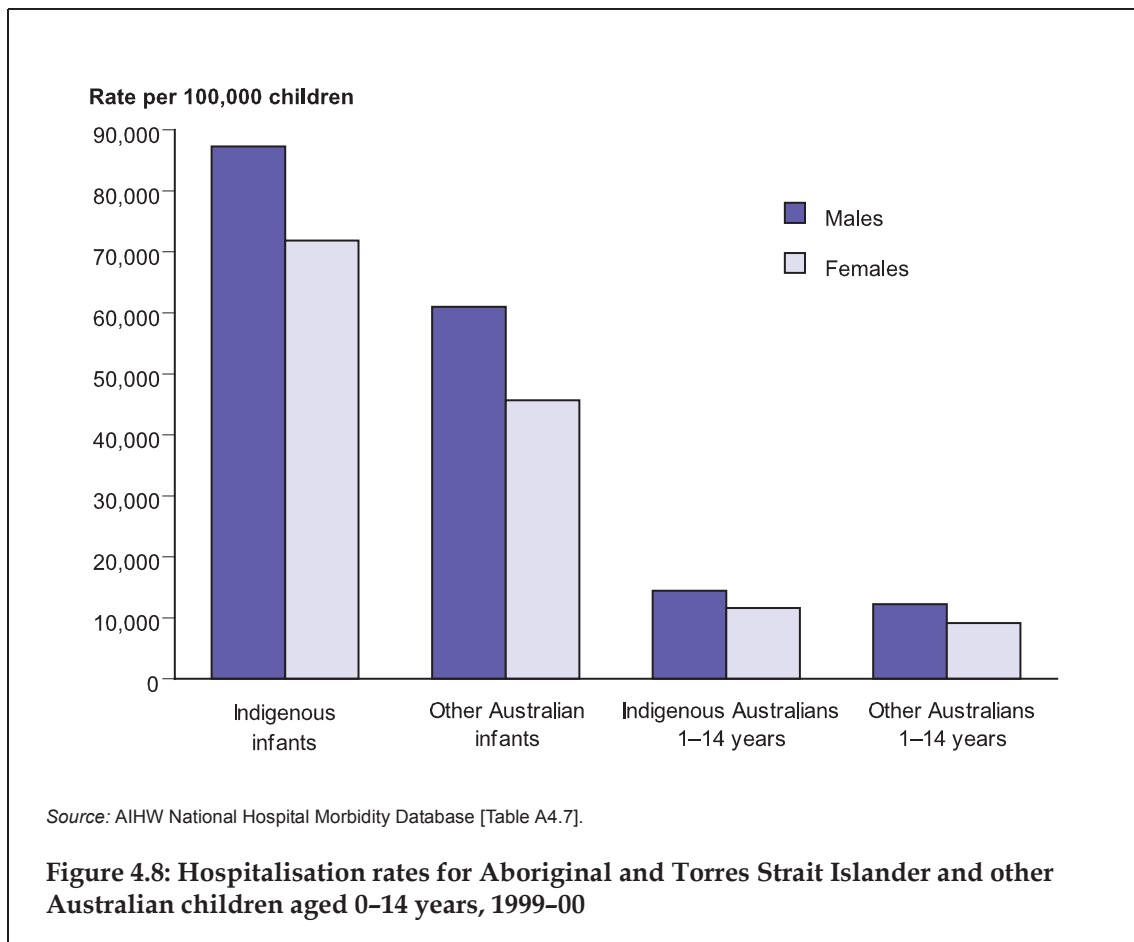
- Among infants and children aged 1-14 years, hospitalisation rates remained relatively constant over the period 1993-94 to 1999-00.
- Rates were higher for infants than for children aged 1-14 years. In 1999-00, infants were hospitalised at a rate of 55,667.3 per 100,000 children, while children aged 1-14 were hospitalised at a rate of 11,043.1.
- In 1999-00, male infants were hospitalised at a rate of 63,235.5 per 100,000 infants, while for female infants the rate was 47,693.2. Multiple admissions of individual infants may be the reason for the high infant hospitalisation rates.
- Among children aged 1-14 years, boys were hospitalised at a rate of 12,559 per 100,000 children, while the rate for girls was 9,446.4.

Hospitalisation rates by age group in 1999–00 are presented in Figure 4.7.



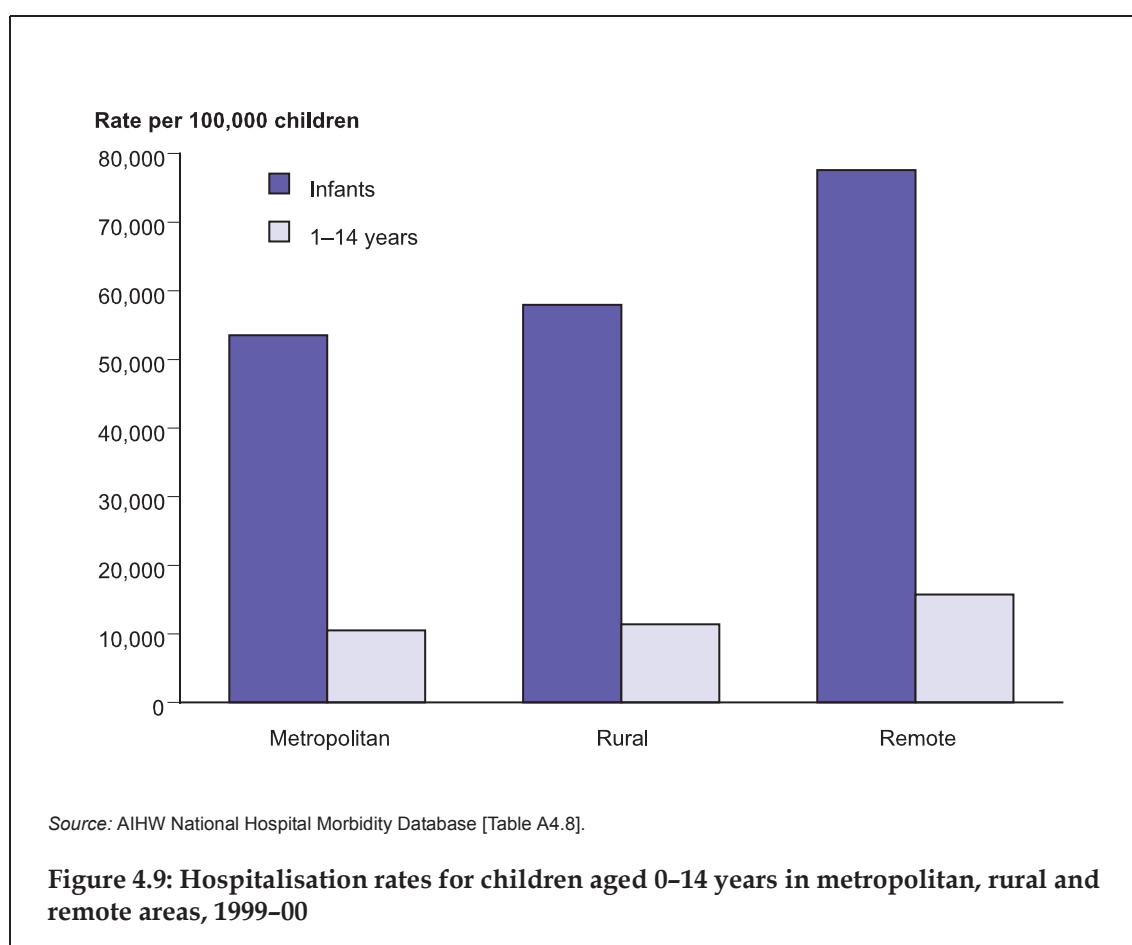
- In 1999–00, there was a total of 5,897,797 hospitalisations in Australia. Of these, 542,245 (9%) were for children aged 0–14 years, with 316,133 (58%) being for boys and 226,112 (42%) for girls. A high proportion of these hospitalisations (139,486 or 26%) was for infants.
- Rates were higher for boys than for girls in all age groups. The greatest difference was among children aged 1–4 years (boys being hospitalised at a rate 1.4 times that of girls), and the lowest among children aged 10–14 years (boys being hospitalised at a rate 1.2 that of girls).
- The highest rates were for infants, with rates being 1.3 times higher for male infants than female infants.
- Hospitalisation rates decreased with age. Infants were hospitalised at a rate 3 times that of children aged 1–4 years, 6 times that of children aged 5–9 years, and 7 times the rate of those aged 10–14 years.

Aboriginal and Torres Strait Islander children



- In 1999-00, there were 29,065 hospitalisations of Aboriginal and Torres Strait Islander children aged 0-14 years. Of these hospitalisations, 16,378 (56%) were of boys, and 12,687 (44%) were of girls – 32% of these hospitalisations were of infants.
- For children aged less than 1 and 1-14 years, and for both boys and girls, Aboriginal and Torres Strait Islander children were hospitalised at higher rates than other Australian children. However, the difference was greater among infants.
- Among male infants, Aboriginal and Torres Strait Islander infants were hospitalised at a rate 1.5 times that of other Australian infants (87,309.4 compared with 60,995.1 per 100,000 infants). Among female infants, the hospitalisation rate for Indigenous infants was 1.6 times that of other Australian female infants (71,866.6 compared with 45,665.9).
- Aboriginal and Torres Strait Islander boys were hospitalised at a rate 1.2 times that of other Australian boys (14,448.0 compared with 12,236.6). Indigenous girls were hospitalised at a rate 1.3 times that of other Australian girls (11,637.0 compared with 9,172.4).
- Hospitalisation rates for Aboriginal and Torres Strait Islander children are affected by the under-identification of Indigenous children in hospital data (AIHW 2001a). Therefore, true hospitalisation rates for Indigenous children are likely to be greater than those presented throughout this report.

Children in metropolitan, rural and remote areas



- In 1999-00, there were 94,329 hospitalisations of infants in metropolitan areas, 36,391 in rural areas and 7,620 in remote areas. Among children aged 1-14 years, there were 263,235 hospitalisations in metropolitan areas, 114,917 in rural areas and 21,744 in remote areas.
- For boys and girls in both age groups, hospitalisation rates were greatest in remote areas.
- The difference was not as great between children in rural and metropolitan areas as between these children and those in remote areas, although children in rural areas were hospitalised at a rate slightly higher than that of children in metropolitan areas.
- The higher hospitalisation rates for infants in remote areas probably reflect the high number of Aboriginal and Torres Strait Islander infants living in remote Australia, and their higher hospitalisation rates.

Reasons for hospitalisation of infants

A summary of reasons for hospitalisations of infants in 1999–00 is presented in Table 4.5. The data presented here are classified according to the chapters of the International Classification of Diseases, 10th Revision, Australian Modification (ICD-10-AM) and to specific diagnoses.

Table 4.5: Reasons for hospitalisations of infants, 1999–00

Diagnosis	Number			Rate per 100,000 infants		
	Males	Females	Persons	Males	Females	Persons
Conditions originating in the perinatal period	27,390	21,915	49,305	21,314.01	17,968.27	19,684.84
Respiratory system	12,856	8,535	21,391	10,004.12	6,997.91	8,540.28
Contact with health services	10,233	5,438	15,671	7,962.99	4,458.66	6,256.59
Other symptoms, signs and abnormal findings	5,536	4,730	10,266	4,307.94	3,878.16	4,098.66
Congenital abnormalities	5,424	3,418	8,842	4,220.78	2,802.44	3,530.14
Infectious and parasitic	4,579	3,751	8,330	3,563.23	3,075.47	3,325.72
Nervous system	3,537	2,721	6,258	2,752.38	2,230.97	2,498.48
Digestive system	3,808	1,888	5,696	2,963.26	1,547.99	2,274.11
Genitourinary system	1,868	1,010	2,878	1,453.62	828.11	1,149.03
Injury and poisoning	1,607	1,269	2,876	1,250.52	1,040.46	1,148.23
Ear diseases	1,093	659	1,752	850.54	540.32	699.48
Mental and behavioural disorders	798	664	1,462	620.98	544.42	583.70
Skin diseases	762	625	1,387	592.96	512.44	553.75
Neoplasms	433	463	896	336.95	379.62	357.72
Eye diseases	381	339	720	296.48	277.95	287.46
Endocrine, nutritional and metabolic diseases	373	331	704	290.26	271.39	281.07
Circulatory system	225	158	383	175.09	129.55	152.91
Blood and blood-forming organs	224	139	363	174.31	113.97	144.93
Musculoskeletal system	134	116	250	104.27	95.11	99.81
Total	81,262	58,169	139,431	63,235.5	47,693.2	55,667.3

Notes

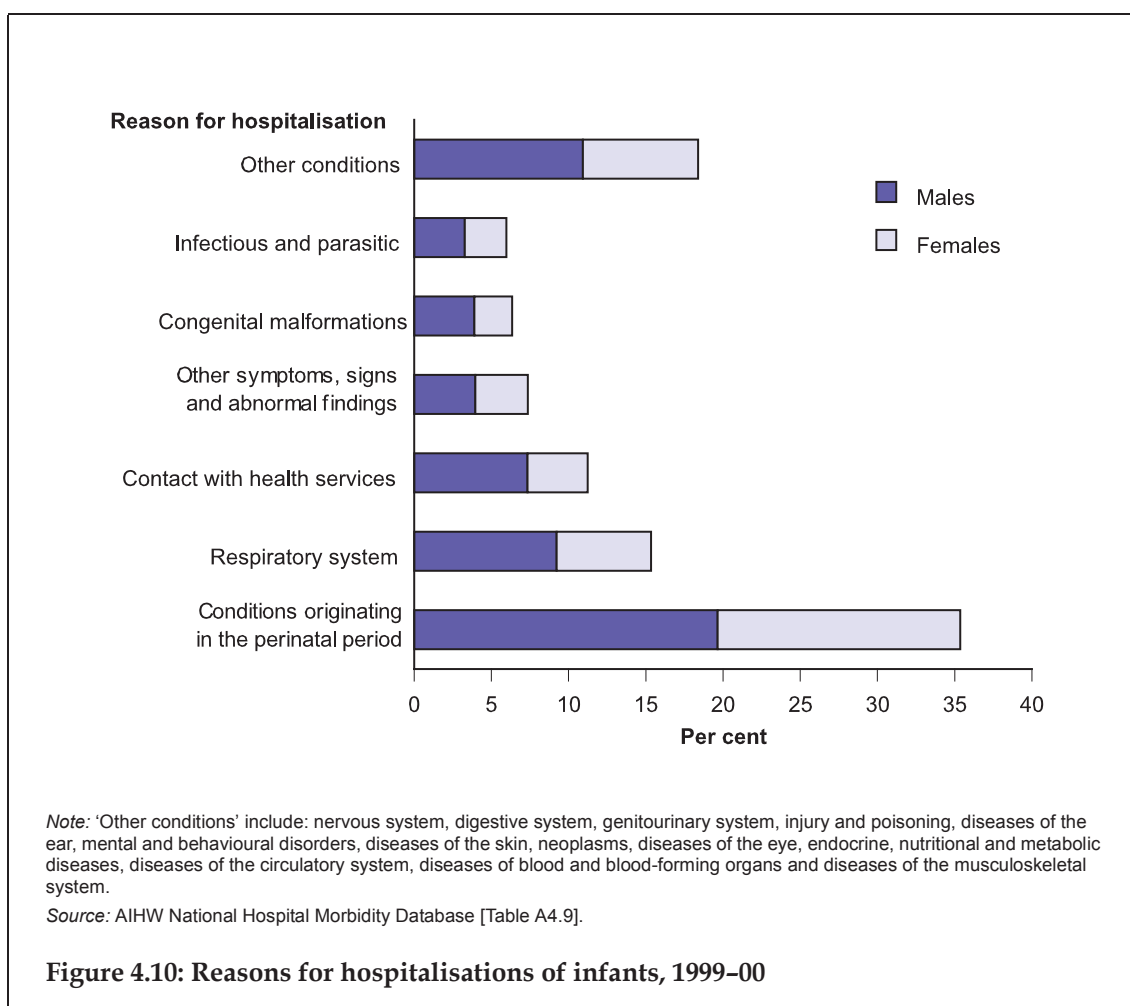
1. ICD-10-AM codes P00–P99, J00–J99, Z00–Z99, R00–R99, Q00–Q99, A00–B99, G00–G99, K00–K93, N00–N99, S00–T98, H60–H95, F00–F99, L00–L99, C00–D48, H00–H59, E00–E90, I00–I99, D50–D89 and M00–M99.

2. This total excludes 82 infants for whom there was no principal diagnosis, sex or external cause of injury recorded.

Source: AIHW National Hospital Morbidity Database.

- In 1999–00, conditions originating in the perinatal period were responsible for a high rate of hospitalisations of both male and female infants.
- Diseases of the respiratory system, which include asthma and respiratory diseases caused by infectious agents, were also responsible for a high level of infant hospitalisations.

Hospitalisation of infants by diagnosis according to the ICD-10-AM chapters as a proportion of all hospitalisations of infants is presented in Figure 4.10.



- Conditions originating in the perinatal period were the most common reason for the hospitalisation of infants in 1999-00 (19,684.8 hospitalisations per 100,000 infants). These conditions accounted for 35% of all hospitalisations of infants.
- Hospitalisations for respiratory diseases, which include asthma and respiratory diseases caused by infectious agents, accounted for 15%.
- Hospitalisations for congenital malformations and for infectious and parasitic diseases each accounted for 6%.

Aboriginal and Torres Strait Islander infants

Hospitalisation rates for Aboriginal and Torres Strait Islander infants are presented by diagnosis according to ICD-10-AM chapter (Table 4.6).

Table 4.6: Reasons for hospitalisations of Aboriginal and Torres Strait Islander and other Australian infants, 1999–00

Diagnosis	Number		Rate per 100,000 infants		Rate ratio
	Indigenous Australians	Other Australians	Indigenous Australians	Other Australians	
Conditions originating in the perinatal period	2,221	46,058	19,294.6	19,274.3	1.0
Respiratory system	3,032	18,083	26,340.0	7,567.3	3.5
Contact with health services	609	14,837	5,290.6	6,209.0	0.9
Other symptoms, signs and abnormal findings	514	9,623	4,465.3	4,027.0	1.1
Congenital malformations	304	8,374	2,641.0	3,504.3	0.8
Infectious and parasitic	1,223	7,017	10,624.6	2,936.5	3.6
Nervous system	86	6,137	747.1	2,568.2	0.3
Digestive system	199	5,384	1,728.8	2,253.1	0.8
Genitourinary system	139	2,703	1,207.5	1,131.1	1.1
Injury and poisoning	225	2,597	1,954.7	1,086.8	1.8
Ear diseases	141	1,552	1,224.9	649.5	1.9
Mental and behavioural disorders	11	1,447	95.6	605.5	0.2
Skin diseases	240	1,131	2,085.0	473.3	4.4
Neoplasms	33	837	286.7	350.3	0.8
Eye diseases	21	676	182.4	282.9	0.6
Endocrine, nutritional and metabolic	111	580	964.3	242.7	4.0
Circulatory system	25	346	217.2	144.8	1.5
Blood and blood-forming organs	24	316	208.5	132.2	1.6
Musculoskeletal system	26	220	225.9	92.1	2.5
Total	9,184	127,918	79,784.6	53,530.9	1.5

Note: This total excludes 2,410 infants for whom there was no principal diagnosis, sex, external cause of injury or Indigenous status recorded.

Source: AIHW National Hospital Morbidity Database.

- Rate ratios (Table 4.6) provide a means for comparing the hospitalisation rates of Aboriginal and Torres Strait Islander and other Australian infants.
- In 1999–00, Aboriginal and Torres Strait Islander infants were hospitalised most often for respiratory conditions, at a rate 3.5 times that of other Australian infants.
- Other conditions for which Indigenous infants were hospitalised at a higher rate than other Australian infants include skin diseases, endocrine, nutritional and metabolic diseases, infectious and parasitic diseases and diseases of the musculoskeletal system.