

**Health system costs of
injury, poisoning and
musculoskeletal
disorders in Australia
1993–94**

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Health system costs of injury, poisoning and musculoskeletal disorders in Australia 1993–94

Colin Mathers and Ruth Penm

Australian Institute of Health and Welfare
Canberra

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Preface

The Australian Institute of Health and Welfare has estimated the direct costs of health services in 1993–94 attributable to a comprehensive range of diseases and injury. The Institute's Disease Costs and Impact Study has revised and extended the methodology used to carry out these costings, to include health sectors accounting for over 90% of recurrent health expenditure. Disease costing reports published in 1998 by the Institute include:

- *Health System Costs of Diseases and Injury in Australia 1993–94*;
- *Disease Costing Methodology used in the Disease Costs and Impact Study 1993–94*;
- *Health System Costs of Cancer in Australia 1993–94* (in collaboration with the National Cancer Control Initiative); and
- *Health System Costs of Cardiovascular Diseases and Diabetes in Australia 1993–94*.

It is intended to publish one further report on the costs associated with mental health problems in 1993–94. Detailed estimates for other disease groups will not be published until the cost estimates are updated to a more recent year, using more up-to-date health service utilisation data now becoming available through a national, continuous survey of general practitioners (the BEACH survey) being conducted by the University of Sydney's Family Medicine Research Unit in collaboration with the Institute.

The health system costs of disease presented in this report are an example of a satellite national account. Satellite national accounts enable the linkage of non-monetary data sources and analysis to the monetary national accounting system. In order to link together expenditure, workforce, disease and other data in a useful way the definitions used in each of these areas need to be clearly spelt out. The Institute is currently undertaking a Satellite Accounts project which involves developing a conceptual framework and documenting and refining the definitions and methodologies used in the health and welfare services expenditure area.

This information will be brought together in a publication, *Health and Welfare Services Satellite Accounts: Concepts, Sources and Methods*, to provide an integrating framework for the Institute's health and welfare services expenditure collections, and a useful framework for all Institute collections—including the disease costing work reported here.

Richard Madden
Director
Australian Institute of Health and Welfare

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We thank James Harrison for comments on drafts of this report. Australian Institute of Health and Welfare staff provided valuable advice on sources of data and analysis of datasets, particularly John Goss, Mark Cooper-Stanbury, Deborah Schofield and Tony Hynes. We also thank Ross Saunders, head of the Medicare Statistics section of the then Commonwealth Department of Health and Family Services for provision of summary data on medical services for 1993–94.

We would also like to gratefully acknowledge the assistance of the Family Medicine Research Unit of the University of Sydney, for provision of a copy of all data contained in the Australian Morbidity and Treatment Survey and for helpful advice.

Summary

Injury is the principal cause of death in people under 45 years of age, a leading cause of mortality, morbidity and permanent disability in Australia, as well as a major source of health costs. The direct health system costs of injury and poisoning amounted to \$2,601 million in 1993–94, or 8.3% of total recurrent health expenditure.

Musculoskeletal disorders are not a major cause of death, but cause considerable morbidity and disability. Chronic musculoskeletal disorders are reported by 29% of Australians aged 15 years and over, and 56% of Australians aged 60 years and over. Musculoskeletal disorders were responsible for \$3,002 million in health expenditure in 1993–94, higher than that for injury and poisoning, and only 20% lower than total health expenditure for cardiovascular diseases or for diseases of the digestive system. This report provides a systematic analysis of total health system costs of injuries, poisoning and musculoskeletal disorders in Australia in 1993–94.

The five external causes of injury that accounted for the most health expenditure in 1993–94, in descending order, are:

- accidental falls \$806 million (31% of total injury costs)
- adverse effects of medical treatment \$401 million (16%)
- road traffic accidents \$370 million (14%)
- homicide and violence \$124 million (5%)
- suicide and self-inflicted injury \$72 million (3%)

Adverse effects of medical treatment include medical and surgical misadventure and adverse reactions to drugs in therapeutic use as defined by the International Classification of Diseases and as recorded in health system data collections.

Annual health system costs for injury are around \$100 to \$150 million for each 10 year age–sex group in adults, with the exception of men aged 15–34 where health system costs are two to three times higher, and women aged 75 years and over, where the \$300 million expenditure is mainly due to accidental falls. Together, accidental falls and adverse effects of medical treatment account for 90% of all injury costs for people aged 65 years and over.

Injury costs for males are around 20% higher than those for females on average, a much lower sex ratio than for deaths, where there are around 2.4 male deaths for every female death due to injury. The male to female cost ratio is highest for machine injuries, non-road transport accidents and homicide and violence, and is lowest for accidental falls, where costs for females are 40% higher than those for males.

Total health system costs of musculoskeletal disorders were \$3,002 million in 1993–94. The five musculoskeletal disorders that accounted for the most health expenditure, in descending order, are:

- back problems \$700 million (23% of total musculoskeletal costs)
- osteoarthritis \$624 million (21%)
- muscle, tendon, soft tissue problems \$519 million (17%)
- joint derangement and disorders \$430 million (14%)
- neck problems \$160 million (5%)

Total expenditure for musculoskeletal disorders rises during childhood and plateaus around \$200 million dollars for each 10-year age group between ages 30 and 70. Health system costs rise steeply for older women to a total of \$594 million for women aged 75 years and over, of which nearly 60% is due to nursing home costs. Per capita expenditure rises steadily with age to ages 65–74 years and then jumps substantially to around \$600 and \$1,000 per capita for men and women aged 75 years and over respectively. Costs of musculoskeletal disorders for females are around 38% higher than those for males, largely because of the high costs for older women.

1 Introduction

1.1 Background and overview

This report on the health system costs of injury and musculoskeletal disorders is one of a series of reports on health system costs associated with specific diseases in Australia in 1993–94. Previous reports in this series have addressed all diseases and injury at the level of broad disease groups (Mathers et al. 1998a), specific cancers (Mathers et al. 1998b), and cardiovascular diseases and diabetes (Mathers & Penm 1998). A report on health system costs associated with mental health problems is forthcoming. Together, these reports provide detailed information on the health system resources used in Australia for the treatment and prevention of diseases and injury in each of the five National Health Priority Areas—cancer control, injury prevention and control, cardiovascular health, diabetes mellitus and mental health.

The total health system costs of disease and injury in Australia in 1993–94, summarised at the broad disease group level according to chapters of the International Classification of Diseases Version 9 (ICD-9), are shown in Figure 1, ranked in descending order of total costs.

Cardiovascular diseases and digestive system diseases are the two most expensive groups, the latter in part because of the large expenditure on dental services. Following these two groups are musculoskeletal disorders, with an estimated total expenditure of \$3,002 million in 1993–94, and then injury and poisoning, with an estimated total expenditure of \$2,601 million. Injury and poisoning and musculoskeletal disorders combined accounted for 18% of total

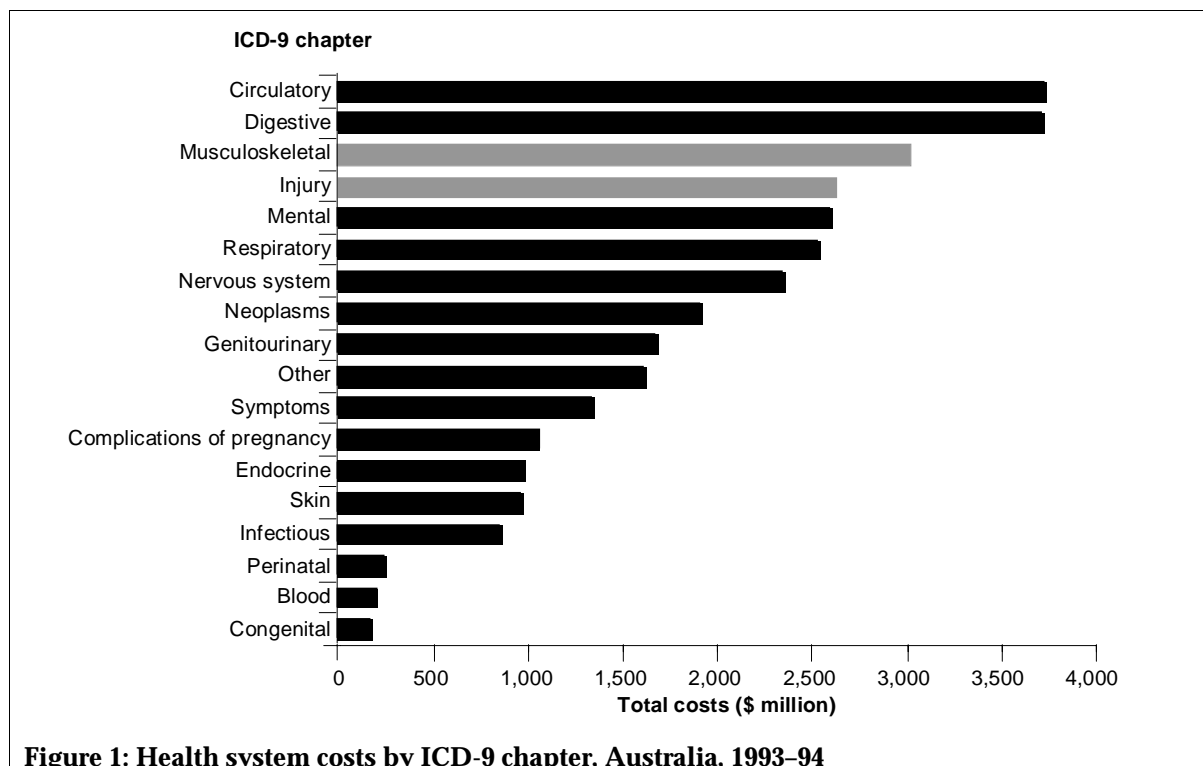


Figure 1: Health system costs by ICD-9 chapter, Australia, 1993–94

recurrent health expenditure in 1993–94. Disease costs at chapter level of ICD-9 have been examined in detail in a previous report (Mathers et al. 1998a).

Injury is the principal cause of death in people under 45 years of age, a leading cause of mortality, morbidity and permanent disability in Australia, as well as a major source of health costs. Injury and poisoning resulted in more than 7,000 deaths in 1994 (see Table 1) and accounted for 22.5% of all potential years of life lost (PYLL) before age 75. A recent report on injury prevention and control provides a profile of injury in Australia and an overview of prevention and control activities (DHFS & AIHW 1998).

Musculoskeletal disorders are not a significant cause of mortality, being responsible for less than 1,000 deaths per year in Australia. However, they are a leading cause of morbidity and short-term and long-term disability. Among people reporting disability in the 1993 Australian

Table 1: Diseases and injury by ICD-9 chapter: health system costs by health sector, 1993–94 (\$ million) and number of deaths, 1994

ICD-9 chapter	Total costs	Hospitals ^(a)	Medical ^(b)	Pharmaceuticals	Dental & allied health	Nursing home	Other ^(c)	No. of deaths 1994
Circulatory	3,719	1,657	503	715	40	587	218	54,888
Digestive ^(d)	3,715	1,070	284	275	1,849	35	202	3,859
Musculoskeletal	3,002	1,207	518	276	416	430	154	775
Injury	2,601	1,663	393	127	160	112	146	7,189
Mental	2,586	1,007	432	198	83	718	147	2,985
Respiratory	2,521	833	624	784	37	107	135	9,958
Nervous system	2,334	766	431	248	227	503	159	2,944
Cancer	1,904	1,327	261	53	12	32	219	34,206
Genitourinary	1,662	997	383	143	17	32	90	2,110
Symptoms	1,334	478	426	302	57	5	66	547
Complications of pregnancy	1,051	941	32	11	6	0	60	16
Endocrine	966	235	222	309	54	47	98	4,112
Skin	956	336	247	259	56	6	53	211
Infectious	849	246	316	193	15	13	65	1,042
Perinatal	239	221	1	0	0	3	14	695
Blood	192	101	42	24	1	5	18	401
Congenital	159	116	18	2	0	13	8	754
Other ^(e)	1,607	859	505	122	44	0	77	—
Total	31,397	14,062	5,640	4,042	3,075	2,647	1,932	126,692

(a) Public and private acute hospitals, repatriation hospitals and psychiatric hospitals. Includes public hospital non-inpatient services.

(b) Medical services for private patients in hospitals are included under 'Hospitals'.

(c) Includes breast, cervix, lung and skin cancer public health programs, research and other institutional, non-institutional and administration expenditure. Does not include other public health services, community health services, ambulances, or medical aids and appliances.

(d) Dental costs are classified to diseases of the digestive system and included under the allied health services sector.

(e) Other contact with health services: fertility control, reproduction and development, cosmetic surgery, general health examination, and treatment for unspecified disease.

Bureau of Statistics (ABS) Survey of Disability, Ageing and Carers, around 27% reported a musculoskeletal disorder as the main disabling condition (ABS 1993). In the 1995 ABS National Health Survey, chronic musculoskeletal conditions were reported by 29% of Australians aged 15 years and over, and 56% of Australians aged 60 years and over. An additional 7% of Australians aged 15 years and over reported recent musculoskeletal conditions that were not chronic.

Injury is a major factor in the aetiology of certain musculoskeletal conditions, particularly joint disruptions and osteoarthritis and perhaps back problems (although this connection may be more complex), and to some extent, some of the costs attributable to musculoskeletal conditions are late effects of injury. In addition, there is a somewhat arbitrary boundary between acute musculoskeletal damage (injury) and chronic musculoskeletal damage resulting from long-term microtrauma or old injury. Costs associated with the latter are generally classified to musculoskeletal disorders (refer, for example, to the Glossary entry for 'internal derangement of knee').

It is not possible to quantify the proportion of musculoskeletal disorder costs that are attributable to injury as an underlying cause and this is not attempted in this report. One indication of the importance of injury in causing musculoskeletal problems is given by the 1993 Survey of Disability, Ageing and Carers carried out by the Australian Bureau of Statistics. Analysis of unit record data from this survey (Mathers 1998) indicates that injury was stated to be the underlying cause by 27% of people whose main disabling condition was musculoskeletal. This is a much higher proportion than for all disabling conditions (17%).

This report provides estimates of health system costs and use for specific injuries, by type and external cause and for specific musculoskeletal disorders and examines the pattern of health expenditure on injuries and musculoskeletal disorders by age, sex and health system sector. The estimates in this report are derived using a methodology that ensures that they add across disease, age and sex groups to the total Australian health expenditure by health sector for 1993–94 as published by the Australian Institute of Health and Welfare (1996). Such estimates are not elsewhere available in a consistent format for disease groups, and provide a useful perspective on the utilisation and costs of health services in Australia, as well as a reference source for planners and researchers interested in the costs and utilisation patterns for a particular disease group.

There have been a number of previous studies of the costs for specific types of injury or external causes of injury (e.g. Walsh 1988) and at least one previous study that has estimated direct treatment costs for all injury (Watson & Ozanne-Smith 1995). This study used a bottom-up approach to estimate that treatment costs for unintentional injury (excluding adverse effects of medical treatment) were \$1.8 billion for Australia in 1992–93. This is quite similar to the \$2.0 billion estimated by this report for 1993–94. More recently, Watson and Ozanne-Smith (1997) have estimated direct and indirect costs for injury in Victoria in 1993–94 and used incidence data to make estimates of the lifetime costs of injury. We are not aware of previous studies of the direct costs of musculoskeletal disorders in Australia.

1.2 Uses of disease cost estimates

Cost of illness analysis often attempts to measure the total economic cost to society of illness by including not only the direct health sector costs but also indirect costs, which usually focus on lost production due to sickness and premature death, but can include as well costs impacting outside the health care sector. However, methodologies for measuring indirect costs are either contentious and/or at an early stage of development (Mathers et al. 1998c). The Institute has thus decided to focus on the analysis of direct health system costs in the Disease Costs and Impact project and to use, where appropriate, more direct measures of disease impact in health status terms, rather than dollar estimates of indirect costs.

Some important points should be kept in mind in interpreting the direct cost estimates presented in this report:

- Existing expenditure on a disease or injury does not, in itself, give an indication of the loss of health due to that disease or injury, or the priority for intervention or need for additional health services expenditure.
- Care should be taken in interpreting direct costs associated with disease treatment as an estimate of the savings that would result from prevention of disease. The conversion of the opportunity cost of resources being devoted to disease treatment, or benefits forgone, into expenditure savings involves a number of additional considerations (see Mathers et al. 1998c).
- Although the expenditure estimates reported here provide a broad picture of the health system resources usage classified by age, sex and disease group, they should be interpreted with caution for specific diseases because the methodology is a comprehensive satellite national accounts approach, which, while yielding consistency, good coverage and totals that add up to known expenditures, is not as sensitive or accurate for any specific disease as a detailed analysis of actual costs incurred by patients with that disease.
- Health service utilisation data, such as hospital separations, should not be interpreted as measures of number of incident injury events. To a differing extent for different types and causes of injury, a single injury event may be associated with more than one hospital episode or other health service contact.
- Some injuries may result in chronic musculoskeletal problems, and much of the costs associated with the latter will be included in the estimates for musculoskeletal disorders rather than injuries.

1.3 Methodology

This section provides an overview of the methodology, which is summarised in Appendix B and described in detail in Mathers et al. (1998c). Injuries, poisoning and musculoskeletal disorders have been classified according to the International Classification of Diseases—Ninth Revision (ICD-9) as shown in Appendix A.

Data sources

Total recurrent health expenditures for 1993–94, as estimated by the Australian Institute of Health and Welfare (AIHW 1996), are apportioned by sector using hospital morbidity and case mix data for 1993–94, Medicare and Pharmaceutical Benefits Scheme data for 1993–94, the Survey of Morbidity and Treatment in General Practice 1990–91, and the Australian Bureau of Statistics National Health Survey 1989–90.

Health sectors

The following sectors of expenditure are included in the disease cost estimates:

Hospital inpatients: inpatient (admitted patient) costs for public hospitals (including public psychiatric hospitals), repatriation (veterans') hospitals and private hospitals. Also included are private medical costs for private patients in public and private hospitals.

Hospital non-inpatients: hospital outpatient services and casualty/accident and emergency services.

Medical services: total costs of all private medical services except those to hospital inpatients (medical services for private patients in hospital are included under hospital inpatients). This sector includes consultations with general practitioners and specialists as well as pathology tests and screening and diagnostic imaging services. Pathology tests and imaging services are included with specialist medical services.

Pharmaceuticals: includes costs of prescription drugs (whether listed in the Pharmaceutical Benefits Scheme or not) and non-prescription (over the counter) medicines apart from those dispensed in hospitals (included in estimates of hospital costs).

Nursing homes: includes nursing homes for the aged but not residential homes for the young disabled (considered a welfare rather than health expenditure).

Dental and allied health services: includes costs of visits to allied health practitioners excluding pharmacists but including dentists, apart from allied health services provided by hospitals.

Other: includes expenditure for certain cancer prevention programs (national screening programs for breast and cervix cancer, and lung and skin cancer prevention programs), for health and medical research, and for administration and other institutional and non-institutional health expenditure (see Appendix B for more details of these sectors).

Total recurrent health expenditure in 1993–94 was \$34,141 million (AIHW 1996). The sectors listed above accounted for 92% of total recurrent health expenditure, or \$31,397 million. Recurrent expenditure on health care which has not yet been attributed to diseases (\$2,744 million) includes community health services, public health programs (apart from three cancer public health programs), ambulance services, and medical aids and appliances. Capital expenditure (\$1,833 million) is also excluded from the costings presented here.

Disease impact

This report also contains data for injuries on the number of deaths and potential years of life lost to age 75 in 1994. Deaths data are derived from the AIHW Mortality Database and classified using the underlying cause of death as coded by the Australian Bureau of Statistics from information provided on death certificates (and in some cases coronial findings). Potential years of life lost to age 75 are calculated by subtracting age at death from 75, for deaths at ages less than 75 years.

Estimates of the prevalence of total and treated musculoskeletal disorders are derived from the 1995 National Health Survey, based on self-report data on musculoskeletal disorders reported as either long-term conditions or recent conditions experienced in the last two weeks.

1.4 Limitations

It must be emphasised that the disease cost estimates reported here are based on attribution of total health expenditures based on available information on the mix of diseases treated and the costs of treatment. For medical and allied health services, and to some extent for drugs, utilisation data relate to 1989–90 or 1990–91 and so costs reported for these sectors will not reflect changes in clinical practice or disease patterns between then and 1993–94. Also, costs of specialist medical services are estimated using 1990–91 data on referral patterns by GPs and costed at the average cost within specialist type. For example, this means that all pathology tests are assumed to have the same average cost.

The injury classification used in the utilisation data for medical services relates to type of injury rather than external cause. Injury types have been mapped to external causes as described in Appendix A. This involved a number of assumptions and, for some types of injury, an assumption that the external cause distribution for these injuries as seen in general practice is similar to the external cause distribution for these injury types in hospital inpatients. As discussed in Appendix A, the available information suggests that this is a reasonable assumption.

2 Health system costs of injury and poisoning

Injuries and poisoning may be classified in terms of the type of injury (such as fracture of leg, laceration of skin) or in terms of the external cause of the injury (such as motor vehicle accident, assault). Health system costs of injuries and poisoning are estimated in Section 3.1 for various types of injury and then in the following sections according to the external causes of injury. The classification of injuries by type and by external cause is described in Appendix A. As noted in Section 1.1, some of the health system costs of injury will also manifest as musculoskeletal condition diagnoses and be included in the cost estimates for musculoskeletal disorders given in Chapter 3.

2.1 Injury costs by type of injury

Figure 2 shows the estimated health system costs associated with specific types of injury in 1993–94. Fractures account for an estimated \$713 million (or 27% of total injury costs), followed by dislocations, sprains and strains (\$495 million) and traumatic complications, late effects of injury and unspecified injuries (\$320 million). Table 2 summarises estimated costs for the various types of injury by health sector.

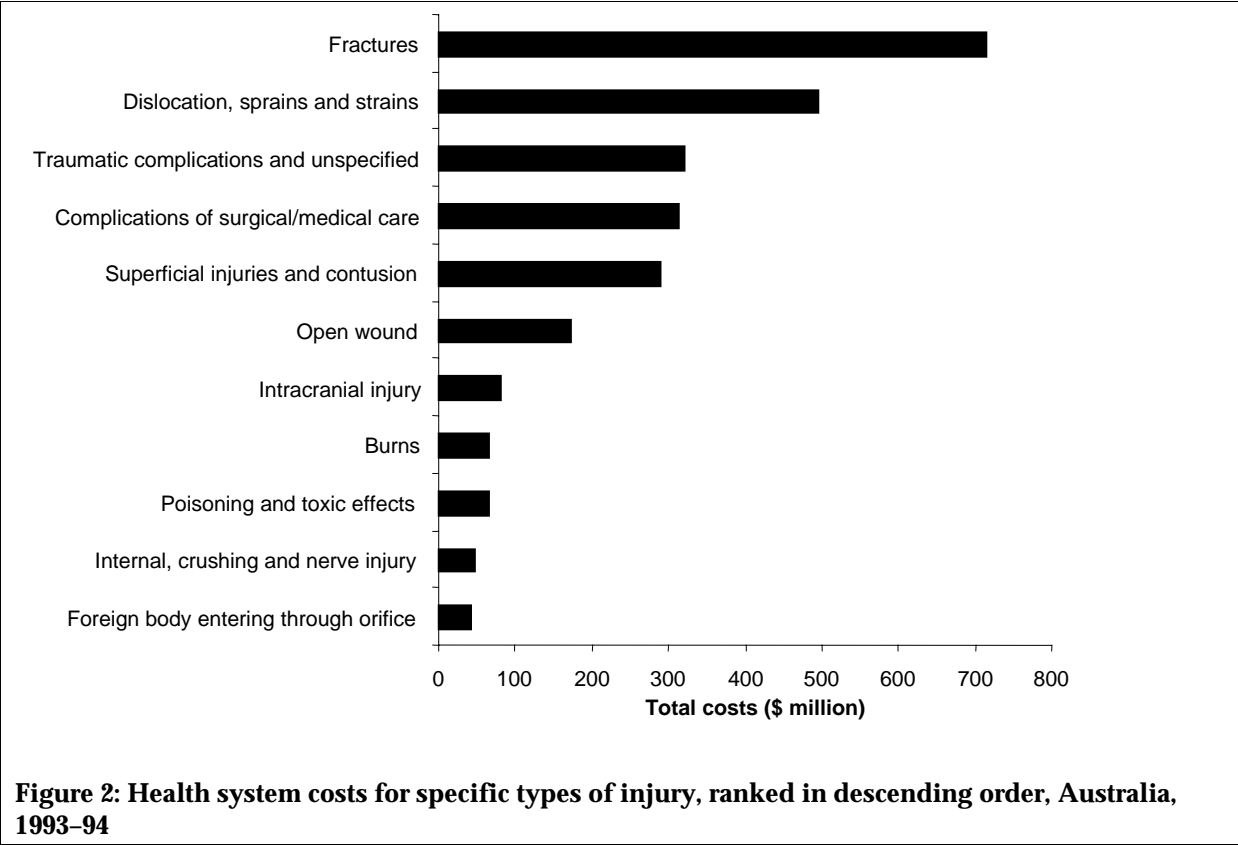


Table 2: Injury and poisoning: health system costs by type of injury and health sector, 1993–94 (\$ million)

ICD-9 chapter	Total costs	Hospitals ^(a)	Medical	Pharmaceuticals	Allied health	Nursing homes	Other ^(b)
Fractures	713.0	510.6	68.6	9.6	9.7	69.2	45.2
Dislocation, sprains and strains	495.4	235.7	112.6	29.9	91.8	1.7	23.7
Intracranial injury, excl. skull fracture	80.9	63.1	6.3	1.0	0.6	2.6	7.3
Internal injuries ^(c)	47.3	39.2	2.1	0.4	0.3	1.1	4.1
Open wound	171.2	119.7	20.1	9.4	2.7	5.4	14.0
Superficial injuries and contusion	289.2	154.8	74.0	21.1	21.3	4.3	13.8
Foreign body entering via orifice	42.3	25.3	10.9	3.5	—	0.5	2.0
Burns	65.6	50.8	7.8	3.0	—	0.7	3.2
Poisoning and toxic effects of substances	64.0	52.0	2.9	1.4	0.1	4.2	3.3
Complications of surgical and medical care	312.5	250.6	19.1	9.2	4.6	14.6	14.5
Traumatic complications, late effects	320.0	161.2	68.3	38.6	28.5	8.1	15.2
Total injury and poisoning	2,601.3	1,663.0	392.6	127.3	159.7	112.4	146.3

(a) Includes public hospital non-inpatient services and medical services for private patients in hospitals.

(b) Includes research and other institutional, non-institutional and administration expenditure. Does not include public health services, community health services, ambulances, or medical aids and appliances.

(c) Internal injury of chest, abdomen, pelvis and blood vessels, crushing injuries, and nerve injuries (including spinal cord).

Table 3: Injury and poisoning: estimated health services utilisation by type of injury and health sector, 1993–94

	Hospitals			Medical services			Drugs
	Admissions ('000)	ALOS ^(a) (days)	Non-inpatient services ('000)	GP ('000)	Specialist ('000)	Total ('000)	Prescriptions ('000)
Fractures	120	7.2	1,366	915	607	1,522	353
Dislocation, sprains and strains	27	2.8	2,677	2,309	890	3,199	1,372
Intracranial injury, excluding skull fracture	25	2.9	160	126	37	163	21
Internal injuries ^(b)	9	19.5	47	40	23	63	19
Open wound	48	2.8	561	548	68	616	384
Superficial injuries and contusion	6	1.6	289	251	58	309	222
Foreign body entering via orifice	15	3.4	2,022	1,690	544	2,234	885
Burns	7	7.7	257	268	32	300	160
Poisoning and toxic effects of substances	32	2.6	92	63	51	115	46
Complications of surgical and medical care	58	7.5	51	401	203	604	382
Traumatic complications, late effects	21	4.9	1,828	1,636	598	2,234	1,628
Total injury and poisoning	368	5.2	9,351	8,247	3,110	11,358	5,473

(a) Average length of stay.

(b) Internal injury of chest, abdomen, pelvis and blood vessels, crushing injuries, and nerve injuries (including spinal cord).

Table 3 summarises estimated utilisation of hospitals, doctors and drugs for the various types of injury. In total they accounted for an estimated 368,000 hospital admissions, 11.4 million medical services and 5.5 million prescriptions in 1993–94. Fractures were the leading injury cause of hospital admissions, whereas dislocations, sprains and strains were the leading injury cause of non-inpatient visits and medical consultations. More detailed estimates of expenditure for the major injury groups shown in Table 1 are given in Tables C.2 and C.3 (Appendix C), disaggregated by health sector.

2.2 Injury costs by external cause

Figure 3 shows the estimated health system costs associated with specific external causes of injury in 1993–94. Accidental falls account for an estimated \$806 million (or 31% of total injury costs), followed by adverse effects of medical treatment (\$401 million). The latter category includes surgical and medical misadventure, as well as adverse effects of drugs in therapeutic use, as reported in the health system data used in costing injuries (see Appendix A). Road traffic accidents are the third leading cause of injury costs, accounting for \$370 million or 14% of total injury costs. Table 4 summarises estimated costs for external causes of injury by health sector. More detailed estimates of expenditure for the major external causes are given in Appendix C, disaggregated by health sector, age and sex.

Table 5 summarises estimated utilisation of hospitals, doctors and drugs for external causes of injury. Accidental falls is the leading injury contributor to hospital admissions, medical services and pharmaceutical prescriptions.

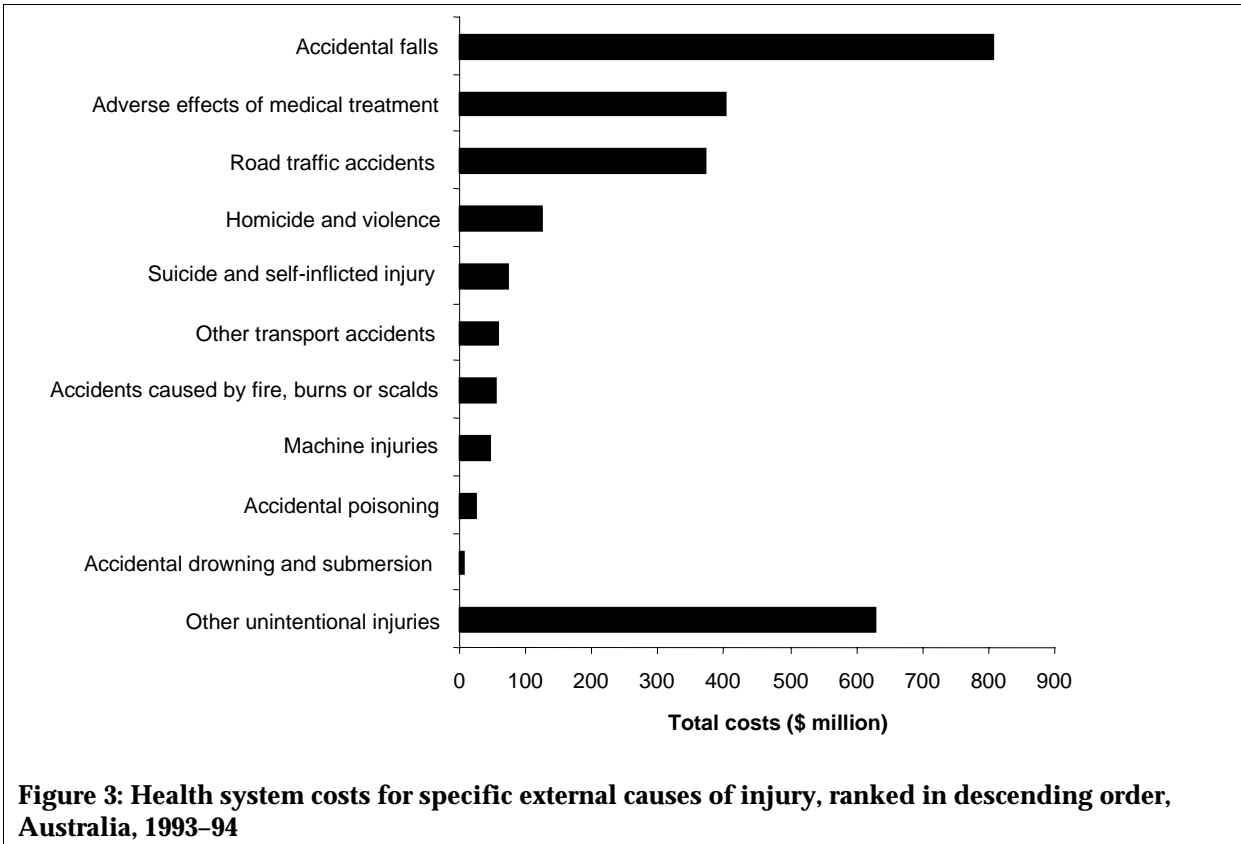


Figure 3: Health system costs for specific external causes of injury, ranked in descending order, Australia, 1993–94

Table 4: External causes of injury: health system costs by health sector, 1993–94 (\$ million)

ICD-9 chapter	Total costs	Hospitals ^(a)	Medical	Pharmaceuticals	Allied health	Nursing homes	Other ^(b)
Unintentional injuries							
Road traffic accidents	370	231	56	16	27	4	37
Other transport accidents	58	37	10	3	4	0	3
Poisoning	26	20	1	1	0	2	1
Accidental falls	806	498	112	32	48	76	39
Fire, burns or scalds	55	41	8	3	0	1	3
Accidental drowning	6	3	1	0	0	0	1
Machine injuries	44	27	8	2	4	0	3
Adverse effects of medical treatment ^(c)	401	298	38	23	7	17	18
Other unintentional injuries	627	379	124	36	52	5	30
Intentional injuries							
Suicide and self-inflicted injury	72	48	11	4	5	2	4
Homicide and violence	124	72	24	7	12	1	7
Unspecified injuries							
	13	9	0	0	0	4	1
Total injury and poisoning	2,601	1,663	393	127	160	112	146

(a) Includes public hospital non-inpatient services and medical services for private patients in hospitals.

(b) Includes research expenditure and other institutional, non-institutional and administration expenditure. Does not include public health services, community health services, ambulances, or medical aids and appliances.

(c) Includes surgical and medical misadventure, and adverse effects of drugs in therapeutic use.

Table 5: External causes of injury: estimated health services utilisation by sector, 1993–94

	Hospitals			Medical services			Drugs
	Admissions ('000)	ALOS (days)	Non-inpatient services ('000)	GP ('000)	Specialist ('000)	Total ('000)	Prescriptions ('000)
Unintentional injuries							
Road traffic accidents	41	5.7	1,374	1,143	419	1,562	679
Other transport accidents	8	4.6	258	198	73	272	110
Poisoning	14	2.2	38	26	20	46	17
Accidental falls	99	7.2	2,660	2,268	885	3,153	1,376
Fire, burns or scalds	5	7.8	257	268	32	300	160
Accidental drowning	1	2.3	25	19	7	26	9
Machine injuries	6	3.2	182	157	57	214	102
Adverse effects of medical treatment ^(a)	62	7.5	603	876	437	1,313	960
Other unintentional injuries	93	2.7	3,099	2,562	904	3,466	1,604
Intentional injuries							
Suicide and self-inflicted injury	17	3.3	252	223	97	321	145
Homicide and violence	19	2.8	603	506	179	685	310
Unspecified injuries							
	3	14.0	0	0	0	0	0
Total injury and poisoning	368	5.2	9,351	8,247	3,110	11,358	5,473

(a) Includes surgical and medical misadventure, and adverse effects of drugs in therapeutic use.

Hospital and nursing home expenditure accounts for 73% of total health system expenditure on injury, significantly higher than their share (58%) of health system expenditure for all diseases and injury.

Table 6 shows the estimated health care costs for external causes of injury by sex in 1993–94, ranked in descending order of the male/female cost ratio. The overall male/female sex ratio of health care costs is 1.20, but the pattern of injury costs is quite different for the two sexes. Costs for females are higher than those for males for falls, predominantly in older females, adverse effects of medical treatment, again predominantly in older females, and suicide and self-inflicted injury.

Male costs substantially exceed those of females for machine injuries (with a sex ratio of 9.3) and for homicide and violence (2.2), and are around 50% higher than those of females for other major external causes of injury.

Table 6: Health care costs of injuries by external cause and sex, Australia, 1993–94 (\$ million)

External cause	Males	Females	Male/female ratio
Machine injuries	40	4	9.27
Other transport accidents	41	16	2.52
Homicide and violence	89	40	2.20
Other unintentional injuries	421	214	1.97
Accidental drowning	3	2	1.56
Fire, burns or scalds	33	23	1.44
Road traffic accidents	218	152	1.43
Poisoning	13	13	1.04
Adverse effects of medical treatment	194	207	0.93
Suicide and self-inflicted injury	35	38	0.92
Accidental falls	334	471	0.71
Total injury and poisoning	1,420	1,181	1.20

2.3 Injury costs and impact

Table 7 shows male and female health system costs by external cause in 1993–94, together with numbers of deaths and years of life lost to age 75 in 1994.

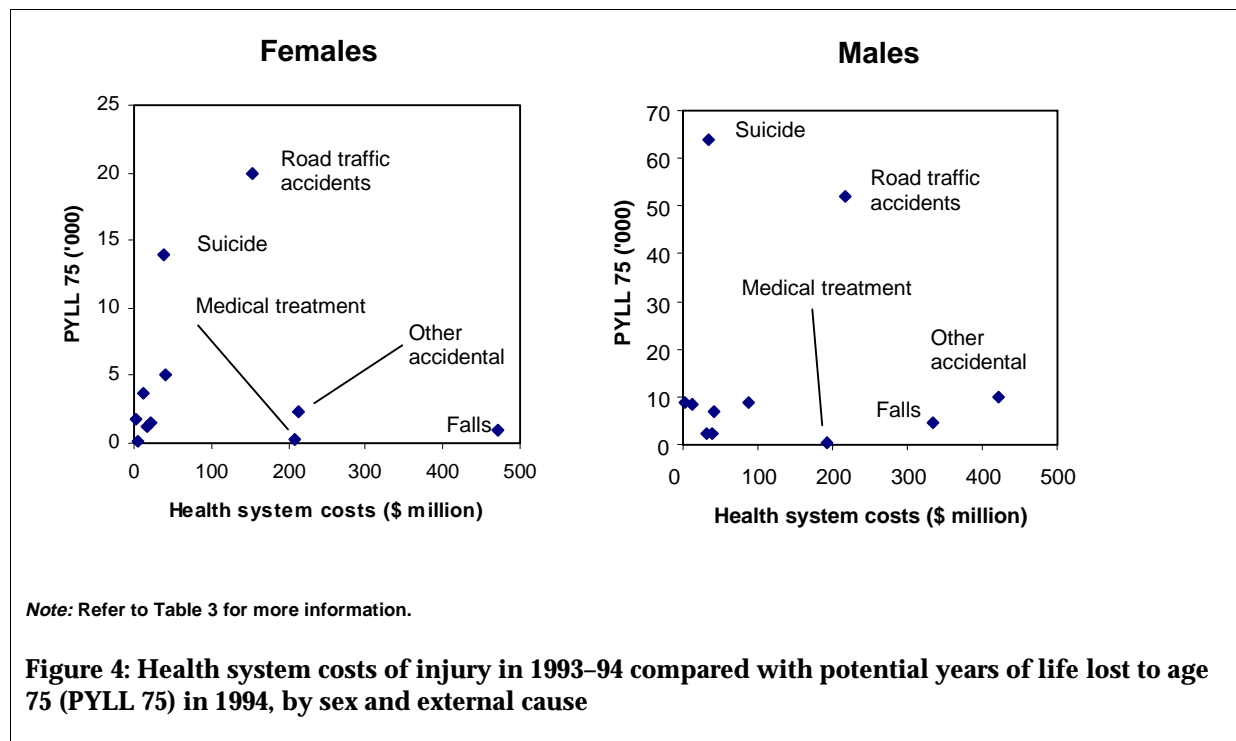
Suicide and road traffic accidents stand out from all other external causes in terms of deaths and potential years of life lost to age 75 compared with health system expenditures (Figure 4). In particular, the health system costs associated with suicide and self-harm are quite low (accounting for less than 3% of injury costs) whereas suicide accounts for nearly 45% of potential years of life lost before age 75 due to injury and poisoning.

At the other extreme, falls and adverse effects of medical care are the two leading causes of health system costs for both males and females, but account for very few deaths. In particular, in 1994 only 51 deaths were recorded as due to complications of medical care or adverse effects of drugs in therapeutic use. Both the costs and the deaths for these causes are based on the principal diagnosis and underlying cause of death as reported and coded in health system data and death registration data respectively.

Table 7: External causes of injury: health system costs by sex, 1993–94 (\$ million) and numbers of deaths and potential years of life lost to age 75 (PYLL 75) by sex, 1994

ICD-9 chapter	Males				Females		
	Total costs	Total costs	Deaths 1994	PYLL 75 1994	Total costs	Deaths 1994	PYLL 75 1994
Unintentional injuries							
Road traffic accidents	370	218	1,379	51,835	152	600	19,966
Other transport accidents	58	41	183	6,961	16	35	1,234
Poisoning	26	13	211	8,506	13	115	3,746
Accidental falls	806	334	441	4,547	471	545	972
Fire, burns or scalds	55	33	86	2,479	23	58	1,441
Accidental drowning	6	3	209	8,949	2	41	1,826
Machine injuries	44	40	73	2,219	4	4	199
Adverse effects of medical treatment ^(a)	401	194	28	417	207	23	256
Other unintentional injuries	635	421	338	9,927	214	98	2,223
Intentional injuries							
Suicide and self-inflicted injury	72	35	1,891	63,844	38	454	13,994
Homicide and violence	129	89	220	8,781	40	122	5,016
Total injury and poisoning	2,601	1,420	5,059	168,464	1,181	2,095	50,875

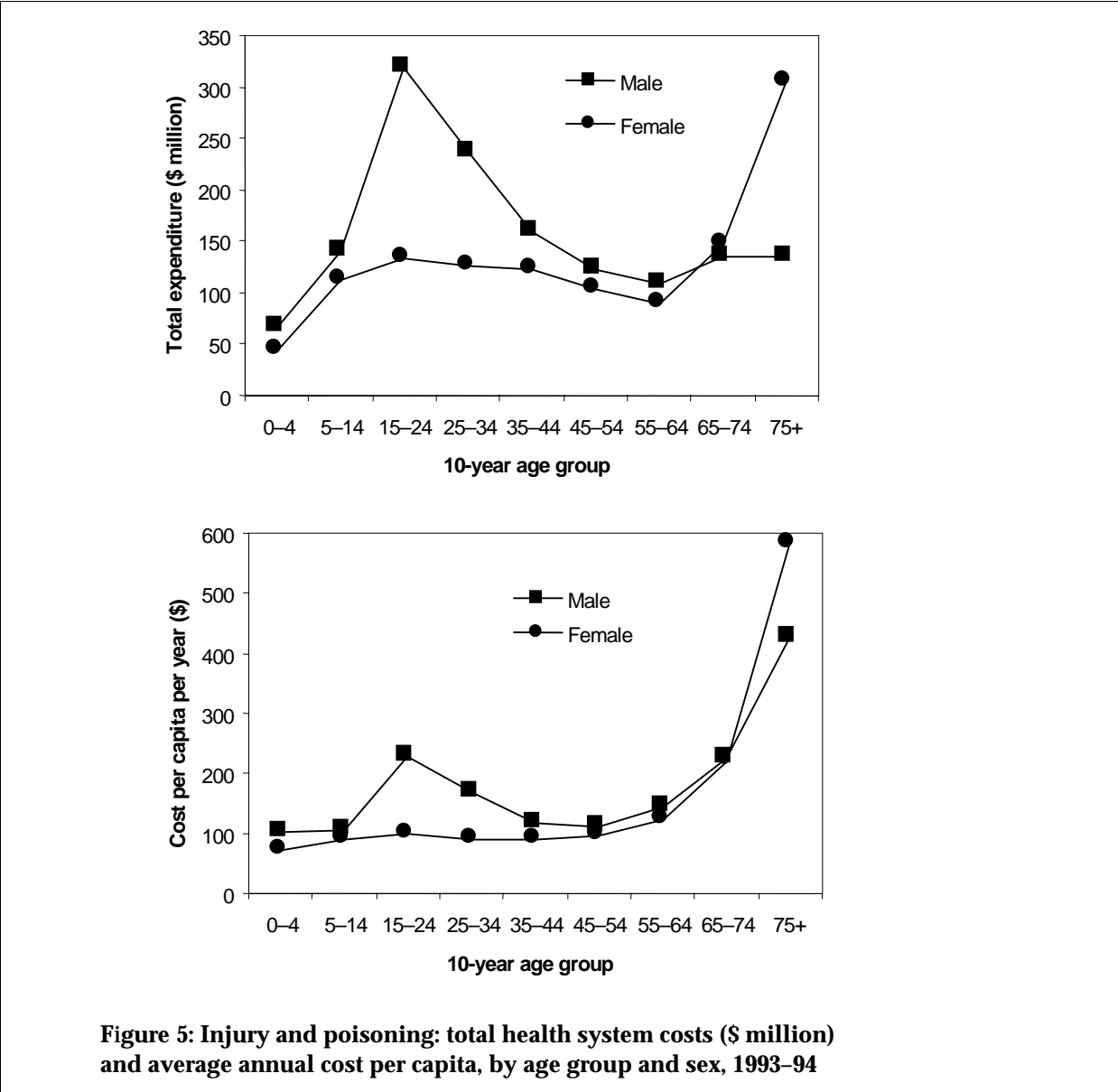
(a) Includes surgical and medical misadventure, and adverse effects of drugs in therapeutic use.



2.4 Injury costs by age and sex

Figure 5 illustrates the age–sex distribution of total expenditure and per-capita health system expenditure on injuries in 1993–94. Total expenditure rises from childhood to peak in the 15–24 age group and then declines before rising steeply at older ages, particularly for females, and plateaus around \$100 to \$150 million dollars for each 10-year age group between ages 30 and 70 for both males and females. Per capita expenditure is similar for males and females at most ages, apart from the male excess in the age range 15–24 years and the female excess in the oldest age range, 75 years and over.

Figure 6 shows the age–sex distributions of total health system costs for selected external causes of injury. Figure 7 shows similar distributions for health system costs per capita. It should be emphasised that the per capita costs relate to the total Australian population, not just those suffering injuries.



Of particular note in these tables is the very large contribution of accidental falls to total and per capita injury costs at older ages, particularly among older women. Detailed information on total costs and health services utilisation by health sector, age, sex and external cause are provided in Tables C.8 to C.19 (Appendix C).

2.5 Most costly injuries at different ages

Figure 8 shows the relative contributions of selected external causes to total health system costs of injury at various ages: for children aged 0–14 years, young adults aged 15–24 years, adults aged 25–64 years and older adults aged 65 years and over. The ‘Other’ category in each of these graphs includes a large number of external causes including accidents due to natural and environmental factors, inhalation or ingestion of foreign bodies, and striking against or being struck by an object.

Accidental falls make a very substantial contribution to total health system costs of injury among children and older people, but are less important than road traffic accidents among young adults aged 15–24 years. Adverse effects of medical treatment make a significant contribution among adults aged 25–64 years and among older people. Together, accidental falls and adverse effects of medical treatment account for 90% of all injury costs for people aged 65 years and over.

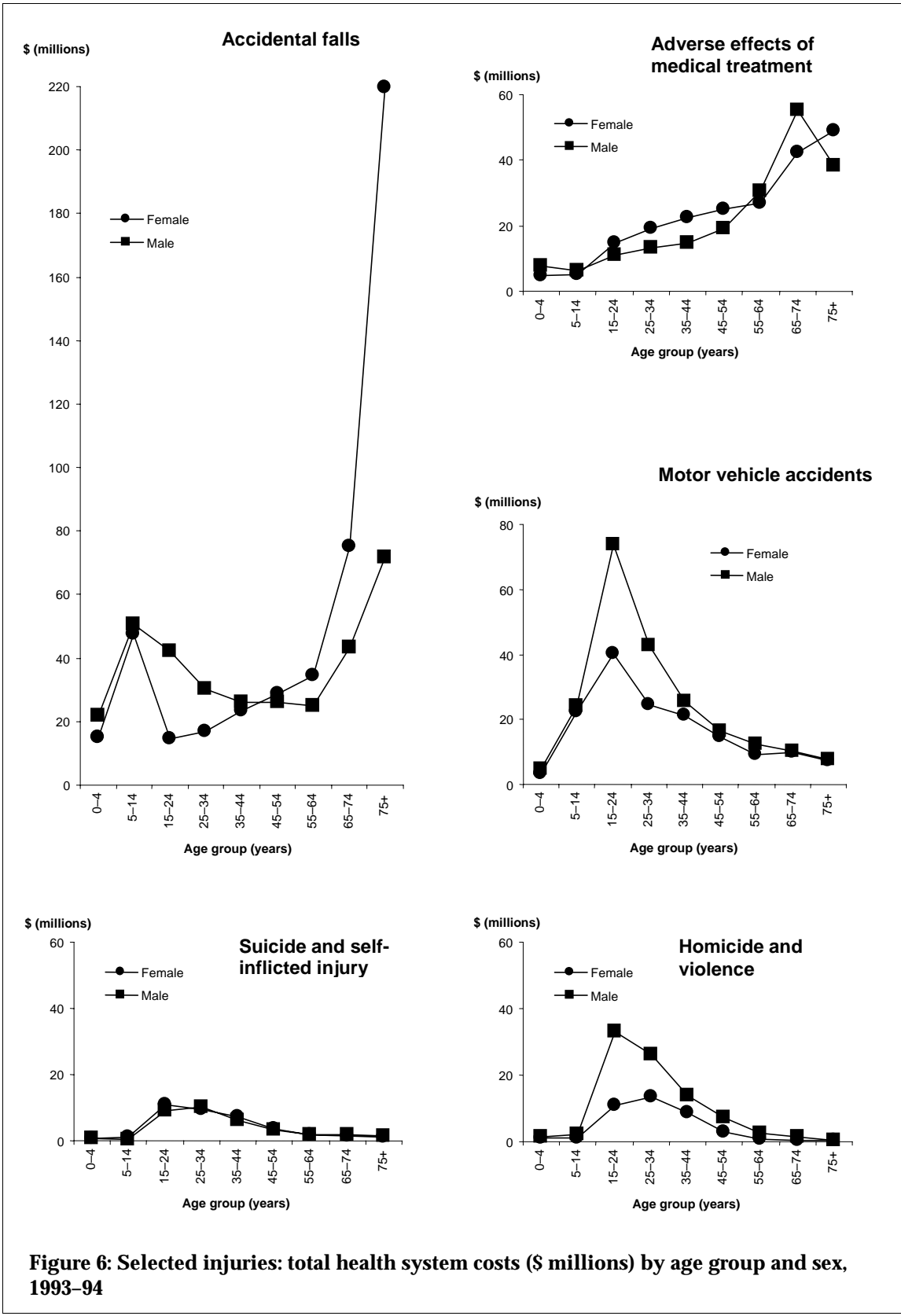


Figure 6: Selected injuries: total health system costs (\$ millions) by age group and sex, 1993-94

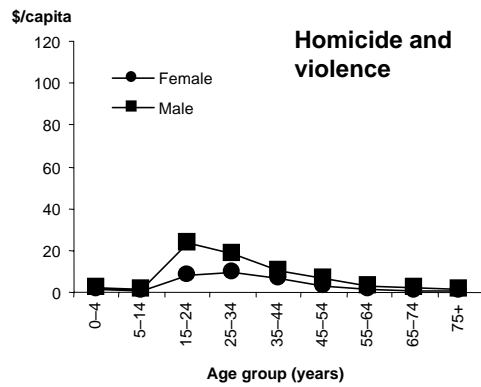
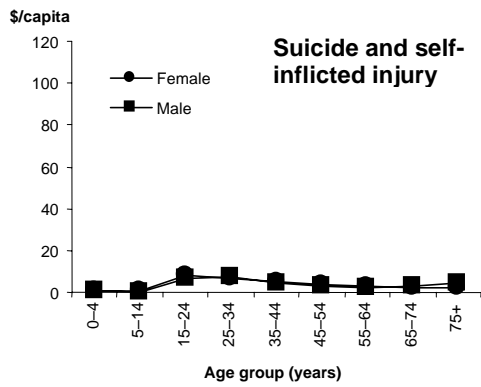
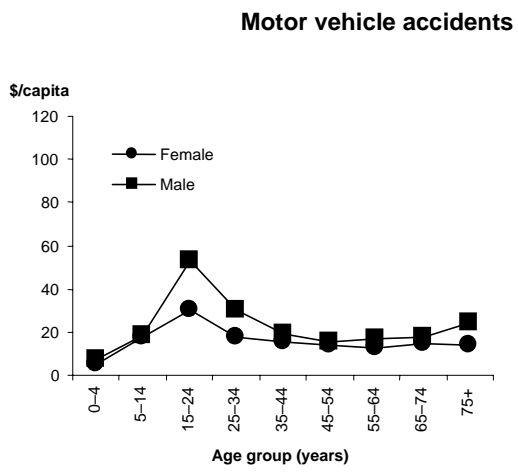
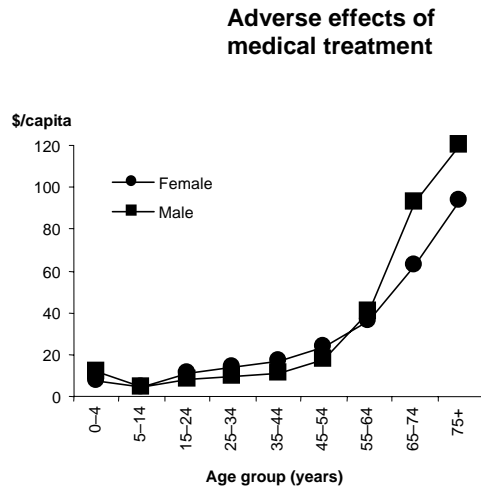
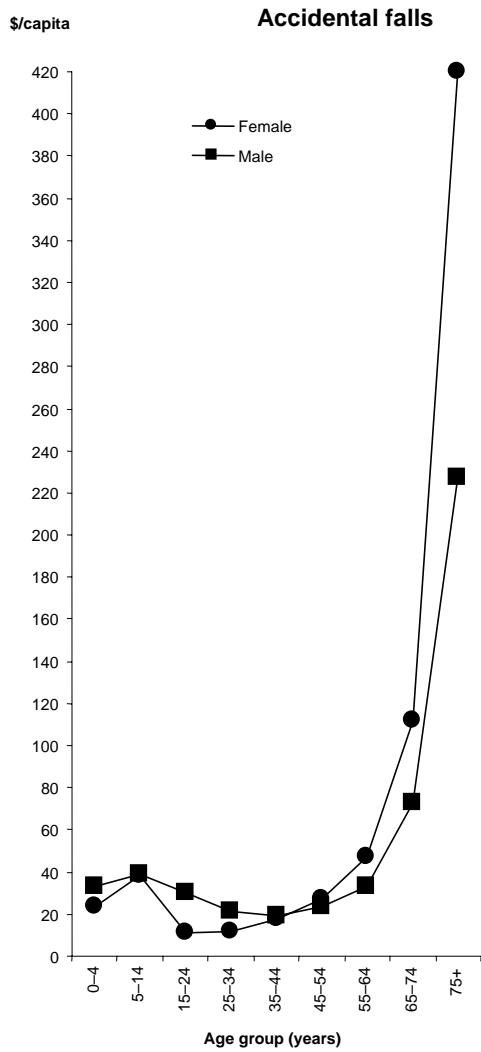
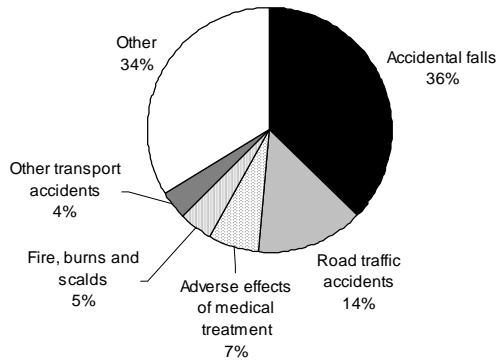
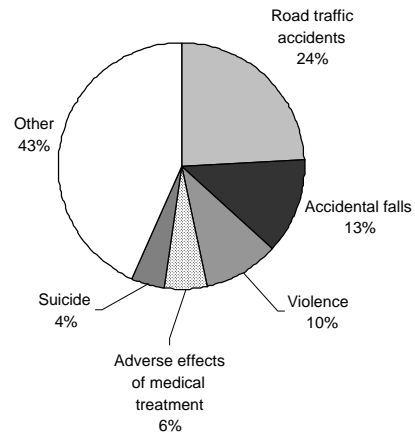


Figure 7: Selected injuries: per capita health system costs by age group and sex, 1993-94

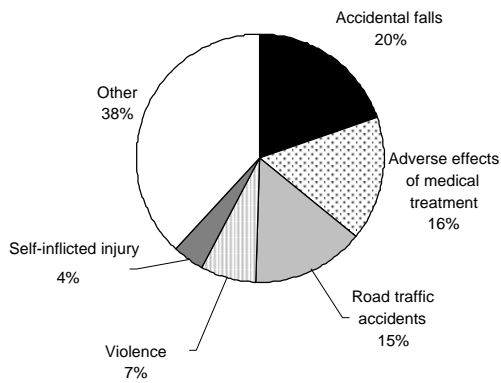
Ages 0–14
\$363 million



Ages 15–24
\$451 million



Ages 25–64
\$1,067 million



Ages 65 and over
\$722 million

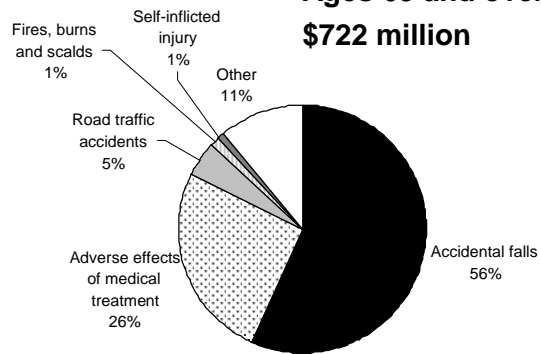


Figure 8: Contribution of selected external causes to total health system costs of injury at various ages: 0–14, 15–24, 25–64 and 65 years and over, Australia, 1993–94

3 Health system costs of musculoskeletal disorders

3.1 Costs for specific musculoskeletal disorders

Musculoskeletal disorders are the third leading cause of health system expenditures in Australia, with an estimated total expenditure of \$3,002 million in 1993–94, larger than that for all injuries and poisoning, although as noted in Section 1.1 some musculoskeletal conditions are known to be caused by or contributed to by injuries. Figure 9 shows the estimated health system costs associated with specific musculoskeletal disorders in 1993–94. Back problems account for an estimated \$700 million (or 23% of total musculoskeletal costs), followed by osteoarthritis (\$624 million) and disorders of muscles, tendons and soft tissue (\$519 million). Table 8 summarises estimated costs for musculoskeletal disorders by health sector. More detailed estimates of expenditure for the major disease groups shown in Table 8 are given in Appendix D, disaggregated by health sector, age and sex.

Table 9 summarises estimated utilisation of hospitals, doctors and drugs for musculoskeletal disorders. In total they accounted for an estimated 295,000 hospital admissions, 14.8 million medical services and 13.4 million prescriptions in 1993–94.

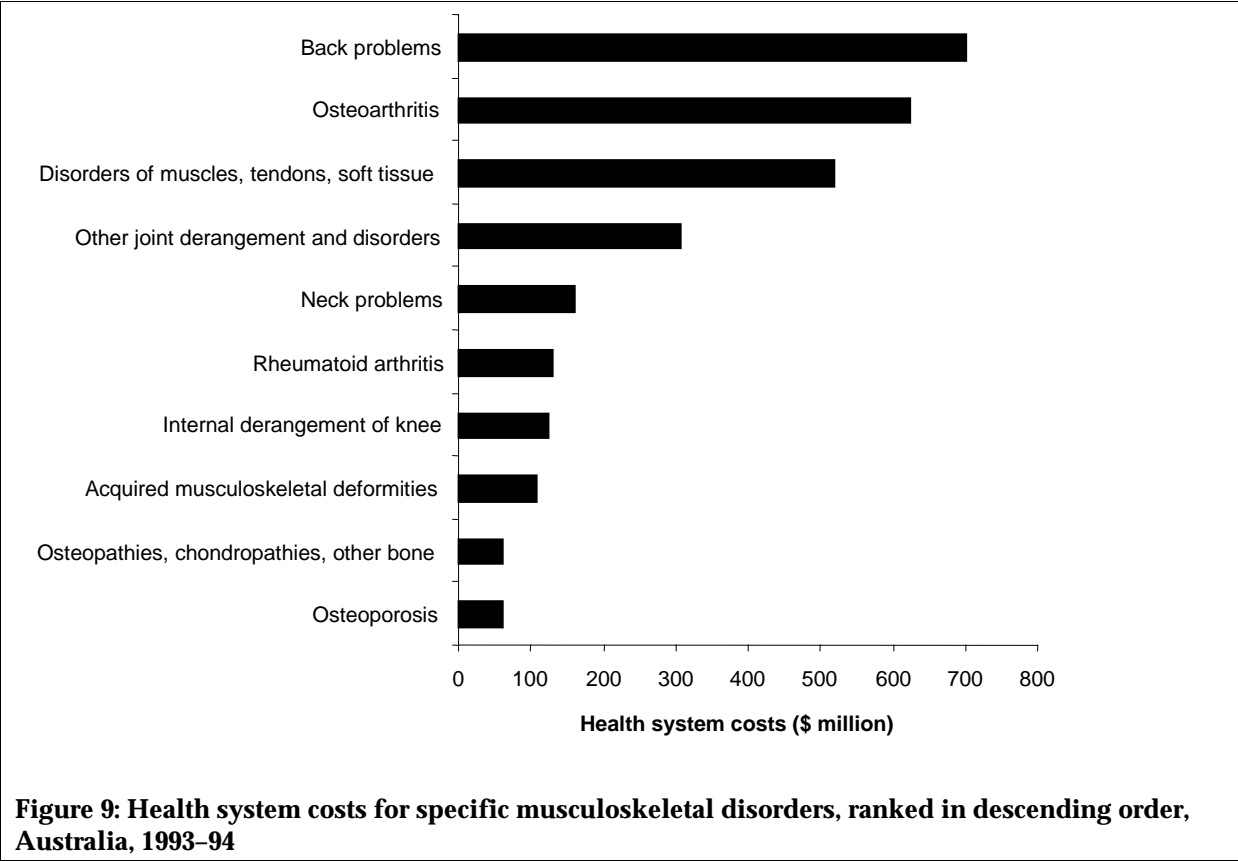


Table 8: Musculoskeletal disorders: health system costs by health sector, 1993–94 (\$ million)

ICD-9 chapter	Total costs	Hospitals ^(a)	Medical	Pharmaceuticals	Allied health	Nursing home	Other ^(b)
Systemic lupus erythematosus	5	3	1	0	0	0	0
Rheumatoid arthritis	129	44	27	27	6	18	7
Osteoarthritis	624	301	80	58	36	117	32
Internal derangement of knee	125	109	4	1	4	1	6
Other joint derangement and disorders	305	102	80	27	33	47	16
Back problems	700	239	133	62	151	79	36
Arthritis (spondylosis, spondylitis)	148	30	37	21	39	14	8
Intervertebral disc disorders	258	80	62	24	70	9	13
Chronic back pain	294	129	35	17	42	56	15
Neck problems	160	54	25	18	46	8	8
Disorders of muscles, tendons and soft tissue	519	165	127	60	112	28	27
Osteopathies, chondropathies and other bone disorders	60	29	9	2	5	12	3
Osteoporosis	60	9	10	12	4	22	3
Acquired musculoskeletal deformities	108	66	11	4	11	12	6
Other	208	87	12	5	9	85	11
Total musculoskeletal disorders	3,002	1,207	518	276	416	430	154

(a) Includes public hospital non-inpatient services and medical services for private patients in hospitals.

(b) Includes health research expenditure and other institutional, non-institutional and administration expenditure. Does not include public health services, community health services, ambulances, or medical aids and appliances.

Table 9: Musculoskeletal disorders: estimated health services utilisation by sector, 1993–94

	Hospitals			Medical services			Drugs
	Admissions ('000)	ALOS ^(a) (days)	Non-inpatient services ('000)	GP ('000)	Specialist ('000)	Total ('000)	Prescriptions ('000)
Rheumatoid arthritis	7	9.2	223	371	613	983	765
Osteoarthritis	41	9.4	520	1,452	859	2,310	3,058
Internal derangement of knee	47	1.5	30	67	40	107	26
Other joint derangement and disorders	31	3.1	479	1,120	1,016	2,136	1,437
Back problems	65	6.0	829	2,321	1,300	3,621	2,920
Neck problems	9	4.9	458	523	212	735	501
Disorders of muscles, tendons and soft tissue	52	2.5	877	2,353	1,345	3,698	3,152
Osteopathies, chondropathies, other bone	7	7.9	63	110	122	232	97
Osteoporosis	1	14.5	49	219	94	314	1,030
Acquired musculoskeletal deformities	15	3.9	289	157	127	283	106
Other	20	8.3	208	218	153	372	270
Total	295	5.0	4,026	8,910	5,881	14,791	13,362

(a) Average length of stay.

Table 10 summarises institutional and non-institutional treatment costs for musculoskeletal diseases. Hospital and nursing home costs account for 59% of all musculoskeletal disease treatment costs; the proportion is higher for a number of disorders such as internal derangement of knee and osteopathies and other bone disorders and much lower at 42% for disorders of muscles, tendons and soft tissue and 44% for neck disorders.

Table 11 shows the estimated health care costs for musculoskeletal disorders for males and females by health sector in 1993–94. Total hospital inpatient costs for males are 40% higher than those for females, whereas total nursing home costs and pharmaceutical costs are substantially lower for males than females.

Table 10: Musculoskeletal diseases: institutional and non-institutional treatment costs (\$ million) and institutional costs as a per cent of total treatment costs, 1993–94

	Institutional ^(a)	Non-institutional ^(b)	Total	Institutional as per cent of total
Rheumatoid arthritis	68	61	129	52
Osteoarthritis	445	179	624	71
Internal derangement of knee	115	10	125	92
Other joint derangement and disorders	162	143	305	53
Back problems	348	353	700	50
Neck problems	70	90	160	44
Disorders of muscles, tendons and soft tissue	216	303	519	42
Osteopathies, chondropathies, other bone	43	16	60	73
Osteoporosis	34	26	60	57
Acquired musculoskeletal deformities	82	26	108	76
Other	184	29	213	86
Total	1,765	1,236	3,002	59

(a) Includes recognised public hospitals, private hospitals, psychiatric hospitals, repatriation hospitals, nursing homes, other institutional and administration expenditure.

(b) Includes out-of-hospital medical services, pharmaceutical drugs, dental and allied health services, research, and other non-institutional expenditure.

Table 11: Health care costs of all musculoskeletal disorders by sex and sector of expenditure, Australia, 1993–94 (\$ million)

Sector of expenditure	Males	Females	Male/female ratio
Hospital inpatient	457.9	483.2	0.9
Hospital outpatient	138.8	127.1	1.1
Nursing home	83.1	346.7	0.2
Medical	223.2	295.1	0.8
Allied health professional	186.5	229.3	0.8
Pharmaceutical	107.4	169.1	0.6
Other	64.8	89.4	0.7
Total	1,261.8	1,740.0	0.7

3.2 Costs and impact of musculoskeletal disorders

Table 12 shows the self-reported prevalence of back problems, arthritis (rheumatoid arthritis plus osteoarthritis) and other musculoskeletal disorders from the 1995 ABS National Health Survey. The National Health Survey allows estimation of the prevalence of chronic conditions (those that have lasted or are expected to last six months or longer), recent conditions that are not chronic (those that have occurred in the last two weeks and are not chronic) and treated conditions (defined in terms of whether the condition has resulted in hospitalisation, contact with health services or health professionals, or use of medication).

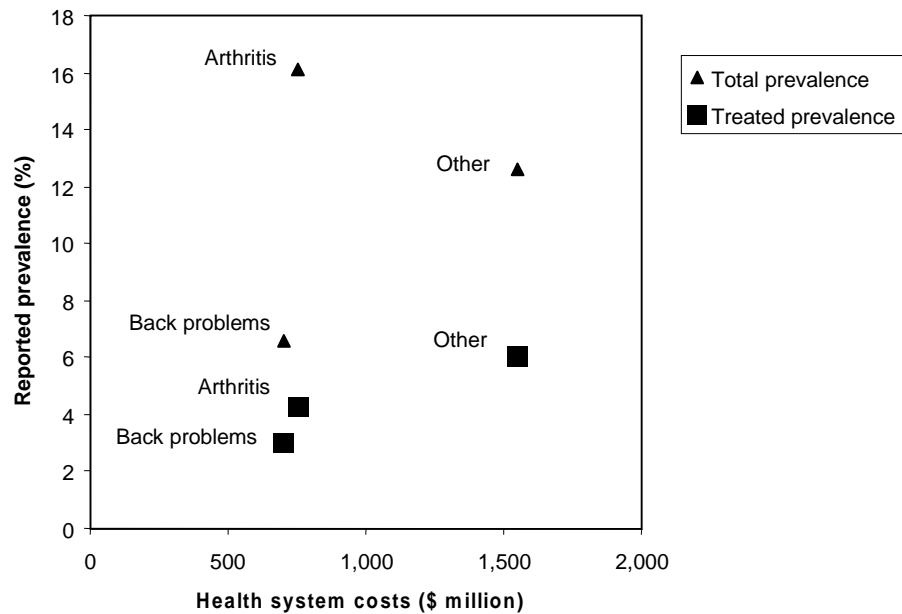
Figure 10 compares the prevalence of these three groups of musculoskeletal disorders in 1995 with their health system expenditures for 1993–94. There is a reasonable correlation between total health system expenditures and the treated prevalence of these conditions. Total prevalence bears less relation to health system expenditure, particularly for arthritis, where the total prevalence (16.1%) is substantially higher than the treated prevalence (4.3%).

Table 12: Self-reported prevalence (%) of musculoskeletal disorders from the 1995 ABS National Health Survey, by type of disorder, sex and whether chronic or treated

	Back problems	Rheumatoid and osteoarthritis	Other musculoskeletal disorders
Males			
Chronic conditions	5.6	13.1	8.9
Chronic and recent conditions ^(a)	7.3	13.3	12.1
Treated conditions ^(b)	3.2	3.1	5.2
Females			
Chronic conditions	3.9	18.6	9.4
Chronic and recent conditions ^(a)	5.8	18.9	13.2
Treated conditions ^(b)	2.9	5.6	6.9
Persons			
Chronic conditions	4.7	15.9	9.1
Chronic and recent conditions^(a)	6.6	16.1	12.6
Treated conditions^(b)	3.0	4.3	6.0

(a) Includes conditions experienced in last two weeks and long-term conditions, whether experienced in last two weeks or not.

(b) Includes conditions in relation to which the person was hospitalised in the last year, had contact with any health service or professional in last two weeks, or used medication in last two weeks.



Note: Refer to Table 12 for more information.

Figure 10: Health system costs of musculoskeletal disorders in 1993–94 compared with self-reported prevalence of arthritis, back problems and other musculoskeletal disorders from the 1995 ABS National Health Survey

3.3 Musculoskeletal disorder costs by age and sex

Figure 11 illustrates the age–sex distribution of total expenditure and per capita expenditure on musculoskeletal disorders in 1993–94. Total expenditure rises during childhood and plateaus around \$200 million dollars for each 10-year age group between ages 30 and 70. Health system costs rise steeply for older women to a total of \$594 million for women aged 75 years and over. Nearly 60% of this \$594 million results from nursing home costs attributable to disabling musculoskeletal disorders.

Per capita expenditure rises steadily with age to ages 65–74 years and then jumps substantially to around \$600 and \$1,150 per capita for men and women aged 75 years and over respectively.

Figure 12 shows the age–sex distributions of total health system costs for selected musculoskeletal disorders. Figure 13 shows similar distributions for health system costs per capita. It should be emphasised that the per capita costs relate to the total Australian population, not just those people with musculoskeletal disorders.

Detailed information on total costs and health services utilisation by health sector, age and sex and on total costs and health services utilisation by health sector, age, sex and type of musculoskeletal problem are provided in Tables D.5 to D.16 (Appendix D).

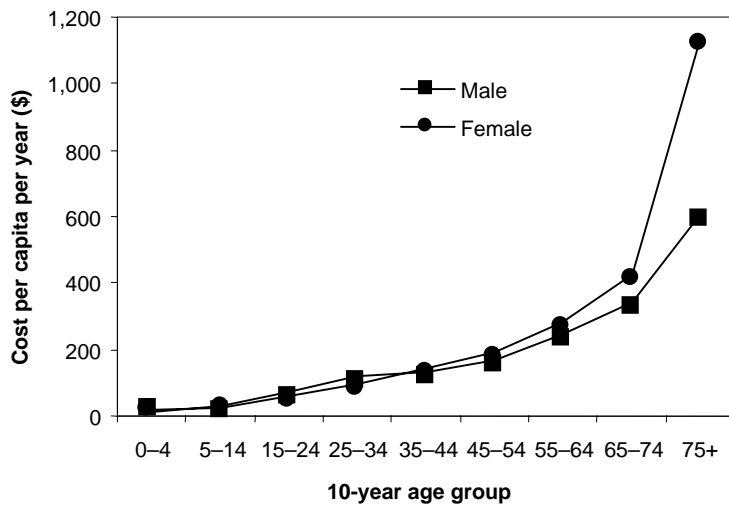
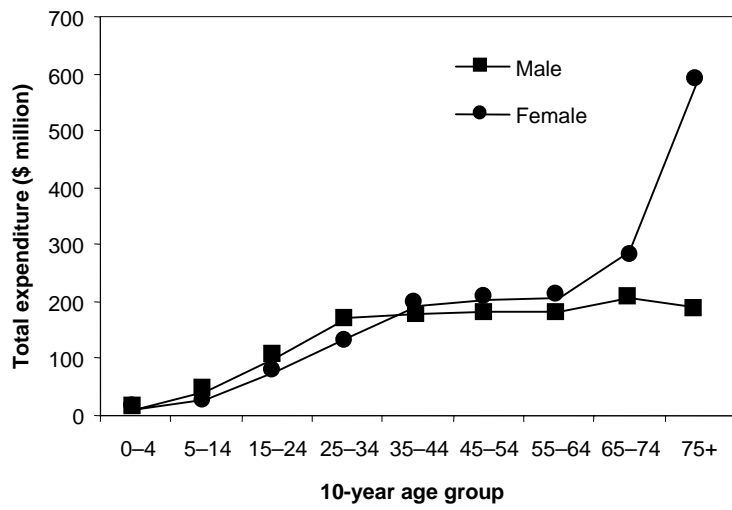
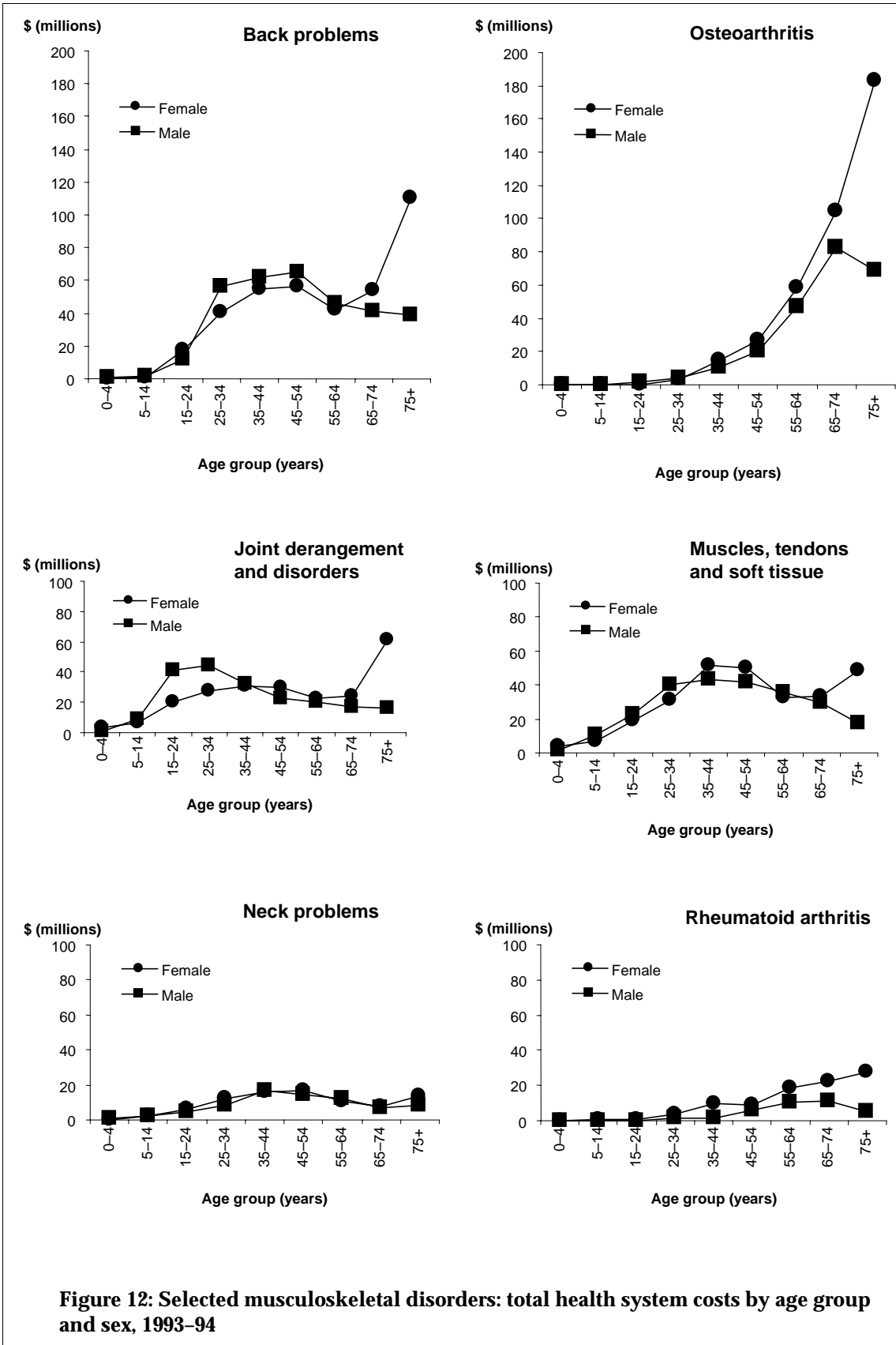


Figure 11: Musculoskeletal disorders: total health system costs (\$ million) and average annual cost per capita, by age group and sex, 1993-94



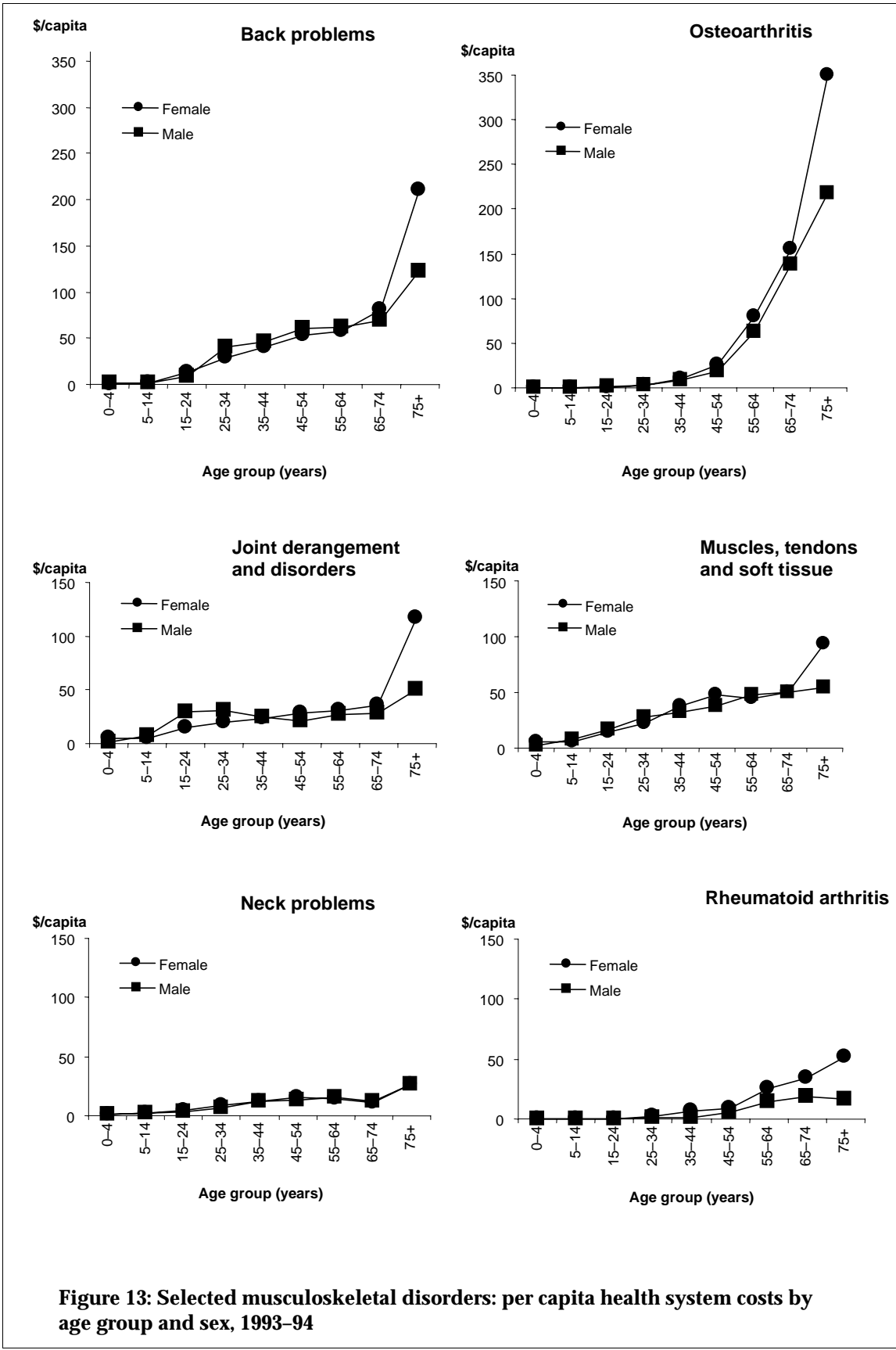


Figure 13: Selected musculoskeletal disorders: per capita health system costs by age group and sex, 1993-94

3.4 Annual health costs per treated case

Table 12 presented information from the 1995 ABS National Health Survey on the self-reported prevalence of treated back problems, arthritis (rheumatoid arthritis plus osteoarthritis) and other musculoskeletal disorders. Conditions were considered 'treated' if they had resulted in hospitalisation in the last 12 months, contact with health services or health professionals in the last two weeks, or use of medication in the last two weeks. This clearly gives only a very approximate estimate of the number of Australians treated for musculoskeletal disorders in one year.

The estimates of average annual health system costs per treated case of musculoskeletal disorder shown in Table 13 are thus indicative only and should be interpreted with caution. At best, they give an indication of the order of magnitude of annual treatment costs for people with chronic musculoskeletal disorders.

Average annual costs per treated case increase with age and are around twice as high in the age group 65 years and over as in adults aged 25–64 years. In large part, this is because of the substantial contribution of nursing home costs at older ages.

Among adults aged 25–64 years, estimated annual costs per treated case range from around \$700 for arthritis and \$1000 for back problems, to around \$1,300 for other musculoskeletal disorders.

Table 13: Estimated average annual health system costs (\$) per treated case, by sex and age group, 1993–94

Sex/age group	Back problems	Rheumatoid and osteoarthritis	Other musculoskeletal disorders	All musculoskeletal disorders
Males				
Less than 25 years	428	320	2,149	1,547
25–64 years	1,090	710	1,593	1,325
65 years and over	2,249	1,382	2,342	2,029
Females				
Less than 25 years	688	91	1,385	1,152
25–64 years	995	642	1,493	1,229
65 years and over	4,255	1,296	2,818	2,349
Persons, all ages	1,291	973	1,819	1,562

Glossary

ABS: Australian Bureau of Statistics

Acute hospitals: Establishments which provide at least minimal medical, surgical or obstetrical services for inpatient treatment and/or care, and which provide round-the-clock comprehensive qualified nursing service as well as other necessary professional services. Most patients require a relatively short stay.

Adverse effects of medical treatment: Includes adverse effects of drugs, medicinal and biologic substances in therapeutic use (where the drug is properly administered and not given or taken in error) and the unintended consequences of medical and surgical care. The latter includes misadventures to patients during surgical or medical care and abnormal reactions or later complications where misadventure did not occur at the time of the surgical or medical procedure.

AGPS: Australian Government Publishing Service.

AIHW: Australian Institute of Health and Welfare

Allied health services: Services provided by allied health practitioners excluding pharmacists and allied health services provided by hospitals.

ALOS: See **Average length of stay**.

Average length of stay (ALOS): The average number of bed-days (q.v.) per admitted patient episode.

Bed-day: The occupancy of a hospital bed by an inpatient for up to 24 hours.

Bed days: The number of full or partial days of stay for patients who were admitted for an episode of care and who underwent separation during the reporting period. A patient who is admitted and separated on the same day is allocated one patient day.

Department of Veterans' Affairs hospitals: Acute care hospitals operated by the Commonwealth Department of Veterans' Affairs to provide hospital treatment for eligible veterans and their dependants at Commonwealth expense. Department of Veterans' Affairs hospitals are recorded as public sector hospitals for data reporting purposes.

Direct costs: The health system costs of providing prevention and treatment services for health problems.

External cause: Environmental events and circumstances as the cause of injury, poisoning and other adverse effect. External causes of injury and poisoning are described and classified in the supplementary chapter of the World Health Organization's International Classification of Diseases 9th Revision (ICD-9). Refer to Appendix A for more details.

Homicide and violence: Violence is the intentional use of, or threat of use of, physical force against another person or against oneself, which results in or has a high likelihood of resulting in injury or death. Intentional violence resulting in death is referred to as homicide.

Incidence: The number of new cases of a specified disease or condition in a defined time period.

Indirect costs: Costs associated with disease and injury other than direct health system costs. These include lost production due to sickness and premature death, as well as costs impacting outside the health care sector (such as caring costs borne by the family, and police and court costs associated with drug abuse, for example).

Injury: Injury is used as shorthand to refer to injuries and poisonings and to all consequences of the external causes described in the supplementary chapter of the World Health Organization's International Classification of Diseases 9th Revision (ICD-9). The definition includes interpersonal and self-inflicted violence. It also includes the unintended consequences of medical and surgical care. (Harrison & Cripps 1994). See also **intentional injury** and **unintentional injury**.

Inpatient: Any person formally admitted by a hospital. Healthy newborn infants are excluded unless they have a stay of more than 10 days, or are the second or subsequent birth in multiple births.

Institutional: In this report, denotes the major health care institutions which provide residential care, such as hospitals and nursing homes.

Intentional injury: Injury resulting from deliberate violence inflicted by oneself or another person (e.g. homicide, rape, assault, suicide and attempted suicide, legal intervention by police etc.).

Internal derangement of knee: Includes chronic knee problems resulting from degenerative wear and tear or from old ruptures or tears of articular cartilage of meniscus of the knee. Acute knee derangement (including torn ligaments and ruptures) are classified as injuries rather than as musculoskeletal disorders.

Internal injuries: This term is used in this report to refer to internal injuries of the chest, abdomen and pelvis, injuries to blood vessels (excluding intracranial hemorrhage following injury), crushing injuries to face, neck, trunk and limbs, and injuries to nerves and spinal cord.

International Classification of Disease (ICD): The World Health Organisation's internationally accepted classification of death and disease. The ninth revision (ICD-9) was in use in 1993–94.

Knee derangement: See **Internal derangement of knee**.

Machine injuries: Machine injuries include all injuries caused by accidents involving machinery in operation, with the exclusion of powered hand tools and appliances. The great majority of machine injuries occur in the workplace.

Medical services: Private medical services excluding those to hospital inpatients. This includes consultations with general practitioners and specialists as well as pathology tests and screening and diagnostic imaging services. It includes services to veterans.

Non-inpatient occasion of service: Occurs when a patient attends a functional unit of the hospital for the purpose of receiving some form of service, but is not admitted. A visit for administrative purposes is not an occasion of service.

Non-inpatient: Patients not requiring admission to hospital, but who receive treatment in accident and emergency (casualty) departments, undergo short-term specialist treatment (such as minor surgery, radiotherapy or chemotherapy), receive care from a recognised non-admitted patient service/clinic of a hospital or are treated in their own homes through home nursing programs. Previously referred to as outpatients.

Nursing homes: Establishments which provide long-term care involving regular basic nursing care to chronically ill, frail, disabled or convalescent persons or senile inpatients. In practice, they cater mainly for older people. They must be approved by the Commonwealth Department of Health and Aged Care and/or licensed by the State or Territory, or controlled by government departments.

Osteoarthritis: chronic degenerative joint disease causing joint pain and restriction of mobility.

Osteoporosis: Osteoporosis is a disease characterised by low bone density and micro-architectural deterioration of bone tissue, leading to enhanced bone fragility and a consequent increase in fracture risk. Cost estimates for osteoporosis include costs of diagnosis and treatment of osteoporosis per se but most of the costs for fractures resulting from osteoporosis will be classified as injury costs associated with fractures (injury type) and falls (external cause), although many osteoporotic fractures are atraumatic.

Outpatient: See **non-inpatient**.

Over-the-counter drugs (OTC): Pharmaceutical drugs available without prescription. Examples are cough mixtures, simple analgesics and antacids. Some OTCs can be sold only by pharmacists, but many can be sold through non-pharmacy outlets.

PBS: Pharmaceutical Benefits Scheme.

Pharmaceutical drugs: Includes prescription drugs and over-the-counter medicines.

Prescription drugs: Pharmaceutical drugs available only on the prescription of a registered medical practitioner. These drugs are also known as Schedule Four (or S-4) drugs after the schedule to the State and Territory Acts of Parliament that regulates the sale and distribution of poisons and drugs. Prescription drugs are available only from pharmacists who are regulated by State and Territory laws whether they work in community or in hospital pharmacies.

Prevalence: The number of cases of a given disease or condition present in a given population at a given time (see also **incidence**).

Prevention: Refers to all health system activities relating to the primary prevention of diseases and injury, including screening for asymptomatic disease within the hospital and medical sectors.

Private hospitals: Privately owned and operated institutions approved by the Commonwealth Department of Health and Family Services. Private hospitals cater only for private patients who are treated by a doctor of their own choice and are charged fees for accommodation and medical services. Private hospitals can be classified as acute or psychiatric on the basis of the proportion of acute inpatient services provided.

Psychiatric hospitals: Establishments devoted primarily to the treatment and care of inpatients with psychiatric, mental, or behavioural disorders.

Public health: The programs, services, and institutions, outside the treatment sectors of the health system, which emphasise the prevention of disease and the health needs of the population as a whole.

Public hospitals: As determined by the State or Territory health authority, and includes both recognised and non-recognised hospitals. Recognised hospitals are those nominated by States and Territories and accepted by the Commonwealth and appearing in schedules to each State/Territory Medicare Agreement (Schedule B in the current Medicare Agreements). They provide free shared-ward accommodation for all who require it and free treatment

there by a hospital-appointed doctor. In addition, they provide, to those who are prepared to pay for it (for example, through private insurance), private ward accommodation and the doctor of choice. Thus, public hospitals service much private medical practice as well as public.

Recurrent expenditure: Expenditure which recurs continually or very frequently (for example, salaries). It may be contrasted with capital expenditure, such as the cost of hospital buildings and diagnostic equipment, for which the expenditure is made infrequently.

Repatriation hospitals: Acute care hospitals run by the Commonwealth Department of Veterans' Affairs originally set up to provide hospital treatment for eligible veterans and their dependants at Commonwealth expense.

Research: Health and medical research as defined in the *Health Expenditure Bulletin* published by the Australian Institute of Health and Welfare.

Rheumatoid arthritis: A chronic disabling auto-immune disorder of joints.

Road traffic accidents: Accidents on streets, roads, and highways involving drivers, passengers, pedestrians, or vehicles. Traffic accidents refer to automobiles (passenger cars, buses, and trucks), bicycles, and motorcycles but not off-road motor vehicles, railroads or snowmobiles. See also **Transport accident**.

Self-inflicted injury: The injurious effect of suicide and attempted suicide. This includes injuries resulting from self-destructive acts carried out without the intention of dying.

Separation (or discharge): Occurs when an inpatient leaves hospital to return home, transfers to another institution, or dies. The number of separations in a year is almost the same as the number of hospital inpatient episodes.

SLE: see **Systemic lupus erythematosus**.

Suicide: Death from injury, poisoning, or suffocation where there is evidence (either explicit or implicit) that the injury was self-inflicted and that the decedent intended to kill him/herself.

Systemic lupus erythematosus (SLE): A multi-system auto-immune disease characterised by remissions and exacerbations with tissue damage affecting many body systems. Arthralgia and arthritis are present in up to 95% of patients (Rasaratnam & Ryan 1998).

Transport accident: A transport accident is any accident involving a device designed primarily for, or being used at the time primarily for, conveying persons or goods from one place to another. Transport accidents are classified as either **Road traffic accidents** (q.v.) or **Other transport accident** (see below) in this report.

Transport accident—other: Other transport accidents are transport accidents which do not occur on streets, roads and highways. They include accidents involving vehicles on private property, off-road vehicles, rail, sea and air transport.

Treatment: Refers to all health system activities relating to the diagnosis, treatment, rehabilitation and palliation for diseases, injuries and symptoms.

Unintentional injury: Injury that is not inflicted by deliberate means. When death or disability occurs under 'accidental' circumstances, the preferred term is 'unintentional injury' (e.g. motor vehicle crash, falls, fires, poisoning, drowning).

Violence: See **Homicide and violence**.

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Appendix A: Classification of disease and injury

Diseases and injury are classified using the Ninth Revision of the World Health Organization's International Classification of Disease (ICD-9). The disease categories used in this report are defined by groups of ICD-9 codes as shown in Tables A.1, A.2 and A.3. The International Classification of Primary Care (ICPC) codes used in the GP survey and the condition codes used in the 1989–90 National Health Survey (NHS) are mapped across to the ICD-9 codes as shown in these tables.

Table A.1: Classification of injuries and poisoning by injury type

Disease category	ICD-9 codes	ICPC codes
1. Fractures	800–829	L72–L76
2. Dislocations	830–839	L80, L96
3. Sprains and strains of joints and adjacent muscles	840–848	L77–L79
4. Intracranial injury, excluding skull fracture	850–854	N79, N80
5. Internal injury of chest, abdomen, pelvis and blood vessels	860–869, 900–904	A81, B76, B77, D80, R88, U80, X82
6. Injury to nerves and spinal cord	950–957	N81
7. Open wound	870–897	F79, H77 ^(a) , S13, S18, Y80 ^(b)
8. Late effects of injury, poisoning, toxic effects, and other external cause	905–909	A82
9. Superficial injury	910–919	F75, H78, S12, S15, S17, S19
10. Contusion with intact skin surface	920–924	S16
11. Crushing injury	925–929	A80 ^(b) , L81 ^(b) , Y80 ^(b)
12. Foreign body entering through orifice	930–939	D79, F76, H76, R87
13. Burns	940–949	S14
14. Certain traumatic complications and unspecified injuries	958–959	A80 ^(b) , H79, L81 ^(b) , Y80 ^(b) , W75
15. Poisoning and toxic effects of substances	960–979, 980–989	A84, A86
16. Other and unspecified effects of external cause	990–995	A12, A13, A85, A88
16.1 Allergy not otherwise specified, anaphylactic shock	995.0, 995.3	A12 ^(b)
16.2 Unspecified adverse effect of drug	995.2	A13, A85
16.3 Other	990–994, 995.1, 995.4–995.9	A88
17. Complications of surgical and medical care	996–999	A87
18. Unspecified injuries, prevention and screening	V14, V15.0, V15.5, V15.6, V66.4, V67.4, V71.3–V71.6, V82.5	

(a) H77 also includes post-inflammatory perforation of eardrum (ICD-9 code 384.2), but all of H77 was assigned here.

(b) Where ICPC codes map to ICD-9 codes in more than one injury group, they are mapped in proportion to hospital separations for the relevant ICD-9 codes for each age–sex group.

The ICD-9 identifies external causes of injury using the so-called E-codes E800–E999. ICPC codes do not similarly identify external causes. In order to map injury costs to external causes, each of the injury types 1–11, 14, 16.1, 16.2 in Table A.1 were mapped to the external cause categories flagged with an (a) in Table A.2 using the age–sex specific distribution by E-code of hospital separations for that injury type. To check whether the hospital separation distribution was a reasonable proxy for the analogous distribution for general practice consultations, data from the 1995 National Health Survey were analysed for persons reporting a visit to a doctor in the last two weeks for an injury. When disaggregated by age, sex, injury type (e.g. fracture) and external cause group, the sample numbers were very low.

Table A.2: Classification of injuries and poisoning by external cause

Disease category	ICD-9 codes	ICPC codes
Unintentional injuries		
Road traffic accidents	E810–E819, E826–E829	(a)
Other transport accidents	E800–E807, E820–E825, E830–E848	(a)
Poisoning	E850–E858, E860–E869	A84 ^(d) , A86
Accidental falls	E880–E888	(a)
Fire, burns or scalds	E890–E899, E924.0, E924.2–E924.9	S14
Accidental drowning	E910	(a)
Machine injuries	E919	(a)
Adverse effects of medical treatment ^(b)	E870–E879, E930–E949	A13, A85, A87
Other unintentional injuries		
a. Accidents due to natural and environmental factors	E900–E909	(a)
b. Inhalation and ingestion of food causing obstruction	E911	(a)
c. Accidents caused by other foreign bodies	E912–E915	D79, F76, R87, H76
d. Other accidents	E916–E918, E920–E923, E924.1, E925–E929	(a)
Intentional injuries		
Suicide and self-inflicted injury		
a. Drug caused	E950.0–E950.3	A84 ^(d)
b. Other	E950.4–E959	(a)
Homicide and violence		
Undetermined whether accidental or purposeful^(c)		
Drug poisoning, cause uncertain	E980.0–E980.5	A84 ^(d)
Other	E980.6–E989	(a)
Unspecified injuries, prevention and screening	V14, V15.0, V15.5, V15.6, V66.4, V67.4, V71.3–V71.6, V82.5	

(a) Relevant ICPC codes for each of injury types 1–11, 14, 16.1, 16.2 in Table A.1 were mapped to the external cause categories flagged above with an (a) using the age–sex specific distribution of hospital separations of E-code groups for that injury type. Refer to text.

(b) Surgical and medical misadventure, adverse effects of drugs in therapeutic use

(c) In tables in this report, this category has been added to ‘Suicide and self-inflicted injury’ apart from 10% of ‘Drug poisoning, cause uncertain’ which has been added to ‘Accidental poisoning’.

(d) Distributed across injury categories in proportion to inpatient episodes for these categories.

For this reason they were not used as the basis of the mapping of ICPC codes to E-codes in Table A.2. For the injury types where the numbers were largest, the hospital separation distribution was remarkably similar to the distribution obtained from the National Health Survey data. For this reason, the hospital-based mapping was considered likely to give a reasonable approximation to the external cause distribution by injury type seen in general practice. Note that the age–sex–injury type distribution is determined wholly by the GP survey data; it is only the distribution of external cause within injury type that is approximated by the inpatient distributions.

The categories for musculoskeletal disorders used in this report are defined as shown in Table A.3.

Table A.3: Classification of musculoskeletal disorders

Disease category	ICD-9 codes	ICPC codes	NHS codes
Systemic lupus erythematosus (SLE)	710.0, V13.5 ^(h) , V54 ^(h)	L99 ^(e)	42 ^(f)
Rheumatoid arthritis ^(a)	714, V54 ^(h)	L88 ^(d)	70 ^(f)
Osteoarthritis ^(a)	715, V54 ^(h)	L89–L91	70 ^(f)
Internal derangement of knee	717, V13.5 ^(h) , V54 ^(h)	L97	42 ^(f)
Other joint derangement and disorders	718–719, V13.5 ^(h) , V54 ^(h)	L08, L10, L11, L12(50%), L13, L15, L16, L17(50%), L20, L28, L99 ^(e)	42 ^(f)
Back problems			
Arthritis (spondylosis and spondylitis)	720, 721.2–721.9, V54 ^(h)	L84, L88 ^(d)	70 ^(f)
Intervertebral disc disorders	722.1–722.3, 722.5–722.9, V13.5 ^(h) , V54 ^(h)	L86	38, 39
Chronic back pain	724, V13.5 ^(h) , V54 ^(h)	L02, L03	40 ^(f)
Neck problems	721.0–721.1, 722.0, 722.4, 723, V13.5 ^(h) , V54 ^(h)	L01, L83	40 ^(f) , 70 ^(f)
Disorders of muscles, tendons and soft tissue ^(b)	725–729, V54 ^(h)	L09, L12(50%), L14, L17(50%), L18, L19, L29(50%), L70 ^(c) , L87, L92, L93, L99 ^(e)	42 ^(f) , 89
Osteopathies, chondropathies and other bone disorders	730–732, V54 ^(h)	L70 ^(c) , L94, L99 ^(e)	42 ^(f)
Osteoporosis	733.0, V54 ^(h)	L95	42 ^(f)
Acquired musculoskeletal deformities	734–738, V54 ^(h)	L85, L98, L99 ^(e)	42 ^(f) , 111, 112
Other	710, 711–713, 716, 733.1–733.9, 739, V13.5 ^(h) , V54 ^(h)	L29(50%), L99 ^(e)	42 ^(f)
Prevention	V17.7, V17.8, V82.1, V82.2	L27	74 ^(g) , 97 ^(g)

(a) Excluding spine.

(b) Includes rheumatism, aches of muscles/tendons, ganglions, bunions, bursitis, cramps, tenosynovitis, tennis elbow, etc.

(c) Distributed according to hospital inpatients for 728.0 (disorders of muscles etc.) and 730 (osteopathies etc.).

(d) Distributed according to hospital inpatients for 714 and 720.0, 720.2 (back).

(e) Distributed according to hospital inpatients for 710.0 (lupus), 718–719 (other joint), 725–728 (disorders of muscles etc.).

(f) Distributed across all relevant categories using number of consultations in the GP survey.

(g) Distributed across all chapters of ICD-9 in proportion to treatment costs.

(h) Distributed across musculoskeletal categories according to hospital separations for non-V codes.

Appendix B: Summary of disease costing methodology

The Disease Costs and Impact Study (DCIS), a joint project of the Australian Institute of Health and Welfare and the National Centre for Health Program Evaluation, has developed a methodology for estimating the health system costs of specific diseases and disease groups in Australia. The basic approach is to take known aggregate expenditures on health care and apportion those to disease categories using Australian data (hospital morbidity data, case mix data, the national survey of morbidity and treatment in general practice, and the 1989–90 National Health Survey). The DCIS methodology is documented in detail in Mathers et al. (1998c).

Total recurrent health expenditure in 1993–94 is disaggregated by the following dimensions:

- Disease (defined by ICD-9 code groups—see Appendix A)
- Sector (hospital inpatient, non-inpatient, medical, pharmaceutical etc.)
- Program (treatment, prevention)
- Sex (male, female)
- Age (0–4, 5–14, 15–24, ... 65–74, 75+).

The proportion of direct health expenditure included in the disease costings in this report represents 92% of direct health care expenditure (see Table B.1 for a list of the health sectors included). Recurrent expenditure on health care which has not yet been attributed includes ambulance services, community health services, health promotion and illness prevention (apart from breast, cervix, lung and skin cancer public health programs), ambulance services, and medical aids and appliances.

The attribution of the direct costs of health services to disease is discussed in more detail below and summarised in Table B.1.

Hospital inpatient services

This sector includes inpatient (admitted patient) costs for recognised public hospitals (including public psychiatric hospitals), repatriation (veterans') hospitals and private hospitals. The proportions of total public acute hospital expenditure which relate to inpatients are given by the inpatient fractions estimated for each State and Territory by the National Health Ministers' Benchmarking Working Group (1996).

Disease costs for inpatient services are estimated by apportioning the total inpatient expenditure for each State or Territory to individual episodes of hospitalisation with an adjustment for resource intensity of treatment for the specific episode (using Diagnostic Related Groups or DRGs). Medical costs for private, compensable and other non-public patients in public, repatriation and private hospitals are estimated using DRG-derived medical cost weights and age–sex specific information from the Health Insurance Commission on in-hospital private medical charges for various categories of service.

Public psychiatric hospital data for New South Wales and Victoria are used to allocate public psychiatric hospital inpatient costs. These costs all fall in the mental health chapter of ICD-9.

Outpatient and casualty services

The 1989–90 ABS National Health Survey is used to allocate total expenditure on non-inpatient services for 1993–94. Total visits to outpatient clinics (including casualty or accident and emergency departments) for each age–sex–disease group are estimated from the National Health Survey data on numbers of outpatient visits in the two weeks prior to interview. Expenditure is allocated assuming that all visits have the same cost.

Nursing homes

The distribution of main disabling health condition of nursing home residents in the 1993 Australian Survey of Disability, Ageing and Carers is used to allocate total nursing home expenditure for 1993–94 to age–sex–disease categories at ICD-9 chapter level. This expenditure is apportioned to specific disease groups at the sub-chapter level according to the distribution of diagnosis for patients in that age–sex group who transfer from acute hospitals (around 60% of nursing home admissions).

Medical services

This sector includes expenditure on all private medical services apart from those to hospital inpatients. It includes consultations with general practitioners and specialists as well as pathology tests and screening and diagnostic imaging services. The 1990–91 Survey of Morbidity and Treatment in General Practice in Australia (Bridges-Webb et al 1992) is used to allocate age–sex specific out-of-hospital expenditure on medical services to disease diagnoses. This allocation is done separately for general practitioners (based on encounters surveyed in the GP survey) and for 17 categories of specialists (based on the pattern of referrals to each category of specialist in the GP survey).

Age–sex specific out-of-hospital expenditure on medical services is derived from Medicare and Department of Veterans' Affairs (DVA) data. This expenditure covers all charges for which a Medicare or DVA claim has been made. It is adjusted to include expenditure for which claims have not been made using an inflation factor derived from the AIHW health expenditure data on total expenditure on medical services.

This methodology assumes that the pattern of GP services by diagnosis in 1993–94 is the same as that collected in 1990–91, that the pattern of diseases managed by each type of specialist in 1993–94 reflects the pattern of referrals to that specialist type from GPs in 1990–91 and that each referral to a specialist of a given type generates services with equal cost.

Allied health services

The 1990–91 Survey of Morbidity and Treatment in General Practice in Australia and the 1989–90 ABS National Health Survey are used to allocate total Australian expenditure on allied health practitioners to age–sex–disease groups. Total visits to allied health practitioners in 1993–94 for each age–sex–disease group are estimated from the National Health Survey data on visits to 14 types of allied health practitioners in the two weeks prior to interview. Annual visits to other types of allied health practitioner are estimated from referrals by GPs in the GP survey. Expenditure is allocated assuming that all visits have the

same cost. The methodology covers all allied health professionals except pharmacists (see below). Costs for dental services are allocated to the 'Digestive system' chapter of ICD-9 and account for the very large allied health expenditure for that chapter (see Table 1).

Pharmaceuticals

Total pharmaceutical expenditure is decomposed into two components: expenditures on prescription drugs and non-prescription (over-the-counter) pharmaceuticals. The 1990–91 Survey of Morbidity and Treatment in General Practice in Australia together with 1993–94 estimates of total costs and numbers of prescriptions for 40 categories of drug are used to allocate total Australian expenditure on prescription pharmaceuticals to age–sex–disease groups. Expenditure on over-the-counter pharmaceuticals is attributed to disease–age–sex groups using information from the 1989–90 ABS National Health Survey. The methodology addresses all pharmaceutical costs apart from the cost of pharmaceuticals dispensed in hospitals, which are included in estimates of hospital costs.

For each of 40 therapeutic drug groups (Pharmaceutical Benefits Pricing Authority 1994), the relative distribution of prescriptions by disease, age and sex for all community prescriptions in 1993–94 is assumed to be the same as that for prescriptions by general practitioners in 1990–91. For diseases where a significant proportion of prescriptions are made by medical specialists, this assumption may have limited validity. Detailed estimates of 1993–94 utilisation and expenditure for the 40 drug categories are used as a starting point for attribution to disease–age–sex groups. This takes into account differences in average drug costs across therapeutic categories, average numbers of repeats and relative changes in utilisation and costs across drug categories between 1989–90 and 1993–94.

Public health programs

Community and public health programs in general are not yet included in the estimates of disease costs due to the difficulties in obtaining comprehensive case mix data for these health sectors. However, estimates of the costs for the breast and cervix cancer national screening programs, for skin cancer prevention programs, and for lung cancer's share of anti-smoking activities, have been included in the overall health system costs attributed to diseases and injury (Mathers et al. 1998a).

Research

Estimated total Australian expenditure on health and medical research for major disease and population groups in 1991 (Nicholl et al. 1994) was used to attribute 1993–94 total research spending to chapters of ICD-9. This resulted in an estimated \$35.6 million for injury research and \$25.8 million for research into musculoskeletal disorders in 1993–94. Research expenditure for musculoskeletal disorders was attributed to age–sex groups for particular diseases in proportion to total other health system expenditure for that group.

An analysis was carried out of the distribution of National Health and Medical Research Council grants for injury research for 1993 and 1996 (NHMRC 1994, 1996) and these data were used to make preliminary estimates of the distribution of general injury research funding across external causes of injury. Additional information on injury research funding specific to road traffic accidents and to occupational injury (DHSF & AIHW 1998) were used

to assist in the mapping of injury research expenditure to external causes. Estimated research expenditure for external causes of injury was then mapped to injury type using the hospital inpatient distribution of injury types for each external cause.

Other institutional, non-institutional and administration

Other institutional health expenditure (the Red Cross Blood Transfusion Service), other non-institutional health expenditure (Family Planning Services) and administration expenditure (Commonwealth, State and Territory health authority administration expenses and management expenses of Medicare and registered private health insurance funds) are allocated to disease–sex–age groups in proportion to total health expenditure for other health sectors.

Table B.1: Summary of disease costing methodology, 1993–94

Health sector	Basis of cost attribution to disease–age–sex groups	Data sources
Hospitals		
Acute hospital inpatients Repatriation hospital inpatients	Separations weighted by DRG cost weight and length of stay.	AIHW National Hospital Morbidity Database 1993–94
Public psychiatric hospital inpatients	Bed days.	AIHW National Hospital Morbidity Database 1993–94
Hospital non-inpatients	At chapter level: number of visits in last two weeks. Sub-chapter level according to inpatient separations by site.	National Health Survey 1989–90 AIHW National Hospital Morbidity Database 1993–94
Medical services		
In-hospital medical services for private, compensable and other patients	Separations weighted by DRG-based estimated medical service cost weights.	Medicare data on fees charged for eligible in-hospital medical services in 1993–94 AIHW National Hospital Morbidity Database 1993–94
Out-of-hospital medical services	GP encounters weighted by Medicare data on fees charged. Specialist referrals by GPs, weighted by Medicare data on fees charged.	Medicare data on fees charged for eligible out-of-hospital medical services in 1993–94 Australian Survey of Morbidity and Treatment in General Practice 1990–91
Pharmaceuticals		
Prescription drugs	Prescriptions weighted by relative utilisation and average prescription cost for therapeutic drug group.	Pharmaceutical Benefits Scheme utilisation and cost data for 1993–94 Australian Survey of Morbidity and Treatment in General Practice 1990–91
Over-the-counter medicines	Use of non-prescription medications in the last two weeks.	National Health Survey 1989–90
Allied health services		
	Reported visits in the last two weeks together with referrals by GPs.	National Health Survey 1989–90 Australian Survey of Morbidity and Treatment in General Practice 1990–91
Nursing homes		
	For ICD-9 chapters: number of residents by main disabling condition. Attribution to sub-chapter level on basis of distribution of transfers from acute hospitals.	ABS Survey of Disability, Ageing and Carers 1993 AIHW National Hospital Morbidity Database 1993–94
Other		
Public health	Estimated costs for breast, cervix, lung and skin cancer prevention programs. Costs of other public health programs not included as yet.	Refer to Mathers et al. (1998b) for details of cancer prevention program costing.
Research	Estimated expenditure for major disease groups from Nicholl et al. Distributed to detailed disease groups in proportion to NHMRC and other relevant funding distributions.	Nicholl et al. (1994) NHMRC (1994, 1996) DHFS & AIHW 1998
Other institutional, Administration and Other non-institutional	Allocated to disease–age–sex groups in proportion to total expenditure in other categories.	n.a.

Appendix C: Detailed tables: injury and poisoning, 1993–94

Table C.1 shows estimated resident population by age and sex at 30 June 1994, used to calculate costs per capita in this report. Tables C.2 and C.3 show total estimated health system costs and estimated health service utilisation respectively for specific types of injuries at sub-chapter level of ICD-9 by detailed health sector in 1993–94. Tables C.4 and C.5 provide similar tabulations for specific external causes. Tables C.6 and C.7 show total health system costs and estimated levels of utilisation of health services for injuries by sector, age group and sex in 1993–94.

Detailed information on total costs and health services utilisation by health sector, age, sex and major disease group for the larger cost external causes are provided in Tables C.8 to C.19 for musculoskeletal disorders. Each pair of tables shows costs and utilisation of health services by detailed health sector, age and sex for a given external cause. Tables are not included for those external causes with relatively small total health system costs. These tables are available on request from the Institute.

Table C.1: Estimated resident population of Australia, by age group and sex, 30 June 1994

Age group	Males	Females	Persons
0–4	661,464	627,683	1,289,147
5–14	1,310,151	1,243,172	2,553,323
15–24	1,396,412	1,336,297	2,732,709
25–44	2,762,031	2,761,005	5,523,036
45–64	1,842,066	1,790,447	3,632,513
65–74	596,874	672,144	1,269,018
75+	315,739	522,916	838,655
Total	8,884,737	8,953,664	17,838,401

Source: ABS 1996.

Table C.2: Type of injury: total health system costs by health sector, 1993–94 (\$ million)

Type of injury	Hospital inpatients				Medical services ^(b)		Pharmaceuticals		Allied health	Research	Other ^(c)	Total costs ^(d)
	Public hospitals ^(a)	Private hospitals	Non-inpatients	Nursing homes	GPs	Specialist	Prescrip-tor	Over-the-counter				
Fractures	359.5	60.9	90.2	69.2	27.8	40.8	4.7	4.9	9.7	15.1	30.1	713.0
Dislocation, sprains and strains	25.6	33.3	176.8	1.7	56.0	56.6	19.6	10.4	91.8	2.4	21.3	495.4
Intracranial injury, excluding skull fracture	50.7	1.8	10.6	2.6	3.2	3.1	0.4	0.6	0.6	3.9	3.3	80.9
Internal injuries ^(d)	32.9	3.1	3.1	1.1	1.1	1.1	0.3	0.2	0.3	2.1	1.9	47.3
Open wound	70.1	12.5	37.1	5.4	16.5	3.6	7.4	2.0	2.7	6.9	7.1	171.2
Superficial injuries and contusion with intact skin surface	16.9	4.3	133.6	4.3	42.0	32.0	13.7	7.4	21.3	1.3	12.4	289.2
Foreign body entering through orifice	5.5	0.7	19.1	0.5	7.4	3.5	2.5	1.0	—	0.2	1.8	42.3
Burns	32.7	1.1	16.9	0.7	6.6	1.2	2.1	1.0	—	0.4	2.8	65.6
Poisoning and toxic effects of substances	44.3	1.6	6.1	4.2	1.7	1.2	1.1	0.3	0.1	0.6	2.7	64.0
Complications of surgical and medical care	183.8	63.4	3.4	14.6	10.0	9.1	6.4	2.8	4.6	1.0	13.4	312.5
Traumatic complications, late effects	31.4	9.0	120.8	8.1	40.2	28.0	31.5	7.1	28.5	1.5	13.7	320.0
Total	853.5	191.9	617.7	112.4	212.6	180.1	89.5	37.7	159.7	35.6	110.7	2,601.3

(a) Public acute, public psychiatric and repatriation hospitals.

(b) Medical services for private patients in hospitals are included under Hospital inpatients.

(c) Includes other institutional, non-institutional and administration expenditure.

(d) Excludes expenditure for public health services, community health services, ambulances, medical aids and appliances.

Table C.3: Type of injury: estimated health service utilisation by health sector, 1993–94

ICD-9 chapter	Admissions ('000)		Bed days ('000)		Non-inpatient occasions of service ('000)	Medical services ^(b) ('000)			No. of prescriptions ('000)	Allied health consultations ('000)	Nursing home residents
	Public hospitals ^(a)	Private hospitals	Public hospitals ^(a)	Private hospitals		GPs	Specialist	Total medical			
Fractures	103.8	16.5	723.2	141.2	1,365.7	915.2	606.6	1,521.7	352.9	562.6	1,892
Dislocation, sprains and strains	14.0	13.0	45.4	30.1	2,676.9	2,309.4	889.7	3,199.1	1,372.4	5,303.7	47
Intracranial injury, excl skull fracture	24.1	0.8	68.6	4.2	160.2	125.7	36.8	162.5	20.8	33.1	72
Internal injuries ^(c)	8.0	1.0	45.6	3.4	47.0	40.2	22.8	63.0	19.5	18.0	30.0
Open wound	42.8	5.4	120.0	17.2	561.2	548.0	67.7	615.7	384.1	153.8	148
Superficial injuries and contusion with intact skin surface	5.0	0.6	8.1	0.9	288.9	251.5	57.8	309.3	221.9	0.0	14
Foreign body entering through orifice	13.6	1.8	40.6	11.3	2,022.5	1,689.8	544.1	2,233.9	884.9	1,231.2	116
Burns	6.4	0.4	49.3	2.5	256.5	267.6	32.0	299.7	160.2	0.0	20
Poisoning and toxic effects of substances	31.6	0.7	80.5	2.9	92.4	63.4	51.3	114.7	45.9	8.1	114
Complications of surgical and medical care	43.1	14.6	334.4	98.7	51.2	400.8	203.4	604.2	382.1	265.5	399
Traumatic complications, late effects	17.5	3.3	77.1	24.6	1,828.3	1,635.9	598.0	2,233.8	1,628.0	1,649.1	221
Total	309.9	58.0	1,592.9	337.1	9,351.0	8,247.5	3,110.2	11,357.7	5,472.6	9,225.1	3,074

(a) Public acute, public psychiatric and repatriation hospitals.

(b) Out-of-hospital medical services only.

(c) Internal injury of chest, abdomen, pelvis and blood vessels, crushing injuries, and nerve injuries (including spinal cord).

Table C.4: External causes of injury: total health system costs by health sector, 1993–94 (\$ million)

External cause of injury	Hospital inpatients				Medical services ^(b)		Pharmaceuticals			Allied health	Research	Other ^(c)	Total costs ^(d)
	Public hospitals ^(a)	Private hospitals	Non-inpatients	Nursing homes	GPs	Specialist	Prescription	Over-the-counter					
Unintentional injuries	785.4	188.2	561.2	106.0	194.3	163.1	82.0	34.5	142.6	33.1	101.8	2,392.3	
Road traffic accidents	132.7	7.3	90.8	3.9	29.1	26.7	11.1	5.3	26.5	22.0	15.0	370.4	
Other transport accidents	18.3	2.0	17.1	0.4	5.2	4.6	1.8	0.9	4.2	0.8	2.5	57.8	
Poisoning	17.3	0.5	2.5	2.1	0.7	0.5	0.4	0.1	0.1	0.3	1.1	25.5	
Accidental falls	262.3	59.6	175.7	76.3	59.9	52.5	22.2	10.0	48.3	4.2	34.6	805.6	
Accidents caused by fire, burns or scalds	23.3	0.7	16.9	0.8	6.6	1.2	2.1	1.0	—	0.4	2.4	55.3	
Accidental drowning and submersion	1.5	0.0	1.7	—	0.5	0.4	0.2	0.1	0.3	0.5	0.2	5.5	
Machine injuries	13.5	1.8	12.0	0.4	4.0	3.7	1.6	0.6	3.6	0.8	1.9	43.9	
Adverse effects of medical treatment ^(e)	193.3	64.9	39.8	17.0	21.9	16.2	17.7	4.9	7.0	1.0	17.3	401.1	
Other unintentional injuries	123.0	51.3	204.7	5.2	66.5	57.3	25.0	11.5	52.5	3.1	26.9	627.0	
Suicide and self-inflicted injury	30.1	0.7	16.7	2.0	5.6	5.2	2.5	1.0	4.7	0.9	3.1	72.5	
Homicide and violence	31.5	0.7	39.8	0.9	12.7	11.8	5.0	2.2	12.4	1.6	5.3	123.8	
Unspecified injury	6.5	2.2	—	3.5	—	—	—	—	—	—	0.5	12.7	
Total	853.5	191.9	617.7	112.4	212.6	180.1	89.5	37.7	159.7	35.6	110.7	2,601.3	

(a) Public acute, public psychiatric and repatriation hospitals.

(b) Medical services for private patients in hospitals are included under Hospital inpatients.

(c) Includes other institutional, non-institutional and administration expenditure.

(d) Excludes expenditure for public health services, community health services, ambulances, medical aids and appliances.

(e) Includes surgical and medical misadventure, and adverse effects of drugs in therapeutic use.

Table C.5: External causes of injury: estimated health service utilisation by health sector, 1993–94

ICD-9 chapter	Admissions ('000)		Bed days ('000)		Non-inpatient occasions of service ('000)	Medical services ^(b) ('000)			No. of prescriptions ('000)	Allied health consultations ('000)	Nursing home residents
	Public hospitals ^(a)	Private hospitals	Public hospitals ^(a)	Private hospitals		GPs	Specialist	Total medical			
Unintentional injuries	273.2	56.7	1,462.0	322.8	8,496.3	7,518.1	2,834.5	10,352.6	5,017.3	8,237.8	2,899
Road traffic accidents	39.0	2.5	223.3	14.0	1,374.4	1,143.3	418.7	1,562.1	679.1	1,531.3	106
Other transport accidents	7.2	0.7	33.0	3.3	258.4	198.4	73.1	271.5	109.9	245.5	11
Poisoning	13.8	0.3	30.5	0.9	37.9	25.9	20.1	46.0	17.4	3.3	57
Accidental falls	83.5	15.9	565.5	145.6	2,659.7	2,267.9	885.5	3,153.4	1,376.2	2,792.9	2,086
Accidents caused by fire, burns or scalds	4.6	0.2	35.8	1.7	256.5	267.6	32.0	299.7	160.2	—	21
Accidental drowning and submersion	0.7	0.0	1.7	0.0	25.4	18.9	7.0	25.9	9.5	19.3	—
Machine injuries	5.5	0.7	18.2	1.8	182.2	157.4	57.1	214.5	102.1	210.5	10
Adverse effects of medical treatment	46.9	15.1	360.5	101.2	602.7	876.5	436.6	1,313.1	959.5	402.2	465
Other unintentional injuries	72.0	21.4	193.5	54.3	3,098.9	2,562.1	904.3	3,466.5	1,603.5	3,032.9	142
Suicide and self-inflicted injury	16.5	0.3	53.8	1.3	252.2	223.4	97.2	320.6	144.9	269.3	55
Homicide and violence	18.2	0.3	50.6	0.9	602.5	505.9	178.6	684.5	310.4	718.0	23
Unspecified injury	2.0	0.7	26.4	12.1	—	—	—	—	—	—	—
Total	309.9	58.0	1,592.8	337.1	9,351.0	8,247.5	3,110.2	11,357.7	5,472.6	9,225.1	3,074

(a) Public acute, public psychiatric and repatriation hospitals.

(b) Out-of-hospital medical services only.

Table C.6: Injury and poisoning: total health system costs by health sector, sex and age, 1993–94 (\$ million)

Sex / age	Hospital inpatients					Medical services ^(b)			Pharmaceuticals			Allied health	Other ^(c)	Total costs ^(d)
	Public hospitals ^(a)	Private hospitals	Non-inpatients	Total hospital	Nursing homes	GPs	Specialist	Total medical	Prescription	Over-the-counter	Total			
Males														
0–4	19.8	0.9	28.8	49.4	—	6.4	4.3	10.7	1.1	1.7	2.8	0.6	3.8	67.3
5–14	39.3	3.8	49.9	93.0	—	16.8	10.5	27.3	3.8	3.2	7.0	4.3	7.8	139.4
15–24	89.4	15.8	120.2	225.4	0.5	22.8	16.8	39.6	7.7	3.7	11.3	23.2	17.9	318.0
25–34	73.4	14.3	58.5	146.2	4.4	21.3	18.1	39.4	8.5	3.2	11.7	22.0	13.3	237.0
35–44	51.6	10.8	36.9	99.3	0.9	16.6	13.1	29.7	7.2	2.8	10.0	10.5	9.0	159.5
45–54	42.0	9.9	25.3	77.1	1.6	12.2	11.7	23.9	5.4	1.8	7.2	6.0	6.9	122.7
55–64	42.3	10.6	18.9	71.9	1.0	8.0	7.7	15.8	4.6	1.2	5.8	7.3	6.1	107.8
65–74	57.2	13.1	22.8	93.0	15.5	5.5	5.3	10.9	3.9	1.1	5.0	2.6	7.6	134.6
75+	61.1	13.0	18.4	92.5	17.5	4.6	3.0	7.5	1.5	0.4	1.9	7.1	7.5	134.1
Total	476.0	92.1	379.6	947.8	41.5	114.1	90.6	204.8	43.6	19.1	62.7	83.7	79.9	1,420.3
Females														
0–4	13.6	0.7	15.5	29.8	—	4.4	3.2	7.6	1.4	1.2	2.7	1.8	2.5	44.4
5–14	21.0	2.1	46.0	69.1	—	12.2	11.3	23.5	2.8	3.4	6.2	6.5	6.3	111.6
15–24	33.5	5.5	37.5	76.4	2.7	14.2	11.5	25.7	5.5	2.7	8.2	12.1	7.5	132.6
25–34	29.9	6.3	36.0	72.2	—	13.4	15.7	29.1	6.8	2.8	9.6	7.4	7.1	125.5
35–44	27.9	9.1	19.6	56.6	—	14.3	14.2	28.6	7.9	2.6	10.5	19.3	6.9	121.9
45–54	25.2	9.5	24.6	59.3	2.1	10.3	8.3	18.6	5.6	1.8	7.5	9.2	5.8	102.4
55–64	30.6	9.4	14.0	54.0	—	8.9	9.0	17.9	5.7	1.6	7.3	5.8	5.1	90.1
65–74	58.4	15.9	24.7	99.0	5.3	9.2	9.3	18.5	5.7	1.5	7.2	9.3	8.3	147.6
75+	137.3	41.2	20.1	198.6	60.9	11.6	6.9	18.5	4.4	1.0	5.3	4.5	17.2	305.0
Total	377.5	99.7	238.0	715.2	70.9	98.5	89.4	187.9	45.9	18.7	64.6	76.0	66.4	1,181.0

(a) Public acute, public psychiatric and repatriation hospitals.

(b) Medical services for private patients in hospitals are included under Hospital inpatients.

(c) Includes other institutional, non-institutional and administration expenditure, and research.

(d) Excludes expenditure for public health services, community health services, ambulances, medical aids and appliances.

Table C.7: Injury and poisoning: health service utilisation by health sector, sex and age, 1993–94

Sex / age	Hospital admissions ('000)			Hospital bed days ('000)			Non-inpatient occasions of service ('000)	Medical services ^(b) ('000)			No. of prescriptions ('000)	Allied health consultations ('000)	Nursing home residents
	Public hospitals ^(a)	Private hospitals	Total hospital	Public hospitals ^(a)	Private hospitals	Total hospital		GPs	Specialist	Total medical			
Males													
0–4	12.6	0.7	13.3	29.9	0.9	30.8	435.5	235.9	79.6	315.5	61.4	36.4	—
5–14	24.4	2.5	26.9	59.4	4.1	63.5	755.2	584.7	198.3	783.0	195.8	250.3	—
15–24	41.9	6.9	48.8	135.7	13.3	149.0	1,819.5	842.9	280.2	1,123.1	493.0	1,342.9	13
25–34	32.3	5.8	38.1	115.9	13.6	129.4	886.0	825.1	265.7	1,090.8	556.8	1,269.4	121
35–44	21.3	4.2	25.6	87.3	11.6	98.9	558.6	668.3	209.4	877.7	458.6	608.2	26
45–54	15.0	3.5	18.5	72.7	12.3	85.0	382.5	484.3	194.5	678.7	335.6	344.5	43
55–64	11.9	3.0	14.9	77.4	14.7	92.1	286.4	323.0	124.5	447.5	281.2	420.4	28
65–74	12.5	3.0	15.5	107.9	23.0	130.9	344.7	234.3	105.8	340.2	227.3	153.1	424
75+	11.9	2.5	14.4	135.9	30.0	165.9	279.1	161.4	54.7	216.1	96.5	408.1	479
Total	183.7	32.2	216.0	822.1	123.6	945.6	5,747.5	4,360.0	1,512.7	5,872.7	2,706.2	4,833.2	1,134
Females													
0–4	9.0	0.6	9.6	20.7	0.8	21.5	234.4	170.0	62.5	232.5	109.7	104.6	—
5–14	13.7	1.5	15.2	30.6	2.2	32.7	697.2	440.9	197.1	638.1	165.8	375.9	—
15–24	17.4	2.2	19.6	52.8	5.3	58.1	567.1	602.9	196.5	799.4	347.8	700.9	73
25–34	14.9	2.5	17.4	49.3	7.0	56.2	545.5	592.2	236.5	828.7	426.4	429.9	—
35–44	12.6	3.3	15.8	48.5	13.1	61.6	296.7	577.9	228.8	806.6	447.0	1,117.3	—
45–54	9.8	3.0	12.8	46.2	14.0	60.1	371.9	411.8	157.7	569.6	347.3	531.2	57
55–64	9.0	2.6	11.6	60.2	15.2	75.4	212.2	333.9	173.9	507.8	339.2	332.7	—
65–74	13.4	3.4	16.9	125.4	31.9	157.3	374.2	351.9	188.3	540.2	307.8	540.0	144
75+	26.3	6.7	33.1	337.0	124.1	461.2	304.4	405.9	156.2	562.2	275.5	259.5	1,666
Total	126.2	25.8	152.0	770.8	213.6	984.4	3,603.5	3,887.5	1,597.5	5,485.0	2,766.4	4,392.0	1,940

(a) Public acute, public psychiatric and repatriation hospitals.

(b) Out-of-hospital medical services only.

Table C.8: Unintentional injuries: total health system costs by health sector, sex and age, 1993–94 (\$ million)

Sex / age	Hospital inpatients			Total hospital	Nursing homes	Medical services ^(b)			Pharmaceuticals			Allied health	Other ^(c)	Total costs ^(d)
	Public hospitals ^(a)	Private hospitals	Non-inpatients			GPs	Specialist	Total medical	Prescription	Over-the-counter	Total			
Males														
0–4	19.0	0.9	28.0	47.9	—	6.2	4.2	10.4	1.1	1.6	2.7	0.6	3.5	65.2
5–14	38.4	3.8	49.0	91.2	—	16.5	10.3	26.8	3.7	3.1	6.8	4.3	7.9	137.0
15–24	77.7	15.5	103.5	196.8	0.3	19.7	14.4	34.2	6.7	3.2	9.9	20.0	17.5	278.5
25–34	61.2	14.1	49.4	124.6	3.7	18.1	15.2	33.3	7.2	2.7	10.0	18.2	12.1	201.8
35–44	44.3	10.7	32.0	87.0	0.7	14.6	11.3	25.9	6.4	2.4	8.8	9.1	8.2	139.8
45–54	38.1	9.7	23.0	70.9	1.4	11.1	10.7	21.8	4.9	1.7	6.6	5.4	6.4	112.5
55–64	40.8	10.6	17.9	69.3	1.0	7.7	7.4	15.1	4.4	1.2	5.5	6.9	5.6	103.5
65–74	55.4	12.9	21.9	90.2	14.9	5.4	5.2	10.5	3.8	1.1	4.9	2.6	6.7	129.8
75+	59.3	12.8	18.1	90.1	16.8	4.5	2.9	7.4	1.5	0.4	1.8	7.0	6.6	129.6
Total	434.4	90.9	342.8	868.0	38.8	103.8	81.6	185.3	39.7	17.4	57.1	74.0	74.4	1,297.7
Females														
0–4	13.1	0.7	14.9	28.7	—	4.3	3.1	7.3	1.4	1.2	2.6	1.8	2.3	42.7
5–14	20.3	2.1	45.3	67.7	—	12.0	11.1	23.1	2.8	3.4	6.1	6.4	6.5	109.8
15–24	27.0	5.4	31.8	64.2	1.9	12.0	9.7	21.7	4.7	2.3	7.0	10.0	7.5	112.4
25–34	23.5	6.2	29.2	58.9	—	11.0	12.9	24.0	5.8	2.3	8.1	5.9	6.3	103.1
35–44	23.5	8.9	16.9	49.3	—	12.5	12.3	24.8	6.9	2.3	9.2	16.6	6.2	106.1
45–54	23.1	9.4	22.7	55.2	1.9	9.6	7.8	17.4	5.3	1.7	7.0	8.5	5.3	95.5
55–64	29.4	9.3	13.5	52.2	—	8.6	8.7	17.3	5.5	1.6	7.0	5.6	4.6	86.8
65–74	57.0	15.6	24.3	96.9	5.1	9.0	9.1	18.2	5.6	1.5	7.1	9.3	7.3	143.8
75+	134.1	39.8	19.8	193.7	58.3	11.5	6.8	18.3	4.3	0.9	5.3	4.5	14.4	294.4
Total	351.0	97.4	218.4	666.8	67.2	90.6	81.5	172.1	42.3	17.1	59.4	68.6	60.5	1,094.6

(a) Public acute, public psychiatric and repatriation hospitals.

(b) Medical services for private patients in hospitals are included under Hospital inpatients.

(c) Includes other institutional, non-institutional and administration expenditure, and research.

(d) Excludes expenditure for public health services, community health services, ambulances, medical aids and appliances.

Table C.9: Unintentional injuries: health service utilisation by health sector, sex and age, 1993–94

Sex / age	Hospital admissions ('000)			Hospital bed days ('000)			Non-inpatient occasions of service ('000)	Medical services ^(b) ('000)			No. of prescriptions ('000)	Allied health consultations ('000)	Nursing home residents
	Public hospitals ^(a)	Private hospitals	Total hospital	Public hospitals ^(a)	Private hospitals	Total hospital		GPs	Specialist	Total medical			
Males													
0–4	12.3	0.7	13.0	28.4	0.9	29.4	424.1	229.4	78.1	307.5	60.2	35.6	—
5–14	23.8	2.5	26.3	57.9	4.0	61.9	741.7	574.7	194.7	769.3	192.6	246.0	—
15–24	34.6	6.8	41.4	118.5	12.9	131.4	1,567.5	730.0	239.3	969.3	432.6	1,153.1	9
25–34	25.6	5.8	31.3	96.4	13.2	109.6	747.5	699.9	224.5	924.3	476.7	1,050.6	100
35–44	17.6	4.2	21.8	74.4	11.4	85.7	485.0	586.8	179.3	766.1	406.0	526.9	20
45–54	13.3	3.4	16.7	66.3	11.9	78.3	348.4	442.7	177.7	620.3	308.8	311.4	39
55–64	11.3	3.0	14.2	74.1	14.5	88.6	271.5	309.0	116.4	425.4	269.0	400.2	27
65–74	12.1	3.0	15.0	103.8	22.6	126.4	331.2	227.8	101.2	329.0	221.3	147.8	408
75+	11.5	2.4	13.9	129.2	28.5	157.7	273.3	158.2	54.2	212.4	95.5	402.0	459
Total	162.0	31.7	193.8	749.0	120.0	869.0	5,190.2	3,958.4	1,365.2	5,323.7	2,462.7	4,273.7	1,062
Females													
0–4	8.8	0.6	9.4	19.6	0.8	20.4	225.0	164.3	59.0	223.3	108.7	101.9	—
5–14	13.3	1.4	14.7	29.5	2.1	31.7	685.7	433.9	193.8	627.8	163.2	369.3	—
15–24	12.8	2.2	15.0	42.3	5.0	47.3	481.3	512.4	169.8	682.2	301.0	578.5	52
25–34	10.7	2.4	13.2	38.2	6.8	45.0	442.4	487.9	197.4	685.3	361.1	342.3	—
35–44	9.8	3.2	12.9	40.7	12.7	53.4	255.3	502.8	200.1	703.0	390.2	960.1	—
45–54	8.5	3.0	11.5	41.7	13.6	55.4	344.3	385.6	146.2	531.7	326.9	493.5	53
55–64	8.5	2.5	11.0	57.3	14.9	72.2	204.8	323.3	167.3	490.6	327.5	324.9	—
65–74	13.1	3.3	16.4	121.0	30.7	151.7	367.3	347.0	184.0	531.1	302.8	535.1	139
75+	25.6	6.4	32.0	322.7	116.1	438.8	300.1	402.6	151.5	554.1	273.1	258.5	1,593
Total	111.1	25.0	136.2	713.0	202.8	915.8	3,306.1	3,559.7	1,469.2	5,029.0	2,554.6	3,964.1	1,837

(a) Public acute, public psychiatric and repatriation hospitals.

(b) Out-of-hospital medical services only.

Table C.10: Road traffic accidents: total health system costs by health sector, sex and age, 1993–94 (\$ million)

Sex / age	Hospital inpatients			Nursing homes	Medical services ^(b)			Pharmaceuticals			Allied health	Other ^(c)	Total costs ^(d)	
	Public hospitals ^(a)	Private hospitals	Non-inpatients		Total hospital	GPs	Specialist	Total medical	Prescription	Over-the-counter				Total
Males														
0–4	1.8	0.0	1.7	3.5	—	0.4	0.3	0.7	0.1	0.1	0.2	0.0	0.5	4.9
5–14	8.4	0.3	7.3	16.0	—	2.4	1.6	4.0	0.5	0.5	1.0	0.6	2.4	24.0
15–24	28.3	1.1	22.8	52.1	0.2	4.2	3.3	7.5	1.4	0.7	2.1	4.6	7.4	73.9
25–34	17.7	0.7	8.6	27.0	0.6	3.0	2.7	5.7	1.1	0.5	1.6	3.5	4.3	42.7
35–44	10.8	0.6	4.8	16.2	0.1	2.1	1.8	3.9	0.9	0.4	1.2	1.5	2.5	25.4
45–54	6.7	0.5	3.1	10.3	0.1	1.4	1.5	2.9	0.6	0.2	0.8	0.8	1.7	16.5
55–64	5.4	0.3	2.2	7.9	0.1	0.9	0.9	1.8	0.4	0.1	0.5	1.0	1.3	12.5
65–74	4.7	0.3	2.1	7.1	0.6	0.4	0.5	0.9	0.3	0.1	0.4	0.3	1.0	10.4
75+	4.0	0.2	1.3	5.5	0.3	0.3	0.2	0.4	0.1	0.0	0.1	0.6	0.8	7.7
Total	87.7	4.1	53.9	145.7	1.9	15.0	12.8	27.8	5.3	2.5	7.8	13.0	21.8	218.0
Females														
0–4	1.2	0.0	0.9	2.1	—	0.3	0.2	0.5	0.1	0.1	0.1	0.1	0.3	3.2
5–14	5.1	0.2	8.2	13.5	—	2.1	2.1	4.2	0.5	0.6	1.1	1.2	2.2	22.3
15–24	11.6	0.6	10.1	22.3	1.1	3.7	3.3	7.1	1.3	0.7	2.0	3.9	4.0	40.3
25–34	6.6	0.4	6.8	13.8	—	2.4	2.8	5.2	1.0	0.5	1.5	1.5	2.4	24.4
35–44	5.0	0.6	3.4	9.1	—	2.4	2.4	4.8	1.3	0.4	1.7	3.6	2.1	21.3
45–54	3.7	0.4	3.7	7.8	0.2	1.4	1.1	2.5	0.8	0.2	1.0	1.6	1.5	14.5
55–64	3.2	0.2	1.5	4.9	—	0.9	1.0	2.0	0.5	0.1	0.6	0.6	0.9	9.1
65–74	4.4	0.3	1.7	6.5	0.1	0.6	0.6	1.2	0.3	0.1	0.4	0.8	1.0	9.9
75+	4.2	0.5	0.5	5.3	0.6	0.3	0.2	0.5	0.1	0.0	0.1	0.1	0.7	7.4
Total	45.1	3.2	36.9	85.2	2.0	14.1	13.9	28.0	5.7	2.8	8.5	13.5	15.3	152.5

(a) Public acute, public psychiatric and repatriation hospitals.

(b) Medical services for private patients in hospitals are included under Hospital inpatients.

(c) Includes other institutional, non-institutional and administration expenditure, and research.

(d) Excludes expenditure for public health services, community health services, ambulances, medical aids and appliances.

Table C.11: Road traffic accidents: health service utilisation by health sector, sex and age, 1993–94

Sex / age	Hospital admissions ('000)			Hospital bed days ('000)			Non-inpatient occasions of service ('000)	Medical services ^(b) ('000)			No. of prescriptions ('000)	Allied health consultations ('000)	Nursing home residents
	Public hospitals ^(a)	Private hospitals	Total hospital	Public hospitals ^(a)	Private hospitals	Total hospital		GPs	Specialist	Total medical			
Males													
0–4	0.7	0.0	0.7	2.5	0.0	2.5	26.3	13.3	5.2	18.6	3.9	2.6	—
5–14	3.6	0.2	3.8	13.5	0.5	14.0	110.7	82.7	29.8	112.5	26.0	34.9	—
15–24	8.4	0.4	8.7	43.7	1.3	45.0	345.2	155.7	55.0	210.6	83.1	266.5	5
25–34	4.9	0.3	5.2	29.6	1.0	30.6	129.8	117.1	39.0	156.1	74.0	204.1	17
35–44	2.8	0.2	3.0	18.7	0.9	19.6	73.3	84.5	26.9	111.3	54.9	86.5	2
45–54	1.7	0.2	1.9	11.3	0.8	12.1	46.5	55.8	23.9	79.7	36.2	47.1	2
55–64	1.1	0.1	1.2	8.9	0.5	9.4	32.8	34.7	13.7	48.4	26.3	56.1	3
65–74	0.9	0.1	0.9	8.1	0.6	8.7	32.2	18.9	7.6	26.5	19.8	18.4	16
75+	0.7	0.1	0.8	7.1	0.6	7.6	19.1	9.6	2.7	12.3	5.5	33.1	8
Total	24.7	1.4	26.2	143.5	6.1	149.6	815.9	572.2	203.8	776.0	329.8	749.4	53
Females													
0–4	0.4	0.0	0.5	1.8	0.0	1.9	14.2	10.1	3.7	13.8	3.1	8.1	—
5–14	2.4	0.1	2.5	7.5	0.2	7.7	124.2	76.2	35.8	112.0	27.3	72.0	—
15–24	4.0	0.2	4.2	19.0	0.8	19.8	152.7	159.9	48.6	208.5	81.0	223.1	29
25–34	2.2	0.1	2.3	11.0	0.7	11.6	102.6	103.0	39.8	142.8	62.9	89.3	—
35–44	1.6	0.1	1.7	9.1	2.7	11.7	52.0	95.3	34.9	130.3	71.6	207.4	—
45–54	1.2	0.1	1.3	7.6	0.6	8.2	55.7	57.9	18.4	76.3	46.8	92.1	6
55–64	0.9	0.1	1.0	6.1	0.5	6.6	22.6	34.6	17.7	52.3	32.6	37.0	—
65–74	0.8	0.1	1.0	8.5	0.9	9.4	26.2	22.7	12.2	34.9	17.3	44.9	3
75+	0.8	0.1	0.9	9.3	1.5	10.8	8.3	11.4	3.9	15.4	6.8	8.0	16
Total	14.3	1.0	15.3	79.8	7.9	87.8	558.5	571.1	215.0	786.1	349.3	781.9	54

(a) Public acute, public psychiatric and repatriation hospitals.

(b) Out-of-hospital medical services only.

Table C.12: Accidental falls: total health system costs by health sector, sex and age, 1993–94 (\$ million)

Sex / age	Hospital inpatients			Total hospital	Nursing homes	Medical services ^(b)			Pharmaceuticals			Allied health	Other ^(c)	Total costs ^(d)
	Public hospitals ^(a)	Private hospitals	Non-inpatients			GPs	Specialist	Total medical	Prescription	Over-the-counter	Total			
Males														
0–4	4.8	0.3	10.3	15.4	—	2.1	1.8	3.9	0.5	0.5	1.0	0.3	1.0	21.5
5–14	11.0	1.5	20.1	32.6	—	6.6	4.4	11.0	1.4	1.3	2.7	1.7	2.4	50.3
15–24	9.4	2.7	17.1	29.2	0.0	3.2	2.5	5.7	1.0	0.5	1.5	3.5	2.0	42.0
25–34	8.1	2.0	7.8	17.9	0.8	2.7	2.5	5.2	1.0	0.4	1.5	3.2	1.4	30.0
35–44	7.6	1.7	6.4	15.7	0.1	2.7	2.4	5.1	1.1	0.5	1.6	2.0	1.2	25.7
45–54	8.0	1.6	5.8	15.4	0.6	2.6	2.8	5.4	1.1	0.4	1.5	1.5	1.2	25.8
55–64	8.3	1.4	5.3	15.0	0.5	2.1	2.3	4.4	0.9	0.3	1.2	2.4	1.2	24.7
65–74	14.9	1.8	8.6	25.4	8.9	1.8	2.0	3.8	1.3	0.3	1.6	1.3	2.1	43.1
75+	30.6	5.0	10.5	46.1	12.3	2.3	1.4	3.7	0.7	0.2	0.9	4.8	3.4	71.1
Total	102.7	18.1	92.0	212.8	23.2	26.1	22.0	48.1	9.1	4.4	13.5	20.6	16.1	334.2
Females														
0–4	3.3	0.2	5.9	9.5	—	1.7	1.3	2.9	0.4	0.4	0.8	0.9	0.7	14.9
5–14	6.1	0.9	21.0	28.0	—	5.4	5.4	10.8	1.2	1.5	2.8	3.2	2.3	47.1
15–24	2.4	0.8	4.6	7.7	0.1	1.7	1.5	3.2	0.6	0.3	0.9	1.7	0.7	14.4
25–34	2.8	0.8	5.6	9.2	—	2.0	2.3	4.3	0.8	0.4	1.2	1.3	0.8	16.8
35–44	3.7	1.1	4.4	9.2	—	3.0	3.1	6.1	1.6	0.6	2.2	4.6	1.1	23.1
45–54	5.5	1.7	8.0	15.1	0.9	3.1	2.4	5.5	1.6	0.5	2.1	3.5	1.4	28.4
55–64	10.0	2.6	6.4	18.9	—	4.0	4.4	8.4	2.0	0.6	2.6	2.7	1.7	34.3
65–74	27.0	6.0	14.5	47.5	3.7	5.0	5.3	10.3	2.3	0.7	3.0	6.5	3.6	74.5
75+	98.8	27.5	13.4	139.7	48.4	8.0	4.8	12.8	2.4	0.6	3.0	3.4	10.5	217.7
Total	159.6	41.5	83.7	284.8	53.1	33.9	30.5	64.3	13.1	5.6	18.7	27.8	22.7	471.3

(a) Public acute, public psychiatric and repatriation hospitals.

(b) Medical services for private patients in hospitals are included under Hospital inpatients.

(c) Includes other institutional, non-institutional and administration expenditure, and research.

(d) Excludes expenditure for public health services, community health services, ambulances, medical aids and appliances.

Table C.13: Accidental falls: health service utilisation by health sector, sex and age, 1993–94

Sex / age	Hospital admissions ('000)			Hospital bed days ('000)			Non-inpatient occasions of service ('000)	Medical services ^(b) ('000)			No. of prescriptions ('000)	Allied health consultations ('000)	Nursing home residents
	Public hospitals ^(a)	Private hospitals	Total hospital	Public hospitals ^(a)	Private hospitals	Total hospital		GPs	Specialist	Total medical			
Males													
0–4	3.7	0.2	4.0	7.3	0.4	7.6	155.2	78.6	30.8	109.4	23.2	15.1	—
5–14	9.3	1.1	10.5	16.5	1.6	18.1	304.3	227.1	82.0	309.1	71.5	96.0	—
15–24	5.1	1.4	6.6	15.6	2.4	18.0	259.4	117.0	41.3	158.3	62.4	200.3	1
25–34	3.8	0.9	4.7	14.1	1.8	15.9	118.2	106.6	35.5	142.1	67.4	185.9	21
35–44	3.3	0.7	4.0	14.8	1.9	16.7	96.8	111.5	35.5	147.0	72.4	114.2	2
45–54	2.9	0.6	3.5	17.0	2.1	19.0	87.9	105.5	45.1	150.6	68.4	89.0	17
55–64	2.6	0.4	3.0	17.5	2.4	19.9	80.6	85.3	33.7	119.1	64.7	138.1	13
65–74	3.3	0.5	3.8	32.2	4.3	36.4	130.4	76.8	30.8	107.5	80.4	74.6	244
75+	5.5	0.9	6.4	72.1	14.1	86.2	159.6	80.0	22.8	102.9	46.3	276.6	336
Total	39.5	6.8	46.4	207.0	30.9	238.0	1,392.3	988.4	357.5	1,345.8	556.8	1,189.6	635
Females													
0–4	2.7	0.2	2.9	4.9	0.3	5.1	90.0	64.1	23.5	87.6	19.6	51.6	—
5–14	5.7	0.7	6.4	9.0	1.0	10.0	318.1	195.1	91.6	286.7	69.8	184.4	—
15–24	1.5	0.4	1.9	3.9	0.7	4.6	69.0	72.3	22.0	94.2	36.6	100.8	4
25–34	1.6	0.4	1.9	4.8	0.9	5.7	85.0	85.3	33.0	118.3	52.1	74.0	—
35–44	1.7	0.4	2.2	6.8	1.4	8.2	66.1	121.1	44.4	165.5	91.0	263.4	—
45–54	2.2	0.6	2.8	10.3	3.0	13.3	120.5	125.4	39.7	165.2	101.4	199.4	24
55–64	3.3	0.8	4.1	20.5	4.9	25.4	96.3	147.4	75.2	222.6	138.8	157.7	—
65–74	6.6	1.4	8.0	60.8	14.5	75.3	219.4	189.5	102.1	291.6	144.7	375.2	101
75+	18.6	4.3	22.9	237.4	88.0	325.4	203.1	279.2	96.5	375.8	165.5	196.8	1,323
Total	44.0	9.1	53.0	358.5	114.6	473.1	1,267.4	1,279.5	528.0	1,807.5	819.3	1,603.3	1,451

(a) Public acute, public psychiatric and repatriation hospitals.

(b) Out-of-hospital medical services only.

Table C.14: Adverse effects of medical treatment: total health system costs by health sector, sex and age, 1993–94 (\$ million)

Sex / age	Hospital inpatients			Medical services ^(b)					Pharmaceuticals			Allied health	Other ^(c)	Total costs ^(d)	
	Public hospitals ^(a)	Private hospitals	Non-inpatients	Total hospital	Nursing homes	GPs	Specialist	Total medical	Prescription	Over-the-counter	Total				
Males															
0–4	2.9	0.1	2.8	5.8	—	0.7	0.3	1.1	0.0	0.4	0.4	0.1	0.4	7.7	
5–14	3.3	0.3	0.6	4.2	—	0.5	0.2	0.7	0.3	0.1	0.4	0.5	0.3	6.0	
15–24	6.9	1.2	0.7	8.8	0.0	0.4	0.2	0.6	0.3	0.0	0.4	0.6	0.5	10.9	
25–34	7.3	1.8	0.8	9.9	0.6	0.7	0.5	1.2	0.6	0.1	0.8	—	0.6	13.1	
35–44	7.2	2.3	1.2	10.7	0.3	0.9	0.5	1.4	0.9	0.2	1.0	0.5	0.7	14.6	
45–54	10.4	3.3	1.1	14.9	0.6	1.1	0.4	1.5	0.6	0.2	0.9	0.1	0.9	18.8	
55–64	18.1	6.0	1.1	25.2	0.3	0.9	0.4	1.3	1.4	0.3	1.7	0.3	1.4	30.1	
65–74	29.4	9.0	4.6	43.0	4.4	1.7	1.3	3.1	1.2	0.4	1.6	0.1	2.5	54.7	
75+	19.6	6.6	3.2	29.4	3.1	1.3	1.0	2.3	0.5	0.1	0.6	0.6	1.7	37.8	
Total	105.1	30.5	16.2	151.8	9.4	8.3	5.0	13.2	6.0	1.8	7.7	2.7	8.8	193.7	
Females															
0–4	1.4	0.1	1.4	2.9	—	0.5	0.3	0.8	0.6	0.2	0.8	—	0.2	4.7	
5–14	2.8	0.2	1.0	4.1	—	0.5	0.1	0.6	0.1	0.1	0.2	—	0.2	5.1	
15–24	4.5	0.9	4.2	9.6	0.3	1.7	1.0	2.7	1.1	0.3	1.4	—	0.7	14.6	
25–34	6.7	2.2	2.7	11.7	—	1.8	2.2	4.0	1.8	0.5	2.2	0.3	0.9	19.1	
35–44	8.6	4.7	1.4	14.7	—	1.8	1.7	3.5	1.4	0.3	1.6	1.3	1.0	22.2	
45–54	9.4	5.4	2.8	17.5	0.5	1.8	1.7	3.6	1.3	0.4	1.7	0.4	1.1	24.8	
55–64	11.9	4.9	2.3	19.1	—	1.7	1.2	2.8	1.8	0.5	2.4	1.1	1.2	26.6	
65–74	20.4	7.6	3.8	31.7	1.0	1.9	1.9	3.8	2.3	0.5	2.8	0.5	1.9	41.7	
75+	22.5	8.4	3.9	34.8	5.9	1.9	1.2	3.2	1.4	0.2	1.7	0.6	2.2	48.4	
Total	88.2	34.4	23.6	146.2	7.6	13.6	11.3	24.9	11.8	3.1	14.9	4.2	9.4	207.3	

(a) Public acute, public psychiatric and repatriation hospitals.

(b) Medical services for private patients in hospitals are included under Hospital inpatients.

(c) Includes other institutional, non-institutional and administration expenditure, and research.

(d) Excludes expenditure for public health services, community health services, ambulances, medical aids and appliances.

Table C.15: Adverse effects of medical treatment: health service utilisation by health sector, sex and age, 1993–94

Sex / age	Hospital admissions ('000)			Hospital bed days ('000)			Non-inpatient occasions of service ('000)	Medical services ^(b) ('000)			No. of prescriptions ('000)	Allied health consultations ('000)	Nursing home residents
	Public hospitals ^(a)	Private hospitals	Total hospital	Public hospitals ^(a)	Private hospitals	Total hospital		GPs	Specialist	Total medical			
Males													
0–4	1.1	0.1	1.2	4.6	0.1	4.8	42.8	29.1	9.7	38.8	2.5	4.1	—
5–14	1.2	0.1	1.3	4.9	0.3	5.3	9.1	19.8	5.3	25.1	15.0	28.4	—
15–24	2.0	0.4	2.5	11.8	1.3	13.1	11.1	15.9	3.7	19.7	23.9	35.6	1
25–34	2.2	0.6	2.8	12.8	2.5	15.4	12.8	27.6	13.3	40.9	31.7	—	17
35–44	2.3	0.7	3.0	13.1	3.3	16.4	18.5	39.7	18.0	57.7	43.4	27.7	8
45–54	2.8	0.8	3.7	18.2	5.0	23.2	17.0	40.6	12.1	52.7	36.3	6.0	17
55–64	4.0	1.3	5.3	31.8	8.3	40.1	16.5	38.1	10.7	48.8	62.9	14.5	8
65–74	5.6	1.8	7.4	51.8	15.0	66.8	69.3	71.5	41.5	113.0	61.9	7.3	121
75+	3.8	1.2	5.0	39.4	11.6	51.0	48.7	45.8	21.8	67.6	30.5	33.2	86
Total	25.1	7.0	32.1	188.4	47.6	236.1	245.9	328.1	136.2	464.3	308.1	156.7	257
Females													
0–4	0.6	0.1	0.6	2.6	0.2	2.8	21.1	20.5	4.2	24.7	66.6	—	—
5–14	0.9	0.1	1.1	4.2	0.3	4.5	15.0	15.9	7.2	23.1	10.5	—	—
15–24	1.6	0.4	2.0	7.1	1.1	8.2	63.9	72.0	40.3	112.3	73.7	—	7
25–34	2.4	0.8	3.2	11.1	2.9	14.1	41.4	83.0	44.2	127.2	106.6	19.6	—
35–44	2.9	1.5	4.4	14.7	6.2	20.9	21.6	73.0	44.6	117.7	69.6	75.6	—
45–54	2.7	1.5	4.2	16.3	7.7	24.0	42.0	74.0	43.5	117.5	76.1	21.5	13
55–64	2.7	1.1	3.8	23.0	7.4	30.4	35.2	62.8	35.8	98.6	79.2	62.9	—
65–74	3.9	1.3	5.2	40.5	11.9	52.4	57.0	75.9	42.7	118.6	96.6	31.5	27
75+	4.0	1.3	5.3	52.4	15.9	68.4	59.5	71.2	37.8	109.0	72.6	34.4	161
Total	21.8	8.1	29.8	172.1	53.5	225.6	356.9	548.4	300.4	848.8	651.4	245.5	208

(a) Public acute, public psychiatric and repatriation hospitals.

(b) Out-of-hospital medical services only.

Table C.16: Suicide and self-inflicted injury: total health system costs by health sector, sex and age, 1993–94 (\$ million)

Sex / age	Hospital inpatients			Total hospital	Nursing homes	Medical services ^(b)			Pharmaceuticals			Allied health	Other ^(c)	Total costs ^(d)
	Public hospitals ^(a)	Private hospitals	Non-inpatients			GPs	Specialist	Total medical	Prescription	Over-the-counter	Total			
Males														
0–4	0.1	—	0.3	0.4	—	0.1	0.0	0.1	0.0	0.0	0.0	0.0	0.0	0.6
5–14	0.2	0.0	0.1	0.3	—	0.0	0.0	0.1	0.0	0.0	0.0	0.0	0.0	0.4
15–24	3.5	0.1	3.1	6.7	0.0	0.5	0.4	1.0	0.2	0.1	0.3	0.5	0.5	8.9
25–34	4.6	0.0	1.9	6.5	0.8	0.7	0.6	1.3	0.3	0.1	0.4	0.8	0.6	10.3
35–44	3.0	0.0	1.3	4.3	0.2	0.5	0.5	1.0	0.2	0.1	0.3	0.3	0.3	6.3
45–54	1.5	0.1	0.6	2.1	0.1	0.3	0.2	0.5	0.1	0.0	0.2	0.1	0.2	3.1
55–64	0.6	0.0	0.4	1.0	—	0.1	0.2	0.3	0.1	0.0	0.1	0.1	0.1	1.6
65–74	0.8	0.0	0.5	1.3	0.2	0.1	0.1	0.2	0.0	0.0	0.1	0.0	0.1	1.9
75+	0.6	0.0	0.3	0.9	0.1	0.1	0.0	0.1	0.0	0.0	0.0	0.1	0.1	1.3
Total	14.9	0.3	8.4	23.6	1.4	2.4	2.0	4.4	1.0	0.4	1.4	2.0	1.9	34.6
Females														
0–4	0.1	0.0	0.4	0.4	—	0.1	0.0	0.1	0.0	0.0	0.0	0.0	0.0	0.6
5–14	0.4	0.0	0.4	0.8	—	0.1	0.1	0.2	0.0	0.0	0.0	0.1	0.1	1.1
15–24	4.3	0.1	2.4	6.7	0.4	0.9	0.7	1.6	0.4	0.2	0.5	0.9	0.6	10.7
25–34	3.8	0.1	2.3	6.2	—	0.8	0.9	1.7	0.4	0.2	0.5	0.5	0.5	9.4
35–44	3.0	0.1	1.0	4.2	—	0.7	0.7	1.4	0.4	0.1	0.5	0.9	0.4	7.4
45–54	1.5	0.1	0.9	2.5	0.1	0.3	0.3	0.6	0.1	0.1	0.2	0.3	0.2	3.8
55–64	0.8	0.0	0.3	1.2	—	0.2	0.2	0.3	0.2	0.0	0.2	0.1	0.1	1.9
65–74	0.7	0.0	0.4	1.1	0.1	0.1	0.2	0.3	0.1	0.0	0.1	0.0	0.1	1.6
75+	0.6	0.1	0.2	0.9	0.1	0.1	0.1	0.2	0.0	0.0	0.0	0.0	0.1	1.3
Total	15.3	0.4	8.2	23.9	0.6	3.2	3.1	6.3	1.6	0.6	2.2	2.7	2.1	37.8

(a) Public acute, public psychiatric and repatriation hospitals.

(b) Medical services for private patients in hospitals are included under Hospital inpatients.

(c) Includes other institutional, non-institutional and administration expenditure, and research.

(d) Excludes expenditure for public health services, community health services, ambulances, medical aids and appliances.

Table C.17: Suicide and self-inflicted injury: health service utilisation by health sector, sex and age, 1993–94

Sex / age	Hospital admissions ('000)			Hospital bed days ('000)			Non-inpatient occasions of service ('000)	Medical services ^(b) ('000)			No. of prescriptions ('000)	Allied health consultations ('000)	Nursing home residents
	Public hospitals ^(a)	Private hospitals	Total hospital	Public hospitals ^(a)	Private hospitals	Total hospital		GPs	Specialist	Total medical			
Males													
0–4	0.0	—	0.0	0.1	—	0.1	4.8	3.2	0.2	3.4	0.1	0.1	—
5–14	0.1	0.0	0.1	0.3	0.0	0.3	2.0	1.5	0.5	2.0	0.5	0.6	—
15–24	2.0	0.0	2.1	5.7	0.1	5.8	46.2	20.1	8.1	28.2	10.9	30.9	1
25–34	2.3	0.0	2.3	7.6	0.1	7.7	28.8	26.3	8.3	34.6	17.6	46.2	21
35–44	1.5	0.0	1.5	5.4	0.1	5.5	18.9	18.6	10.2	28.8	11.8	16.9	4
45–54	0.7	0.0	0.7	2.4	0.2	2.6	8.5	10.9	3.7	14.6	6.8	7.2	2
55–64	0.2	0.0	0.2	1.1	0.0	1.1	6.6	5.2	4.6	9.8	5.5	5.9	—
65–74	0.2	0.0	0.2	1.5	0.1	1.6	7.9	3.2	3.3	6.5	2.4	2.0	6
75+	0.1	0.0	0.1	1.8	0.0	1.8	4.1	2.4	0.3	2.7	0.5	3.2	4
Total	7.1	0.1	7.2	26.1	0.6	26.6	127.8	91.3	39.1	130.4	56.3	113.1	38
Females													
0–4	0.0	0.0	0.0	0.1	0.0	0.1	5.3	2.8	2.3	5.2	0.1	0.3	—
5–14	0.3	0.0	0.3	0.7	0.0	0.7	5.5	3.4	1.6	5.0	1.2	3.2	—
15–24	3.0	0.0	3.1	7.0	0.2	7.2	35.9	38.2	10.8	49.0	20.2	49.3	11
25–34	2.5	0.0	2.5	6.5	0.1	6.6	34.1	35.2	12.3	47.5	23.0	27.6	—
35–44	1.9	0.1	2.0	5.4	0.2	5.6	15.6	27.8	11.4	39.1	21.3	54.5	—
45–54	0.9	0.0	0.9	3.1	0.1	3.2	13.9	12.0	7.0	19.0	8.9	14.9	2
55–64	0.3	0.0	0.4	1.9	0.0	2.0	4.8	6.7	4.5	11.2	7.9	3.6	—
65–74	0.2	0.0	0.2	1.5	0.1	1.6	5.4	3.6	3.6	7.2	4.1	2.4	2
75+	0.1	0.0	0.2	1.4	0.1	1.5	3.8	2.5	4.5	7.0	1.9	0.4	3
Total	9.3	0.2	9.5	27.7	0.7	28.5	124.4	132.1	58.0	190.1	88.6	156.2	17

(a) Public acute, public psychiatric and repatriation hospitals.

(b) Out-of-hospital medical services only.

Table C.18: Homicide and violence: total health system costs by health sector, sex and age, 1993–94 (\$ million)

Sex / age	Hospital inpatients			Total hospital	Nursing homes	Medical services ^(b)			Pharmaceuticals			Allied health	Other ^(c)	Total costs ^(d)
	Public hospitals ^(a)	Private hospitals	Non-inpatients			GPs	Specialist	Total medical	Prescription	Over-the-counter	Total			
Males														
0–4	0.6	—	0.4	1.0	—	0.1	0.1	0.2	0.0	0.0	0.0	0.0	0.1	1.3
5–14	0.5	0.0	0.8	1.3	—	0.2	0.2	0.4	0.1	0.0	0.1	0.1	0.1	2.0
15–24	7.9	0.2	13.6	21.8	0.1	2.5	2.0	4.5	0.8	0.4	1.2	2.7	1.8	32.1
25–34	7.4	0.1	7.2	14.7	—	2.5	2.3	4.8	1.0	0.4	1.4	3.0	1.4	25.3
35–44	4.1	0.1	3.6	7.8	0.1	1.5	1.3	2.9	0.6	0.3	0.9	1.1	0.7	13.5
45–54	2.3	0.1	1.7	4.0	0.0	0.8	0.8	1.6	0.3	0.1	0.4	0.4	0.4	6.9
55–64	0.7	0.0	0.6	1.3	0.0	0.2	0.2	0.5	0.1	0.0	0.1	0.2	0.1	2.3
65–74	0.5	0.0	0.4	0.9	0.1	0.1	0.1	0.2	0.1	0.0	0.1	0.1	0.1	1.3
75+	0.2	0.0	0.1	0.3	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.1	0.0	0.4
Total	24.3	0.5	28.4	53.1	0.4	8.0	7.0	15.0	3.0	1.3	4.3	7.7	4.7	85.2
Females														
0–4	0.4	0.0	0.3	0.6	—	0.1	0.1	0.1	0.0	0.0	0.0	0.0	0.1	0.9
5–14	0.2	0.0	0.4	0.6	—	0.1	0.1	0.2	0.0	0.0	0.1	0.1	0.1	0.9
15–24	1.9	0.0	3.3	5.2	0.4	1.2	1.1	2.3	0.4	0.2	0.7	1.3	0.6	10.5
25–34	2.4	0.0	4.6	7.0	—	1.6	1.9	3.5	0.7	0.3	1.0	1.0	0.7	13.2
35–44	1.4	0.0	1.7	3.1	—	1.2	1.2	2.4	0.6	0.2	0.8	1.8	0.5	8.6
45–54	0.5	0.0	0.9	1.4	—	0.4	0.3	0.6	0.2	0.1	0.2	0.4	0.2	2.9
55–64	0.2	0.0	0.2	0.4	—	0.1	0.1	0.2	0.1	0.0	0.1	0.1	0.0	0.8
65–74	0.1	0.0	0.1	0.2	0.0	0.0	0.0	0.1	0.0	0.0	0.0	0.0	0.0	0.4
75+	0.2	0.1	0.0	0.3	0.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.4
Total	7.3	0.2	11.4	18.9	0.5	4.7	4.8	9.5	2.0	0.9	2.9	4.7	2.1	38.6

(a) Public acute, public psychiatric and repatriation hospitals.

(b) Medical services for private patients in hospitals are included under Hospital inpatients.

(c) Includes other institutional, non-institutional and administration expenditure, and research.

(d) Excludes expenditure for public health services, community health services, ambulances, medical aids and appliances.

Table C.19: Homicide and violence: health service utilisation by health sector, sex and age, 1993–94

Sex / age	Hospital admissions ('000)			Hospital bed days ('000)			Non-inpatient occasions of service ('000)	Medical services ^(b) ('000)			No. of prescriptions ('000)	Allied health consultations ('000)	Nursing home residents
	Public hospitals ^(a)	Private hospitals	Total hospital	Public hospitals ^(a)	Private hospitals	Total hospital		GPs	Specialist	Total medical			
Males													
0–4	0.2	—	0.2	1.2	—	1.2	6.6	3.4	1.3	4.7	1.0	0.6	—
5–14	0.4	0.0	0.4	0.8	0.1	0.9	11.5	8.6	3.1	11.7	2.7	3.6	—
15–24	5.1	0.1	5.2	11.0	0.2	11.1	205.7	92.8	32.8	125.5	49.5	158.8	3
25–34	4.3	0.0	4.4	11.1	0.1	11.2	109.7	98.9	33.0	131.9	62.5	172.5	—
35–44	2.2	0.0	2.2	6.9	0.1	7.0	54.6	62.9	20.0	82.9	40.9	64.4	2
45–54	1.0	0.0	1.0	3.7	0.1	3.7	25.6	30.7	13.1	43.8	19.9	25.9	1
55–64	0.3	0.0	0.3	1.7	0.0	1.7	8.4	8.8	3.5	12.3	6.7	14.3	1
65–74	0.2	0.0	0.2	1.0	0.1	1.1	5.7	3.3	1.3	4.7	3.5	3.3	2
75+	0.1	0.0	0.1	0.3	0.0	0.4	1.7	0.8	0.2	1.1	0.5	2.9	1
Total	13.7	0.2	13.9	37.7	0.6	38.3	429.5	310.3	108.3	418.6	187.2	446.4	10
Females													
0–4	0.1	0.0	0.1	0.8	0.0	0.8	4.1	2.9	1.1	4.0	0.9	2.3	—
5–14	0.1	0.0	0.1	0.3	0.0	0.3	5.9	3.6	1.7	5.3	1.3	3.4	—
15–24	1.4	0.0	1.4	3.2	0.0	3.2	50.0	52.4	15.9	68.3	26.5	73.0	11
25–34	1.5	0.0	1.6	4.3	0.0	4.3	68.9	69.2	26.8	96.0	42.2	60.0	—
35–44	0.8	0.0	0.8	2.2	0.0	2.3	25.8	47.2	17.3	64.5	35.5	102.8	—
45–54	0.3	0.0	0.3	1.0	0.0	1.0	13.8	14.3	4.5	18.9	11.6	22.8	—
55–64	0.1	0.0	0.1	0.4	0.0	0.4	2.6	3.9	2.0	6.0	3.7	4.2	—
65–74	0.0	0.0	0.1	0.3	0.0	0.3	1.4	1.2	0.7	1.9	1.0	2.5	0
75+	0.1	0.0	0.1	0.4	0.1	0.6	0.6	0.8	0.3	1.1	0.5	0.6	2
Total	4.5	0.1	4.6	12.9	0.3	13.2	173.1	195.7	70.2	265.9	123.2	271.6	13

(a) Public acute, public psychiatric and repatriation hospitals.

(b) Out-of-hospital medical services only.

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Appendix D: Detailed tables: musculoskeletal disorders, 1993–94

Tables D.1 and D.2 show total estimated health system costs and estimated health service utilisation respectively for specific musculoskeletal disorders at sub-chapter level of ICD-9 by detailed health sector in 1993–94. Tables D.3 and D.4 show total health system costs and estimated levels of utilisation of health services for musculoskeletal disorders by sector, age group and sex in 1993–94.

Detailed information on total costs and health services utilisation by health sector, age, sex and major disease group for the larger cost musculoskeletal disorders are provided in Tables D.5 to D.16. Each pair of tables shows costs and utilisation of health services by detailed health sector, age and sex for a given disease group. Tables are not included for those musculoskeletal disorders with relatively small total health system costs. These tables are available on request from the Institute.

Table D.1: Diseases of the musculoskeletal system and connective tissue: total health system costs by health sector and disease type, 1993–94 (\$ million)

Disorder	Hospital inpatients				Medical services ^(b)		Pharmaceuticals				Total costs ^(d)	
	Public hospitals ^(a)	Private hospitals	Non-inpatients	Nursing homes	GPs	Specialist	Prescription	Over-the-counter	Allied health	Research		Other ^(c)
Systemic lupus erythematosus (SLE)	2.2	0.4	0.2	0.3	0.2	0.4	0.2	0.1	0.4	0.0	0.2	4.7
Rheumatoid arthritis	20.1	9.2	14.7	17.9	9.2	17.7	18.7	8.1	6.5	1.1	5.5	128.7
Osteoarthritis	131.7	134.8	34.3	117.2	35.8	44.2	37.5	20.5	35.9	5.4	26.7	624.0
Internal derangement of knee	29.6	77.0	2.0	1.1	1.6	2.2	0.3	0.5	4.1	1.1	5.3	124.9
Other joint derangement and disorders	29.2	41.0	31.6	47.0	27.6	52.7	18.0	9.0	32.9	2.6	13.0	304.7
Back problems	95.3	88.8	54.8	78.9	57.3	76.0	37.8	24.4	151.1	6.0	30.0	700.3
Arthritis (spondylosis and spondylitis)	9.9	5.1	15.0	13.9	16.8	19.8	12.7	8.3	38.8	1.3	6.3	148.0
Intervertebral disc disorders	32.8	41.2	5.8	9.3	25.8	36.0	16.4	7.6	70.2	2.2	11.0	258.3
Chronic back pain	52.6	42.4	34.0	55.6	14.8	20.2	8.6	8.5	42.1	2.5	12.6	294.1
Neck problems	12.9	11.3	30.3	8.4	12.7	12.5	6.8	11.0	45.7	1.4	6.8	159.8
Disorders of muscles, tendons and soft tissue	47.1	60.4	57.9	28.1	56.7	70.1	41.8	18.2	111.9	4.5	22.2	518.9
Osteopathies, chondropathies and other bone disorders	19.3	5.1	4.1	12.4	2.8	5.8	1.3	0.9	4.7	0.5	2.5	59.5
Osteoporosis	3.2	2.4	3.2	22.3	5.4	4.1	10.9	1.2	3.7	0.5	2.5	59.5
Acquired musculoskeletal deformities	21.8	25.1	19.1	11.5	3.8	6.9	1.3	2.9	10.5	0.9	4.6	108.4
Other	50.0	23.0	5.1	84.6	5.0	7.2	3.0	1.5	8.6	1.7	8.5	198.2
Prevention and screening	0.0	0.0	8.5		0.1	0.1	0.0	0.8	—	0.1	0.4	10.0
Total	462.6	478.6	265.9	429.9	218.3	300.0	177.5	99.0	415.8	25.8	128.4	3,001.8

(a) Public acute, public psychiatric and repatriation hospitals.

(b) Medical services for private patients in hospitals are included under Hospital inpatients.

(c) Includes other institutional, non-institutional and administration expenditure.

(d) Excludes expenditure for public health services, community health services, ambulances, medical aids and appliances.

Table D.2: Diseases of the musculoskeletal system and connective tissue: estimated health service utilisation by health sector and disease type, 1993–94

Disorder	Admissions ('000)		Bed days ('000)		Non-inpatient occasions of service ('000)	Medical services ^(b) ('000)			No. of prescriptions ('000)	Allied health consultations ('000)	Nursing home residents
	Public hospitals ^(a)	Private hospitals ^(a)	Public hospitals	Private hospitals		GPs	Specialist	Total medical			
Systemic lupus erythematosus(SLE)	0.9	0.1	5.1	1.1	3.3	9.4	8.2	17.6	15.4	24.4	9
Rheumatoid arthritis	4.6	1.9	43.9	16.4	222.8	370.5	612.8	983.4	764.6	373.5	490
Osteoarthritis	20.1	20.5	203.6	177.6	519.9	1,451.9	858.6	2,310.5	3,058.4	2,071.5	3,207
Internal derangement of knee	15.1	32.0	22.7	47.3	30.4	66.8	40.3	107.2	25.6	234.3	31
Other joint derangement and disorders	13.9	16.6	52.8	43.0	479.1	1,120.4	1,015.8	2,136.3	1,437.1	1,898.0	1,286
Back problems	35.6	29.8	209.8	182.9	829.4	2,320.8	1,300.5	3,621.3	2,919.8	8,730.1	2,158
Arthritis(spondylosis and spondylitis)	3.1	1.6	23.9	11.7	227.6	682.8	373.5	1,056.3	944.8	2,239.9	381
Intervertebral disc disorders	10.3	11.7	70.7	77.7	87.1	1,036.0	547.3	1,583.3	1,335.3	4,056.2	255
Chronic back pain	22.2	16.5	115.2	93.5	514.7	602.0	379.6	981.6	639.8	2,433.9	1,522
Neck problems	4.6	4.1	23.9	18.6	458.2	523.1	211.6	734.7	501.0	2,640.1	231
Disorders of muscles, tendons and soft tissue	25.2	26.3	68.8	59.9	876.9	2,352.8	1,344.7	3,697.6	3,151.9	6,464.0	768
Osteopathies, chondropathies and other bone disorders	5.4	1.4	45.5	8.5	62.6	109.9	121.8	231.7	97.3	268.8	339
Osteoporosis	0.9	0.5	11.8	8.3	48.9	219.3	94.3	313.6	1,029.6	214.6	609
Acquired musculoskeletal deformities	7.2	8.2	30.8	29.0	289.0	156.5	126.9	283.5	105.7	606.9	315
Other	13.5	6.0	118.1	42.9	76.7	205.4	142.5	347.9	252.9	499.3	2,315
Prevention and screening	0.0	0.0	0.0	0.0	128.6	3.2	2.9	6.1	2.6	—	—
Total	147.2	147.6	836.9	635.4	4,025.7	8,910.1	5,881.1	14,791.2	13,361.9	24,025.5	11,757

(a) Public acute, public psychiatric and repatriation hospitals.

(b) Out-of-hospital medical services only.

Table D.3: Diseases of the musculoskeletal system and connective tissue: total health system costs by health sector, sex and age, 1993–94 (\$ million)

Sex / age	Hospital inpatients			Medical services ^(b)					Pharmaceuticals			Allied health	Other ^(c)	Total costs ^(d)
	Public hospitals ^(a)	Private hospitals	Non-inpatients	Total hospital	Nursing homes	GPs	Specialist	Total medical	Prescription	Over-the-counter	Total			
Males														
0–4	2.6	0.4	1.5	4.4	—	0.5	0.8	1.3	0.1	0.2	0.3	2.4	0.5	8.9
5–14	8.3	2.7	10.5	21.5	—	3.7	7.5	11.2	0.3	0.8	1.1	5.3	2.1	41.3
15–24	18.7	25.6	14.1	58.4	—	6.6	10.6	17.2	2.1	2.5	4.6	16.0	5.2	101.4
25–34	24.1	36.6	23.2	83.8	—	11.6	11.7	23.4	5.5	4.5	10.0	45.1	8.8	171.0
35–44	23.8	38.2	26.3	88.3	—	15.5	15.8	31.2	8.6	5.7	14.3	35.9	9.2	179.0
45–54	23.2	37.3	27.3	87.7	—	18.4	21.3	39.7	11.3	5.8	17.0	26.9	9.3	180.6
55–64	29.2	37.6	15.2	81.9	2.6	16.8	22.4	39.3	15.4	8.6	24.1	26.1	9.4	183.4
65–74	49.0	39.7	10.4	99.1	11.9	13.9	25.1	39.0	15.0	7.7	22.7	22.3	10.6	205.6
75+	39.7	21.6	10.2	71.5	68.7	9.5	11.4	20.9	9.5	3.8	13.3	6.5	9.8	190.7
Total	218.4	239.5	138.8	596.7	83.1	96.5	126.7	223.2	67.8	39.6	107.4	186.5	64.8	1,261.8
Females														
0–4	2.0	0.3	1.5	3.9	—	0.7	1.7	2.4	0.1	0.1	0.2	4.9	0.6	12.0
5–14	6.8	2.6	2.9	12.3	—	3.2	6.2	9.4	0.9	0.9	1.8	4.5	1.5	29.6
15–24	11.6	14.8	8.2	34.7	—	5.9	7.6	13.5	2.0	3.1	5.0	19.6	3.9	76.7
25–34	14.9	19.7	11.9	46.5	—	10.1	18.6	28.7	5.6	4.7	10.3	42.3	6.9	134.8
35–44	20.0	28.5	23.6	72.0	—	19.4	29.1	48.5	14.0	7.0	21.0	41.5	9.9	193.0
45–54	23.7	36.2	15.3	75.3	—	21.1	32.4	53.5	15.0	9.5	24.5	41.0	10.5	204.7
55–64	33.0	38.2	21.2	92.4	0.8	18.1	27.7	45.8	21.2	11.6	32.8	25.4	10.7	207.8
65–74	60.9	50.4	20.5	131.8	30.4	20.3	28.4	48.7	23.4	12.9	36.3	25.4	14.8	287.3
75+	71.2	48.4	21.9	141.5	315.6	22.9	21.6	44.6	27.5	9.7	37.2	24.8	30.5	594.1
Total	244.2	239.1	127.1	610.4	346.7	121.8	173.3	295.1	109.6	59.5	169.1	229.3	89.4	1,740.0

(a) Public acute, public psychiatric and repatriation hospitals.

(b) Medical services for private patients in hospitals are included under Hospital inpatients.

(c) Includes other institutional, non-institutional and administration expenditure, and research.

(d) Excludes expenditure for public health services, community health services, ambulances, medical aids and appliances.

Table D.4: Diseases of the musculoskeletal system and connective tissue: health service utilisation by health sector, sex and age, 1993-94

Sex / age	Hospital admissions ('000)			Hospital bed days ('000)			Non-inpatient occasions of service ('000)	Medical services ^(b) ('000)			No. of prescriptions ('000)	Allied health consultations ('000)	Nursing home residents
	Public hospitals ^(a)	Private hospitals	Total hospital	Public hospitals ^(a)	Private hospitals	Total hospital		GPs	Specialist	Total medical			
Males													
0-4	1.5	0.2	1.7	4.4	0.3	4.7	22.2	19.6	16.4	35.9	3.1	139.9	—
5-14	3.9	1.2	5.1	13.2	2.0	15.2	159.5	143.7	130.9	274.6	28.4	305.8	—
15-24	9.3	10.7	19.9	22.4	19.2	41.6	214.0	263.4	193.3	456.8	161.9	926.3	—
25-34	11.5	15.1	26.6	34.1	32.8	66.9	350.9	479.5	221.2	700.7	421.4	2,604.7	—
35-44	10.8	15.2	26.0	37.2	39.7	76.9	398.2	638.3	289.1	927.4	687.5	2,073.8	—
45-54	9.1	13.8	22.9	39.7	41.3	81.0	412.7	761.7	422.3	1,184.1	843.0	1,552.2	—
55-64	9.2	10.8	20.0	50.3	44.5	94.9	230.4	688.7	408.8	1,097.5	1,080.7	1,509.7	70
65-74	10.8	8.9	19.6	77.9	57.3	135.2	157.9	597.1	471.6	1,068.7	1,085.7	1,288.0	325
75+	7.1	4.1	11.3	80.9	39.5	120.3	155.0	378.6	259.2	637.8	714.9	375.6	1,879
Total	73.3	80.0	153.2	360.0	276.6	636.6	2,100.9	3,970.7	2,412.8	6,383.5	5,026.7	10,775.9	2,274
Females													
0-4	1.2	0.2	1.3	3.6	0.2	3.8	23.3	29.9	25.3	55.1	5.2	281.2	—
5-14	2.9	1.1	4.0	10.3	2.2	12.5	44.2	124.6	107.1	231.7	93.6	258.8	—
15-24	5.7	6.0	11.7	15.6	12.4	28.0	124.6	252.9	142.2	395.1	139.9	1,129.9	—
25-34	7.2	7.6	14.8	22.9	25.6	48.5	180.5	441.3	291.8	733.1	380.1	2,445.0	—
35-44	8.7	10.5	19.2	33.6	36.4	70.0	357.4	806.2	545.5	1,351.7	1,081.4	2,398.8	—
45-54	9.5	12.5	21.9	41.5	48.3	89.8	232.2	859.7	612.7	1,472.4	1,164.1	2,367.4	—
55-64	10.3	10.4	20.7	57.1	50.7	107.8	321.5	737.8	593.7	1,331.5	1,419.3	1,468.1	21
65-74	14.1	10.6	24.8	112.8	78.3	191.1	310.1	825.6	625.3	1,450.9	1,852.2	1,467.7	831
75+	14.4	8.8	23.1	179.5	104.6	284.1	331.0	861.5	524.6	1,386.2	2,199.5	1,432.6	8,632
Total	73.9	67.6	141.5	476.9	358.8	835.7	1,924.8	4,939.5	3,468.3	8,407.7	8,335.2	13,249.6	9,484

(a) Public acute, public psychiatric and repatriation hospitals.

(b) Out-of-hospital medical services only.

Table D.5: Rheumatoid arthritis: total health system costs by health sector, sex and age, 1993-94 (\$ million)

Sex / age	Hospital inpatients			Total hospital	Nursing homes	Medical services ^(b)			Pharmaceuticals			Allied health	Other ^(c)	Total costs ^(d)	
	Public hospitals ^(a)	Private hospitals	Non-inpatients			GPs	Specialist	Total medical	Prescription	Over-the-counter	Total				
Males															
0-4	0.0	—	—	0.0	—	—	—	—	—	—	—	—	0.0	0.0	
5-14	0.2	0.0	—	0.2	—	—	—	—	—	—	—	—	0.0	0.2	
15-24	0.1	0.0	—	0.1	—	0.0	0.0	0.1	0.0	0.0	0.0	—	0.0	0.1	
25-34	0.2	0.0	0.1	0.3	—	0.1	0.4	0.6	0.3	0.1	0.4	—	0.1	1.3	
35-44	0.3	0.2	0.2	0.7	—	0.2	0.4	0.6	0.1	0.1	0.2	—	0.1	1.6	
45-54	0.6	0.3	0.3	1.3	—	0.8	1.7	2.5	1.1	0.3	1.5	0.5	0.3	6.1	
55-64	1.2	0.5	1.5	3.3	0.1	0.9	1.9	2.8	2.2	0.8	2.9	0.7	0.5	10.5	
65-74	2.2	0.6	0.9	3.7	1.2	0.7	1.7	2.4	1.8	0.7	2.5	1.0	0.6	11.4	
75+	1.3	0.2	0.9	2.4	0.7	0.4	0.7	1.0	0.6	0.3	0.9	—	0.3	5.3	
Total	6.1	1.9	3.9	12.0	2.0	3.2	6.9	10.0	6.1	2.3	8.4	2.2	1.9	36.6	
Females															
0-4	0.1	0.0	—	0.1	—	—	—	—	—	—	—	—	0.0	0.1	
5-14	0.2	0.0	—	0.3	—	0.1	—	0.1	0.0	0.0	0.0	—	0.0	0.4	
15-24	0.3	0.1	—	0.4	—	0.0	—	0.0	0.0	0.0	0.0	—	0.0	0.5	
25-34	0.4	0.2	1.4	2.0	—	0.3	0.7	1.0	0.5	0.1	0.6	—	0.2	3.7	
35-44	1.0	0.5	1.7	3.3	—	0.9	2.0	2.9	1.8	0.4	2.2	0.7	0.5	9.5	
45-54	1.6	1.1	0.7	3.4	—	1.1	1.6	2.7	1.6	0.8	2.4	—	0.5	9.0	
55-64	2.9	1.7	3.2	7.8	0.1	1.1	2.5	3.6	4.3	1.5	5.8	0.6	1.0	18.8	
65-74	4.4	2.2	2.5	9.1	3.4	1.5	2.1	3.6	1.9	1.8	3.6	1.9	1.2	22.7	
75+	2.9	1.5	1.4	5.7	12.5	1.1	1.9	3.0	2.6	1.1	3.7	1.1	1.4	27.4	
Total	14.0	7.3	10.8	32.1	15.9	6.1	10.8	16.9	12.6	5.7	18.3	4.2	4.7	92.2	

(a) Public acute, public psychiatric and repatriation hospitals.

(b) Medical services for private patients in hospitals are included under Hospital inpatients.

(c) Includes other institutional, non-institutional and administration expenditure, and research.

(d) Excludes expenditure for public health services, community health services, ambulances, medical aids and appliances.

Table D.6: Rheumatoid arthritis: health service utilisation by health sector, sex and age, 1993–94

Sex / age	Hospital admissions ('000)			Hospital bed days ('000)			Non-inpatient occasions of service ('000)	Medical services ^(b) ('000)			No. of prescriptions ('000)	Allied health consultations ('000)	Nursing home residents
	Public hospitals ^(a)	Private hospitals	Total hospital	Public hospitals ^(a)	Private hospitals	Total hospital		GPs	Specialist	Total medical			
Males													
0–4	0.0	—	0.0	0.1	—	0.1	—	—	—	—	—	—	—
5–14	0.1	0.0	0.1	0.4	0.0	0.4	—	—	—	—	—	—	—
15–24	0.0	0.0	0.0	0.1	0.0	0.1	—	0.5	0.6	1.1	0.8	—	—
25–34	0.1	0.0	0.1	0.4	0.0	0.4	0.9	5.9	14.4	20.3	7.1	—	—
35–44	0.1	0.0	0.1	0.6	0.2	0.8	3.2	9.0	12.3	21.2	10.6	—	—
45–54	0.2	0.1	0.3	1.1	0.6	1.7	4.9	33.7	59.7	93.4	55.4	28.5	—
55–64	0.3	0.1	0.4	2.6	0.9	3.4	23.2	35.9	47.6	83.5	84.1	42.9	4
65–74	0.4	0.1	0.5	4.0	1.0	4.9	14.0	27.9	59.3	87.1	68.6	58.4	32
75+	0.2	0.0	0.2	3.8	0.4	4.3	13.5	13.8	24.7	38.5	34.4	—	20
Total	1.3	0.4	1.8	13.0	3.1	16.2	59.6	126.7	218.4	345.2	261.0	129.9	55
Females													
0–4	0.1	0.0	0.1	0.1	0.0	0.1	—	—	—	—	—	—	—
5–14	0.1	0.0	0.1	0.4	0.0	0.4	—	2.2	—	2.2	1.5	—	—
15–24	0.1	0.0	0.1	0.5	0.1	0.6	—	2.2	—	2.2	3.1	—	—
25–34	0.1	0.1	0.2	0.8	0.3	1.1	20.7	13.9	21.8	35.7	16.3	—	—
35–44	0.3	0.1	0.4	2.1	0.7	2.8	25.5	37.8	65.2	103.0	62.1	39.6	—
45–54	0.4	0.3	0.7	3.3	1.7	5.0	10.2	44.5	66.1	110.5	81.4	—	—
55–64	0.7	0.4	1.1	6.4	2.5	8.9	47.7	46.2	81.3	127.5	105.1	32.3	2
65–74	0.9	0.4	1.3	9.7	3.8	13.6	38.3	58.2	80.0	138.3	128.8	109.0	92
75+	0.6	0.3	0.8	7.6	4.0	11.6	20.7	38.9	79.9	118.8	105.3	62.7	342
Total	3.3	1.5	4.8	30.9	13.3	44.1	163.1	243.8	394.4	638.2	503.7	243.6	435

(a) Public acute, public psychiatric and repatriation hospitals.

(b) Out-of-hospital medical services only.

Table D.7: Osteoarthritis: total health system costs by health sector, sex and age, 1993–94 (\$ million)

Sex / age	Hospital inpatients			Medical services ^(b)					Pharmaceuticals			Allied health	Other ^(c)	Total costs ^(d)	
	Public hospitals ^(a)	Private hospitals	Non-inpatients	Total hospital	Nursing homes	GPs	Specialist	Total medical	Prescription	Over-the-counter	Total				
Males															
0–4	0.0	0.0	—	0.0	—	—	—	—	—	—	—	—	0.0	0.0	
5–14	0.0	0.0	—	0.0	—	0.1	0.2	0.2	0.0	0.0	0.0	—	0.0	0.3	
15–24	0.2	0.4	—	0.6	—	0.1	0.2	0.3	—	0.0	0.0	0.3	0.1	1.2	
25–34	0.8	1.5	0.1	2.4	—	0.2	0.5	0.7	0.3	0.1	0.3	—	0.2	3.6	
35–44	1.5	3.4	0.4	5.3	—	0.6	1.2	1.8	0.5	0.2	0.7	2.3	0.5	10.6	
45–54	3.5	6.7	0.5	10.7	—	2.2	2.7	4.9	1.5	0.5	1.9	1.6	1.0	20.2	
55–64	10.0	15.7	3.5	29.2	0.9	2.8	3.6	6.5	3.4	1.7	5.1	2.6	2.4	46.6	
65–74	22.9	23.3	3.3	49.6	4.3	4.1	7.6	11.7	4.4	2.7	7.1	5.8	4.2	82.6	
75+	18.9	13.0	4.4	36.2	17.5	3.2	2.7	5.9	3.1	1.5	4.5	1.1	3.5	68.8	
Total	57.7	64.1	12.2	134.0	22.8	13.3	18.5	31.9	13.1	6.7	19.8	13.6	12.0	234.0	
Females															
0–4	0.0	0.0	—	0.0	—	—	—	—	—	—	—	—	0.0	0.0	
5–14	0.0	0.0	—	0.0	—	—	—	—	—	—	—	—	0.0	0.0	
15–24	0.1	0.2	—	0.2	—	0.0	—	0.0	—	0.0	0.0	—	0.0	0.3	
25–34	0.5	0.7	0.7	1.9	—	0.3	0.5	0.7	0.3	0.1	0.3	—	0.2	3.1	
35–44	1.1	2.2	1.7	5.0	—	1.5	2.1	3.6	3.0	0.4	3.4	1.5	0.7	14.3	
45–54	3.4	5.8	1.2	10.4	—	2.8	5.0	7.8	2.6	1.5	4.1	2.8	1.4	26.5	
55–64	11.1	13.6	6.9	31.6	0.4	4.2	5.4	9.7	4.9	3.4	8.3	5.5	3.0	58.5	
65–74	27.9	25.2	6.6	59.8	10.7	5.3	7.1	12.4	5.6	4.6	10.3	5.6	5.3	104.1	
75+	29.9	22.9	5.0	57.8	83.4	8.2	5.6	13.8	7.9	3.9	11.8	6.8	9.4	183.1	
Total	74.0	70.7	22.2	166.9	94.5	22.4	25.7	48.1	24.4	13.8	38.2	22.3	20.0	390.0	

(a) Public acute, public psychiatric and repatriation hospitals.

(b) Medical services for private patients in hospitals are included under Hospital inpatients.

(c) Includes other institutional, non-institutional and administration expenditure, and research.

(d) Excludes expenditure for public health services, community health services, ambulances, medical aids and appliances.

Table D.8: Osteoarthritis: health service utilisation by health sector, sex and age, 1993–94

Sex / age	Hospital admissions ('000)			Hospital bed days ('000)			Non-inpatient occasions of service ('000)	Medical services ^(b) ('000)			No. of prescriptions ('000)	Allied health consultations ('000)	Nursing home residents
	Public hospitals ^(a)	Private hospitals	Total hospital	Public hospitals ^(a)	Private hospitals	Total hospital		GPs	Specialist	Total medical			
Males													
0–4	0.0	0.0	0.0	0.0	0.0	0.0	—	—	—	—	—	—	—
5–14	0.0	0.0	0.0	0.0	0.0	0.0	—	2.2	2.6	4.8	1.6	—	—
15–24	0.1	0.2	0.3	0.2	0.3	0.5	—	3.9	4.8	8.7	—	15.2	—
25–34	0.4	0.6	0.9	0.9	1.2	2.1	0.8	10.3	8.9	19.2	21.5	—	—
35–44	0.5	1.1	1.6	1.6	2.9	4.6	6.8	26.6	19.1	45.7	40.2	131.7	—
45–54	0.9	1.6	2.5	4.2	6.8	11.0	7.3	89.0	48.5	137.5	117.3	91.5	—
55–64	1.8	2.5	4.2	13.1	18.0	31.1	53.2	121.7	69.7	191.4	263.6	149.6	25
65–74	2.9	3.1	5.9	27.8	32.4	60.2	50.3	179.9	133.4	313.3	349.8	332.7	118
75+	2.1	1.5	3.6	26.5	19.4	45.9	65.9	127.4	61.1	188.5	226.4	62.9	480
Total	8.6	10.5	19.1	74.4	81.1	155.5	184.3	560.8	348.2	909.1	1,020.3	783.7	623
Females													
0–4	0.0	0.0	0.0	0.0	0.0	0.0	—	—	—	—	—	—	—
5–14	0.0	0.0	0.0	0.0	0.0	0.0	—	—	—	—	—	—	—
15–24	0.0	0.1	0.1	0.1	0.1	0.2	—	1.6	—	1.6	—	—	—
25–34	0.2	0.2	0.4	0.7	0.8	1.5	10.7	11.7	6.7	18.4	19.8	—	—
35–44	0.4	0.6	0.9	1.4	2.2	3.6	25.7	63.4	40.1	103.5	336.8	89.2	—
45–54	0.9	1.3	2.2	4.7	6.4	11.1	18.6	115.0	85.9	201.0	212.2	164.6	—
55–64	2.0	2.1	4.1	15.3	16.2	31.5	104.4	177.9	101.2	279.1	392.7	319.6	10
65–74	3.9	3.1	7.1	43.6	34.1	77.6	100.6	216.7	146.4	363.2	446.0	321.0	292
75+	4.1	2.6	6.7	63.4	36.6	100.0	75.6	304.7	130.0	434.8	630.6	393.4	2,282
Total	11.5	10.0	21.5	129.2	96.5	225.7	335.6	891.1	510.4	1,401.4	2,038.1	1,287.8	2,584

(a) Public acute, public psychiatric and repatriation hospitals.

(b) Out-of-hospital medical services only.

Table D.9: Joint derangement and disorders: total health system costs by health sector, sex and age, 1993–94 (\$ million)

Sex / age	Hospital inpatients					Medical services ^(b)			Pharmaceuticals			Allied health	Other ^(c)	Total costs ^(d)
	Public hospitals ^(a)	Private hospitals	Non-inpatients	Total hospital	Nursing homes	GPs	Specialist	Total medical	Prescription	Over-the-counter	Total			
Males														
0–4	0.5	0.1	—	0.6	—	0.1	—	0.1	0.1	0.0	0.1	0.3	0.1	1.1
5–14	1.5	1.0	2.0	4.5	—	0.9	2.3	3.2	0.0	0.2	0.2	0.6	0.5	9.1
15–24	8.8	17.0	3.5	29.3	—	1.7	3.5	5.1	0.4	0.8	1.2	3.4	2.1	41.2
25–34	8.6	19.6	3.4	31.5	—	2.0	2.9	4.9	0.6	0.7	1.3	3.9	2.3	44.0
35–44	5.2	14.6	4.7	24.5	—	1.5	2.7	4.2	0.7	0.6	1.4	0.6	1.7	32.4
45–54	3.0	10.7	2.2	15.9	—	1.6	2.4	4.0	0.9	0.5	1.4	0.3	1.2	22.8
55–64	2.4	6.6	1.3	10.2	0.1	2.0	2.8	4.8	1.0	0.6	1.6	2.5	1.0	20.3
65–74	2.4	3.7	1.0	7.2	1.2	1.4	2.0	3.4	1.5	0.4	1.9	2.1	0.9	16.7
75+	1.9	1.3	—	3.2	7.0	1.2	1.7	2.9	1.1	0.3	1.3	0.6	0.8	15.8
Total	34.2	74.7	18.1	126.9	8.2	12.3	20.4	32.7	6.4	4.1	10.5	14.4	10.4	203.1
Females														
0–4	0.4	0.0	—	0.4	—	—	1.3	1.3	—	0.0	0.0	0.9	0.1	2.9
5–14	1.3	1.0	0.3	2.6	—	0.8	1.7	2.5	0.4	0.2	0.6	0.8	0.4	6.8
15–24	4.2	8.1	0.7	13.0	—	1.1	2.3	3.4	0.2	0.5	0.7	2.4	1.1	20.5
25–34	3.7	8.0	1.4	13.1	—	1.4	4.3	5.7	0.6	0.7	1.3	5.6	1.4	27.1
35–44	3.0	7.3	4.6	15.0	—	2.8	6.1	8.9	1.8	0.9	2.7	2.7	1.6	30.9
45–54	2.3	6.5	3.5	12.3	—	2.9	6.4	9.2	1.6	0.9	2.5	4.4	1.5	30.1
55–64	2.2	4.9	1.5	8.6	0.0	2.4	5.3	7.6	2.2	0.8	3.0	2.2	1.2	22.6
65–74	3.1	4.3	0.8	8.2	2.5	2.5	4.8	7.3	2.6	0.8	3.3	1.6	1.2	24.2
75+	4.4	3.0	2.8	10.3	37.5	2.7	2.7	5.4	2.5	0.6	3.1	1.9	3.2	61.3
Total	24.7	43.3	15.6	83.5	40.0	16.6	34.9	51.5	11.9	5.4	17.3	22.6	11.6	226.5

(a) Public acute, public psychiatric and repatriation hospitals.

(b) Medical services for private patients in hospitals are included under Hospital inpatients.

(c) Includes other institutional, non-institutional and administration expenditure, and research.

(d) Excludes expenditure for public health services, community health services, ambulances, medical aids and appliances.

Table D.10: Joint derangement and disorders: health service utilisation by health sector, sex and age, 1993–94

Sex / age	Hospital admissions ('000)			Hospital bed days ('000)			Non-inpatient occasions of service ('000)	Medical services ^(b) ('000)			No. of prescriptions ('000)	Allied health consultations ('000)	Nursing home residents
	Public hospitals ^(a)	Private hospitals	Total hospital	Public hospitals ^(a)	Private hospitals	Total hospital		GPs	Specialist	Total medical			
Males													
0–4	0.4	0.0	0.4	0.9	0.1	1.0	—	3.0	—	3.0	2.5	16.7	—
5–14	0.9	0.5	1.4	2.2	0.7	2.9	30.5	33.0	38.9	71.9	2.7	36.6	—
15–24	4.7	7.1	11.8	8.0	11.6	19.6	53.1	64.4	66.8	131.2	31.8	196.9	—
25–34	4.5	8.4	12.9	7.8	12.7	20.5	51.3	82.6	54.2	136.7	51.1	227.2	—
35–44	2.8	6.4	9.1	5.0	8.9	13.9	71.3	65.3	48.7	114.0	58.8	35.1	—
45–54	1.6	4.7	6.4	2.8	6.5	9.3	33.1	68.7	47.2	115.9	74.7	14.7	—
55–64	1.2	2.8	3.9	3.0	4.5	7.4	19.1	80.2	50.3	130.5	76.9	144.0	2
65–74	1.0	1.5	2.4	3.3	3.4	6.7	14.9	59.5	44.7	104.3	124.7	123.7	32
75+	0.6	0.5	1.1	4.5	2.0	6.6	—	50.1	38.8	88.9	85.3	34.4	191
Total	17.7	31.8	49.5	37.5	50.4	87.9	273.3	506.8	389.7	896.4	508.4	829.4	224
Females													
0–4	0.3	0.0	0.3	0.8	0.1	0.9	—	11.4	15.1	26.5	—	54.6	—
5–14	0.7	0.4	1.2	1.7	0.6	2.4	4.7	30.9	28.9	59.8	40.9	43.5	—
15–24	2.2	3.2	5.4	4.0	6.1	10.1	9.9	47.8	41.4	89.3	19.1	137.3	—
25–34	1.9	3.1	5.0	3.7	7.0	10.7	20.7	65.0	71.6	136.6	49.8	323.7	—
35–44	1.6	3.1	4.7	3.2	5.3	8.5	70.0	116.9	117.7	234.6	124.6	158.5	—
45–54	1.2	2.7	3.9	2.6	4.8	7.5	52.9	113.6	117.8	231.4	131.9	254.5	—
55–64	1.0	2.0	3.0	2.9	3.9	6.8	22.7	95.2	110.8	206.0	169.2	125.1	0
65–74	1.1	1.5	2.6	5.3	4.8	10.1	12.5	98.8	101.2	200.0	214.0	94.9	68
75+	1.3	0.8	2.1	13.7	7.3	21.1	42.8	100.8	61.9	162.8	204.6	111.0	1,025
Total	11.4	16.8	28.2	38.0	40.0	78.0	236.1	680.5	666.5	1,347.0	954.3	1,302.9	1,093

(a) Public acute, public psychiatric and repatriation hospitals.

(b) Out-of-hospital medical services only.

Table D.11: Back problems: total health system costs by health sector, sex and age, 1993–94 (\$ million)

Sex / age	Hospital inpatients			Total hospital	Nursing homes	Medical services ^(b)			Pharmaceuticals			Allied health	Other ^(c)	Total costs ^(d)
	Public hospitals ^(a)	Private hospitals	Non-inpatients			GPs	Specialist	Total medical	Prescription	Over-the-counter	Total			
Males														
0–4	0.1	0.0	—	0.1	—	0.1	0.1	0.1	—	—	—	0.4	0.0	0.6
5–14	0.1	0.0	—	0.2	—	0.2	0.4	0.7	0.0	0.0	0.0	0.8	0.1	1.7
15–24	1.5	1.4	1.3	4.3	—	1.3	2.2	3.5	0.5	0.4	0.9	2.9	0.6	12.2
25–34	6.0	7.2	8.2	21.4	—	4.6	4.2	8.7	2.0	1.8	3.8	19.7	2.9	56.6
35–44	8.9	10.6	4.4	23.8	—	6.6	6.1	12.6	3.5	1.8	5.4	16.7	3.2	61.7
45–54	7.1	9.5	12.4	29.0	—	7.0	7.1	14.1	4.0	2.1	6.1	12.9	3.4	65.4
55–64	6.2	6.0	3.7	15.9	0.3	5.0	6.5	11.4	3.8	2.4	6.3	9.6	2.4	45.9
65–74	8.9	4.7	1.6	15.1	1.8	3.5	5.9	9.4	2.6	1.8	4.4	8.1	2.1	41.0
75+	6.7	3.1	2.8	12.6	13.9	1.8	3.5	5.3	1.4	0.7	2.1	2.6	2.0	38.5
Total	45.5	42.4	34.3	122.3	16.1	30.1	35.8	66.0	17.8	11.1	28.9	73.7	16.6	323.7
Females														
0–4	0.0	0.0	—	0.0	—	0.0	0.1	0.2	0.0	—	0.0	—	0.0	0.3
5–14	0.2	0.0	—	0.3	—	0.3	0.3	0.6	0.0	0.0	0.0	—	0.0	0.9
15–24	1.4	1.0	3.4	5.8	—	1.2	1.7	2.9	0.5	0.7	1.2	6.8	0.9	17.6
25–34	4.3	4.2	1.5	10.0	—	2.8	6.3	9.1	1.5	1.4	2.9	16.6	2.1	40.7
35–44	7.6	9.1	2.0	18.6	—	5.1	7.6	12.6	2.7	2.0	4.8	15.8	2.8	54.7
45–54	7.8	10.2	1.2	19.2	—	5.4	8.9	14.3	3.1	2.4	5.4	14.2	2.9	56.0
55–64	6.7	6.8	3.2	16.7	0.1	3.9	5.3	9.2	3.4	2.4	5.9	8.1	2.2	42.1
65–74	9.7	6.9	6.1	22.7	4.5	4.2	6.2	10.4	3.7	2.7	6.4	7.3	2.8	54.2
75+	12.0	8.2	3.0	23.2	58.2	4.4	3.7	8.1	5.0	1.6	6.5	8.6	5.7	110.2
Total	49.8	46.3	20.4	116.5	62.8	27.2	40.2	67.4	19.9	13.3	33.2	77.4	19.4	376.7

(a) Public acute, public psychiatric and repatriation hospitals.

(b) Medical services for private patients in hospitals are included under Hospital inpatients.

(c) Includes other institutional, non-institutional and administration expenditure, and research.

(d) Excludes expenditure for public health services, community health services, ambulances, medical aids and appliances.

Table D.12: Back problems: health service utilisation by health sector, sex and age, 1993–94

Sex / age	Hospital admissions ('000)			Hospital bed days ('000)			Non-inpatient occasions of service ('000)	Medical services ^(b) ('000)			No. of prescriptions ('000)	Allied health consultations ('000)	Nursing home residents
	Public hospitals ^(a)	Private hospitals	Total hospital	Public hospitals ^(a)	Private hospitals	Total hospital		GPs	Specialist	Total medical			
Males													
0–4	0.0	0.0	0.0	0.1	0.0	0.2	—	2.4	3.2	5.6	—	20.6	—
5–14	0.1	0.0	0.1	0.3	0.0	0.3	—	9.3	7.0	16.3	1.6	45.0	—
15–24	0.8	0.5	1.3	2.8	2.1	4.9	20.3	53.6	45.2	98.7	43.0	167.0	—
25–34	2.9	2.6	5.5	12.0	11.9	23.9	124.5	184.3	77.0	261.3	155.3	1,139.7	—
35–44	3.9	3.9	7.9	17.1	18.5	35.5	66.2	266.6	99.8	366.3	272.5	964.4	—
45–54	3.0	3.3	6.3	15.8	17.2	33.0	187.2	288.7	129.6	418.3	291.4	746.1	—
55–64	2.4	2.1	4.5	12.9	11.3	24.3	55.5	199.9	105.5	305.3	262.1	557.3	9
65–74	2.6	1.6	4.2	18.0	10.1	28.1	23.9	149.0	84.6	233.6	188.7	469.5	50
75+	1.7	0.9	2.6	16.7	7.9	24.7	42.2	72.4	59.0	131.4	104.6	151.0	381
Total	17.4	15.0	32.5	95.7	79.1	174.9	519.8	1,226.1	610.8	1,836.9	1,319.2	4,260.7	440
Females													
0–4	0.0	0.0	0.0	0.1	0.0	0.1	—	1.2	2.3	3.5	3.1	—	—
5–14	0.1	0.0	0.1	0.5	0.0	0.6	—	10.2	7.2	17.4	0.2	—	—
15–24	0.8	0.4	1.2	3.0	1.7	4.7	51.9	52.4	28.2	80.6	28.0	390.5	—
25–34	2.0	1.5	3.5	9.0	10.0	19.0	22.9	120.5	79.8	200.3	105.7	956.4	—
35–44	3.2	3.0	6.1	16.3	17.8	34.1	29.8	205.5	127.2	332.7	208.2	914.7	—
45–54	3.2	3.4	6.5	16.7	20.8	37.5	18.5	220.6	144.3	364.9	236.3	820.0	—
55–64	2.6	2.2	4.8	14.5	13.7	28.2	49.0	158.9	108.3	267.2	250.6	468.6	3
65–74	3.2	2.1	5.3	22.3	16.6	38.8	92.3	167.1	120.5	287.6	290.2	422.9	124
75+	3.2	2.2	5.3	31.8	23.1	54.9	45.1	158.2	71.8	230.1	478.2	496.3	1,591
Total	18.2	14.8	33.0	114.1	103.8	217.9	309.6	1,094.7	689.7	1,784.4	1,600.7	4,469.4	1,718

(a) Public acute, public psychiatric and repatriation hospitals.

(b) Out-of-hospital medical services only.

Table D.13: Neck problems: total health system costs by health sector, sex and age, 1993–94 (\$ million)

Sex / age	Hospital inpatients			Total hospital	Nursing homes	Medical services ^(b)			Pharmaceuticals			Allied health	Other ^(c)	Total costs ^(d)	
	Public hospitals ^(a)	Private hospitals	Non-inpatients			GPs	Specialist	Total medical	Prescription	Over-the-counter	Total				
Males															
0–4	0.0	—	—	0.0	—	—	—	—	—	—	—	0.7	0.0	0.8	
5–14	0.1	0.0	—	0.1	—	0.3	0.2	0.5	0.1	0.0	0.1	1.6	0.1	2.3	
15–24	0.1	0.1	0.5	0.7	—	0.3	0.5	0.8	0.1	0.1	0.2	2.6	0.2	4.6	
25–34	0.5	0.5	3.1	4.1	—	0.7	0.6	1.3	0.3	0.6	0.9	1.9	0.4	8.6	
35–44	1.1	1.5	3.4	6.0	—	1.3	1.2	2.5	0.7	0.9	1.6	5.4	0.8	16.3	
45–54	1.6	1.8	5.0	8.3	—	1.0	0.9	1.9	0.6	0.6	1.2	2.2	0.7	14.3	
55–64	1.3	1.0	1.8	4.1	—	1.0	1.2	2.3	0.8	1.2	2.1	2.8	0.6	11.9	
65–74	1.6	0.5	0.5	2.5	—	0.6	0.9	1.5	0.5	0.6	1.1	1.6	0.4	7.2	
75+	1.0	0.2	2.1	3.3	2.2	0.3	0.6	0.9	0.3	0.4	0.6	0.9	0.4	8.3	
Total	7.3	5.6	16.3	29.2	2.2	5.7	6.1	11.8	3.2	4.5	7.7	19.7	3.8	74.4	
Females															
0–4	0.0	—	—	0.0	—	0.1	0.2	0.3	0.0	—	0.0	—	0.0	0.4	
5–14	0.1	0.0	—	0.1	—	0.2	0.1	0.3	0.1	0.1	0.1	1.8	0.1	2.4	
15–24	0.1	0.1	1.7	1.9	—	0.5	0.3	0.7	0.1	0.4	0.5	2.9	0.3	6.3	
25–34	0.4	0.6	2.0	3.0	—	1.0	0.5	1.5	0.4	0.7	1.1	5.6	0.6	11.9	
35–44	0.9	1.4	2.0	4.4	—	1.6	1.4	3.0	0.9	1.0	1.9	5.8	0.8	16.0	
45–54	1.3	1.7	1.2	4.1	—	1.6	1.8	3.4	0.8	1.4	2.3	6.0	0.9	16.6	
55–64	0.8	0.9	2.4	4.1	0.0	0.9	0.9	1.8	0.4	1.4	1.8	2.3	0.5	10.6	
65–74	0.9	0.6	2.0	3.5	0.6	0.5	0.5	0.9	0.5	0.7	1.2	1.0	0.4	7.6	
75+	1.0	0.4	2.6	4.1	5.7	0.7	0.8	1.5	0.4	0.7	1.1	0.6	0.7	13.7	
Total	5.6	5.7	13.9	25.2	6.3	7.0	6.5	13.4	3.6	6.5	10.1	26.0	4.4	85.4	

(a) Public acute, public psychiatric and repatriation hospitals.

(b) Medical services for private patients in hospitals are included under Hospital inpatients.

(c) Includes other institutional, non-institutional and administration expenditure, and research.

(d) Excludes expenditure for public health services, community health services, ambulances, medical aids and appliances.

Table D.14: Neck problems: health service utilisation by health sector, sex and age, 1993–94

Sex / age	Hospital admissions ('000)			Hospital bed days ('000)			Non-inpatient occasions of service ('000)	Medical services ^(b) ('000)			No. of prescriptions ('000)	Allied health consultations ('000)	Nursing home residents
	Public hospitals ^(a)	Private hospitals	Total hospital	Public hospitals ^(a)	Private hospitals	Total hospital		GPs	Specialist	Total medical			
Males													
0–4	0.0	—	0.0	0.1	—	0.1	—	—	—	—	—	41.4	—
5–14	0.1	0.0	0.1	0.1	0.0	0.1	—	12.6	3.5	16.1	4.7	90.5	—
15–24	0.1	0.1	0.2	0.2	0.2	0.5	7.0	13.0	8.8	21.8	7.9	152.4	—
25–34	0.3	0.2	0.5	0.8	0.7	1.5	46.2	31.0	7.2	38.2	21.1	109.1	—
35–44	0.4	0.5	0.9	1.7	2.1	3.9	51.8	55.0	18.9	73.9	53.3	310.3	—
45–54	0.5	0.6	1.1	2.6	2.4	5.1	75.1	42.4	17.2	59.6	42.6	127.4	—
55–64	0.4	0.4	0.8	2.3	1.5	3.8	28.0	39.2	18.4	57.6	60.0	163.3	—
65–74	0.4	0.2	0.6	3.2	0.8	4.0	6.9	27.9	15.0	42.8	36.7	93.9	—
75+	0.2	0.1	0.3	2.0	0.4	2.4	32.1	13.3	11.7	25.1	14.8	49.2	59
Total	2.5	2.0	4.5	13.1	8.2	21.2	247.1	234.3	100.7	334.9	241.2	1,137.6	59
Females													
0–4	0.0	—	0.0	0.0	—	0.0	—	3.7	2.5	6.2	2.1	—	—
5–14	0.0	0.0	0.1	0.1	0.0	0.1	—	6.4	2.9	9.3	6.2	105.9	—
15–24	0.1	0.0	0.1	0.2	0.1	0.3	26.2	18.4	7.5	25.9	4.6	166.7	—
25–34	0.2	0.3	0.5	0.7	1.3	2.0	30.5	43.3	9.4	52.7	32.0	321.3	—
35–44	0.4	0.6	1.0	1.6	2.6	4.1	30.5	66.1	18.2	84.3	57.2	335.5	—
45–54	0.5	0.6	1.1	2.2	2.7	4.9	17.9	65.8	23.4	89.2	63.5	347.7	—
55–64	0.3	0.3	0.6	1.6	1.4	3.0	35.9	37.5	16.4	54.0	35.4	133.2	0
65–74	0.3	0.2	0.4	1.7	1.2	2.9	30.3	19.0	9.2	28.1	32.2	58.6	16
75+	0.3	0.1	0.4	2.6	1.1	3.8	39.9	28.5	21.5	50.0	26.6	33.6	155
Total	2.1	2.1	4.2	10.8	10.4	21.2	211.1	288.8	110.9	399.8	259.8	1,502.5	172

(a) Public acute, public psychiatric and repatriation hospitals.

(b) Out-of-hospital medical services only.

Table D.15: Disorders of muscles, tendons and soft tissue: total health system costs by health sector, sex and age, 1993–94 (\$ million)

Sex / age	Hospital inpatients				Nursing homes	Medical services ^(b)			Pharmaceuticals			Allied health	Other ^(c)	Total costs ^(d)
	Public hospitals ^(a)	Private hospitals	Non-inpatients	Total hospital		GPs	Specialist	Total medical	Prescription	Over-the-counter	Total			
Males														
0–4	0.4	0.2	—	0.6	—	0.2	0.2	0.4	0.0	0.1	0.1	0.6	0.1	1.7
5–14	1.1	0.5	2.7	4.4	—	1.4	2.3	3.7	0.1	0.3	0.3	1.3	0.5	10.2
15–24	2.2	2.9	3.7	8.8	—	2.5	2.7	5.1	0.9	0.8	1.7	6.1	1.2	23.0
25–34	3.0	4.4	4.7	12.1	—	3.4	2.7	6.0	1.7	1.0	2.7	17.1	2.1	40.0
35–44	2.9	5.1	10.8	18.8	—	4.4	3.6	8.0	2.8	1.6	4.3	9.9	2.2	43.3
45–54	3.1	5.9	6.0	15.0	—	5.1	5.8	11.0	2.9	1.5	4.4	8.9	2.1	41.4
55–64	3.5	5.5	2.7	11.7	0.3	4.3	5.1	9.4	3.6	1.5	5.0	7.1	1.8	35.4
65–74	4.6	4.1	2.3	11.0	0.5	2.9	6.1	9.0	3.6	1.1	4.7	3.1	1.5	29.8
75+	2.7	1.5	—	4.2	5.3	1.8	1.6	3.3	2.2	0.5	2.7	0.8	0.9	17.3
Total	23.6	30.2	32.8	86.6	6.1	26.0	30.0	56.0	17.8	8.2	25.9	55.0	12.4	242.1
Females														
0–4	0.3	0.2	—	0.5	—	0.2	0.3	0.4	—	0.0	0.0	2.5	0.2	3.6
5–14	1.0	0.7	0.4	2.0	—	1.1	2.0	3.0	0.4	0.3	0.7	1.0	0.4	7.1
15–24	2.1	2.6	1.1	5.8	—	2.5	2.3	4.9	1.0	0.9	1.8	5.6	1.0	19.0
25–34	2.6	3.1	2.3	8.0	—	3.5	4.5	8.0	2.2	1.2	3.4	10.1	1.6	31.1
35–44	2.9	4.6	8.2	15.7	—	6.5	8.0	14.5	3.2	1.7	4.9	13.5	2.6	51.2
45–54	3.3	6.8	6.0	16.1	—	6.2	7.4	13.6	4.5	1.8	6.3	11.2	2.6	49.7
55–64	3.4	5.0	2.1	10.6	0.0	4.0	5.8	9.8	4.0	1.4	5.3	5.5	1.7	32.9
65–74	4.2	4.4	1.1	9.6	2.0	3.8	5.2	9.0	5.0	1.5	6.6	4.4	1.7	33.3
75+	3.7	2.9	3.9	10.6	19.9	3.0	4.6	7.6	3.8	1.2	5.0	3.1	2.5	48.7
Total	23.5	30.2	25.1	78.9	21.9	30.7	40.1	70.8	24.0	10.0	34.1	56.9	14.2	276.8

(a) Public acute, public psychiatric and repatriation hospitals.

(b) Medical services for private patients in hospitals are included under Hospital inpatients.

(c) Includes other institutional, non-institutional and administration expenditure, and research.

(d) Excludes expenditure for public health services, community health services, ambulances, medical aids and appliances.

Table D.16: Disorders of muscles, tendons and soft tissue: health service utilisation by health sector, sex and age, 1993–94

Sex / age	Hospital admissions ('000)			Hospital bed days ('000)			Non-inpatient occasions of service ('000)	Medical services ^(b) ('000)			No. of prescriptions ('000)	Allied health consultations ('000)	Nursing home residents
	Public hospitals ^(a)	Private hospitals	Total hospital	Public hospitals ^(a)	Private hospitals	Total hospital		GPs	Specialist	Total medical			
Males													
0–4	0.4	0.1	0.5	0.5	0.1	0.6	—	7.0	3.5	10.5	0.7	34.4	—
5–14	0.7	0.3	1.0	1.4	0.3	1.8	40.6	55.3	40.7	96.0	8.0	75.1	—
15–24	1.4	1.3	2.7	2.7	1.8	4.6	56.6	99.3	40.3	139.7	64.1	354.2	—
25–34	1.7	2.1	3.8	3.9	3.1	7.0	71.0	140.1	49.2	189.3	142.8	990.3	—
35–44	1.7	2.4	4.1	4.0	3.9	7.9	163.0	187.5	73.1	260.6	234.3	573.4	—
45–54	1.7	2.7	4.4	4.2	5.0	9.2	90.9	213.7	104.4	318.1	238.4	516.4	—
55–64	1.9	2.3	4.2	5.0	5.2	10.2	40.3	179.7	95.7	275.3	271.7	410.8	9
65–74	2.0	1.8	3.8	6.4	4.7	11.1	34.4	125.2	114.6	239.7	248.5	176.6	14
75+	1.0	0.6	1.6	5.9	2.7	8.6	—	70.0	38.6	108.6	169.2	46.2	145
Total	12.5	13.6	26.1	34.1	27.0	61.0	496.7	1,077.7	560.2	1,637.8	1,377.6	3,177.1	168
Females													
0–4	0.3	0.1	0.4	0.4	0.1	0.5	—	7.4	4.3	11.7	—	141.7	—
5–14	0.6	0.3	1.0	1.1	0.8	1.9	5.9	42.8	32.4	75.2	41.5	60.4	—
15–24	1.4	1.2	2.6	2.4	1.7	4.1	17.2	106.9	47.7	154.5	70.6	321.5	—
25–34	1.6	1.5	3.1	3.1	2.8	5.9	34.5	152.6	74.8	227.4	139.2	585.9	—
35–44	1.7	2.1	3.8	3.3	3.9	7.3	124.5	273.0	144.3	417.4	247.6	779.3	—
45–54	1.9	2.9	4.8	4.2	6.7	11.0	90.7	251.6	145.2	396.8	366.7	647.4	—
55–64	1.9	2.1	4.0	4.8	5.1	9.9	31.6	162.9	124.1	287.0	284.4	315.2	1
65–74	1.9	1.6	3.5	6.5	5.8	12.3	16.5	156.2	107.7	263.9	357.7	255.6	56
75+	1.4	0.9	2.3	9.0	6.0	14.9	59.4	121.8	104.1	225.9	266.5	179.8	543
Total	12.7	12.7	25.5	34.8	32.9	67.7	380.2	1,275.2	784.6	2,059.7	1,774.3	3,286.8	600

(a) Public acute, public psychiatric and repatriation hospitals.

(b) Out-of-hospital medical services only.