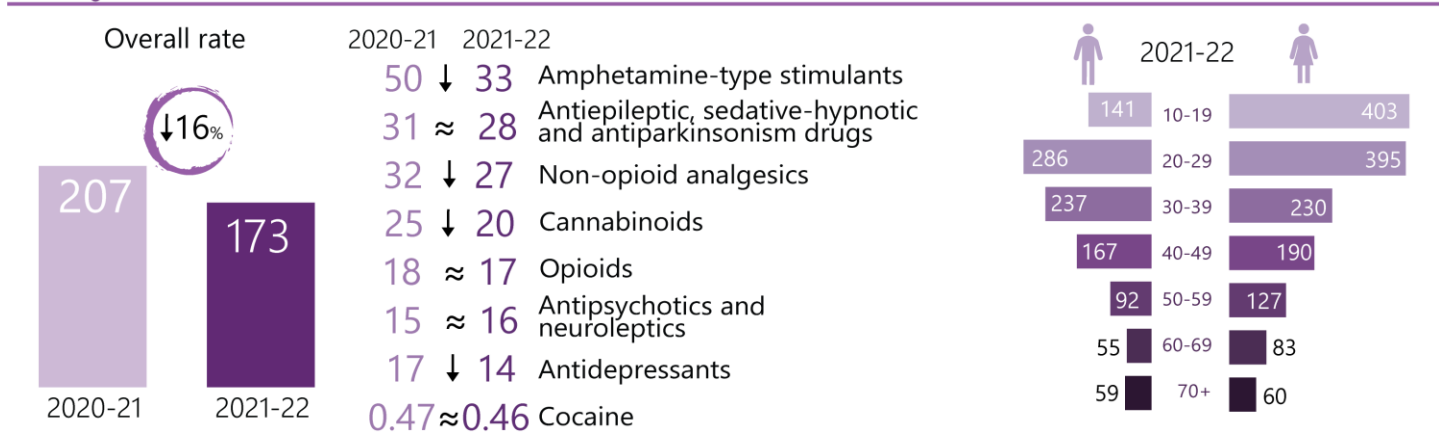


Western Australia



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



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

There were 4,599 hospitalisations with a drug-related principal diagnosis in [Western Australia](#) in 2021-22, equivalent to 0.39% of all hospitalisations in Western Australia.

This is equivalent to 173 hospitalisations per 100,000 people, which was 16% lower than the rate in 2020-21 (207 hospitalisations per 100,000 people) (Table A24, [Appendix](#)) and the lowest rate since 2008-09 ([Figure 1](#)).

Sex

The rate of hospitalisations was higher among [females](#) than males in 2021-22 (204 versus 143 hospitalisations per 100,000 people, respectively).

Age

In 2021-22, the rate of hospitalisations was highest [among](#) the 20-29 age group, followed by the 10-19 and 30-39 age groups (339, 268, and 233 hospitalisations per 100,000 people, respectively). Among males, the rate of drug-related hospitalisations was highest in the 20-29 age group, and among females in the 10-19 and 20-29 age groups.

Remoteness Area of Usual Residence

The highest rate of hospitalisations in 2021-22 was observed in [outer regional](#) Western Australia (227 per

100,000 people), while the number of hospitalisations was highest in major city areas (3,380 hospitalisations,) ([Figure 2](#)).

External Cause of Drug Poisoning

In 2021-22, 59% of drug-related hospitalisations in Western Australia were due to drug poisoning. Furthermore, 72% of drug poisoning-related hospitalisations were intentional (74 hospitalisations per 100,000 people) and 23% were unintentional (23 hospitalisations per 100,000 people) ([Figure 3](#)).

Drug Type

In 2021-22, the rate of hospitalisations was [highest](#) where there was a principal diagnosis indicating amphetamine-type stimulants (33 hospitalisations per 100,000 people) ([Figure 4](#)).

Compared to 2020-21, there were significant decreases in 2021-22 in the rates of hospitalisations related to:

- amphetamine-type stimulants (including methamphetamine),
- non-opioid analgesics,
- cannabinoids, and
- antidepressants (Table A24, [Appendix](#)).

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

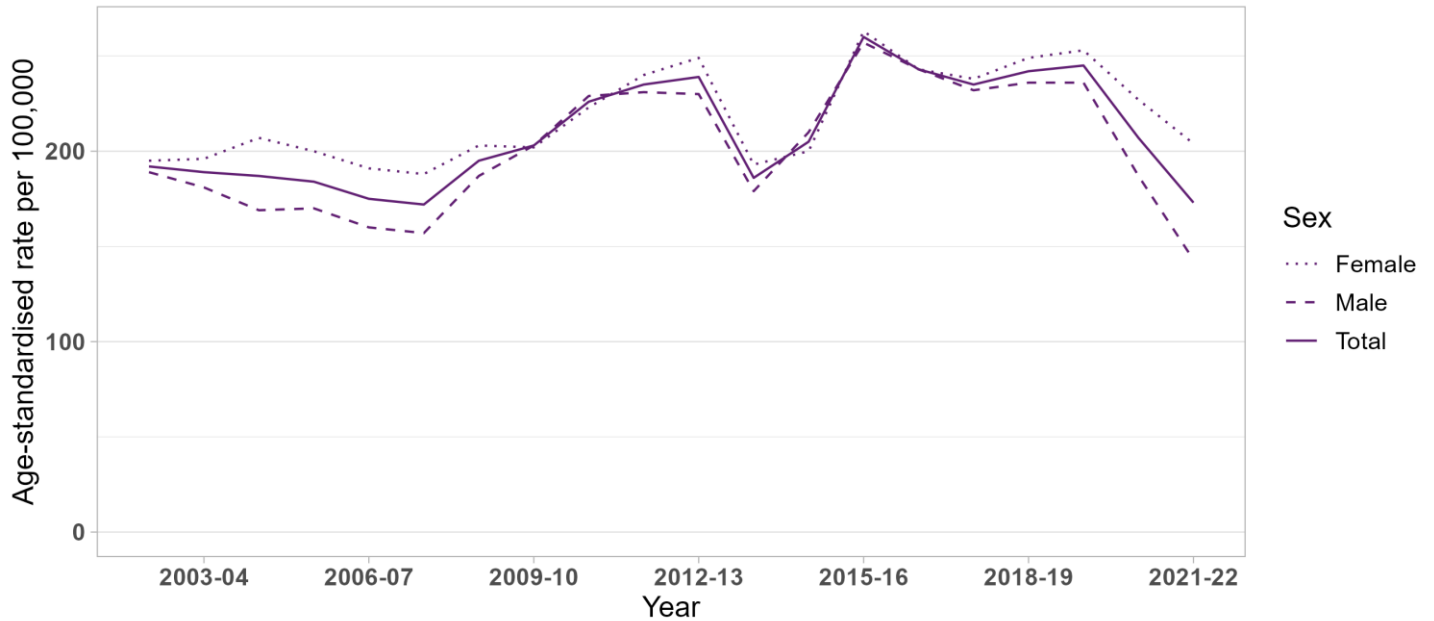
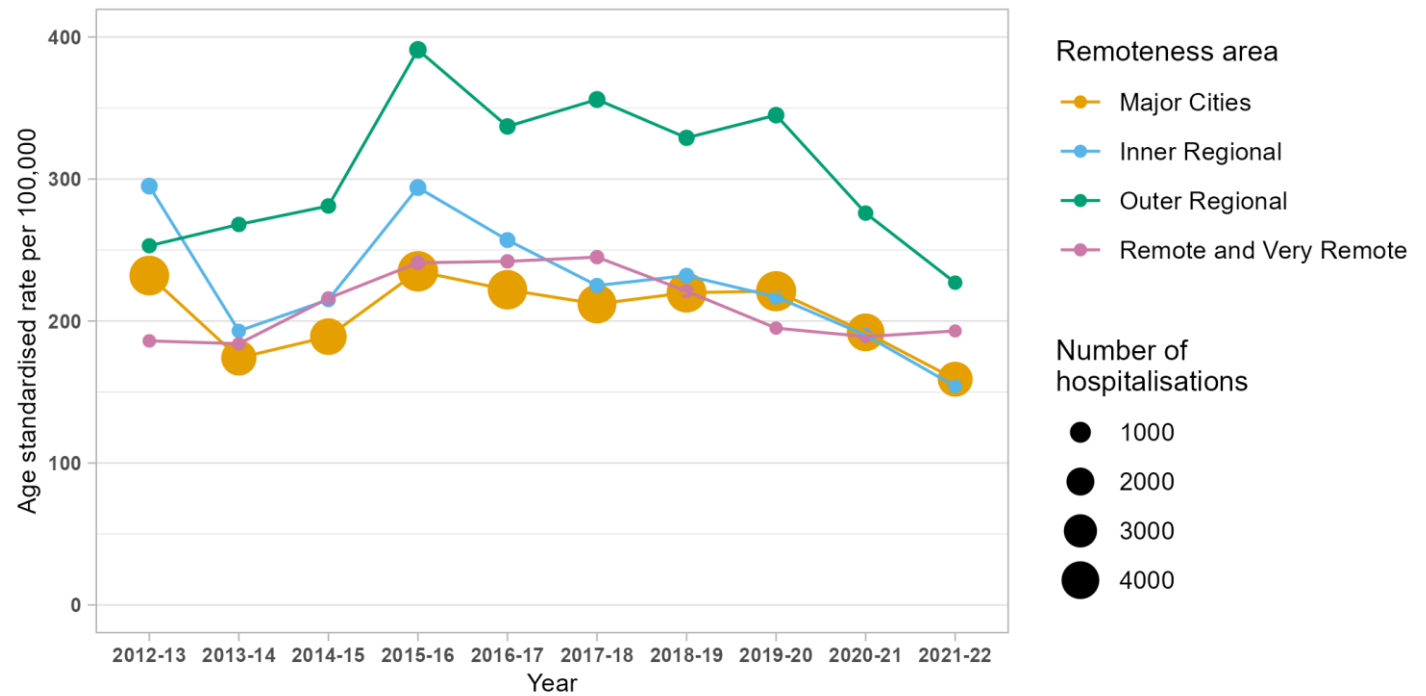


Figure 2. Age-standardised rate per 100,000 people of drug-related hospitalisations, by remoteness, Western Australia, 2012-13 to 2021-22.



Note: The size (area) of the bubble is proportional to the number of hospitalisations. Data on remoteness are only available from 2012-13.

Figure 3. Age-standardised rate per 100,000 people of drug-related hospitalisations, by principal diagnosis of mental and behavioural disorder due to substance use (A) and external cause of poisoning (B), Western Australia, 2002-03 to 2021-22.

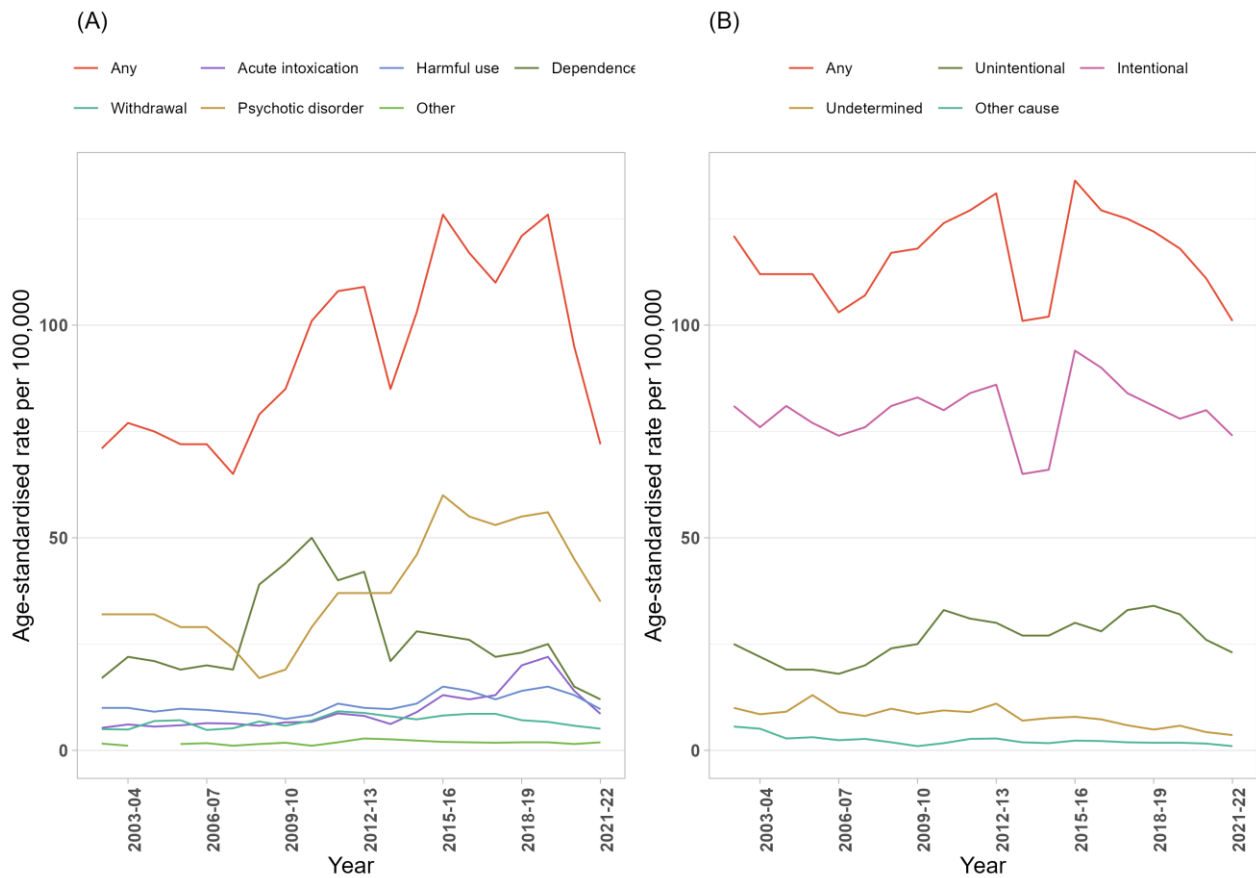
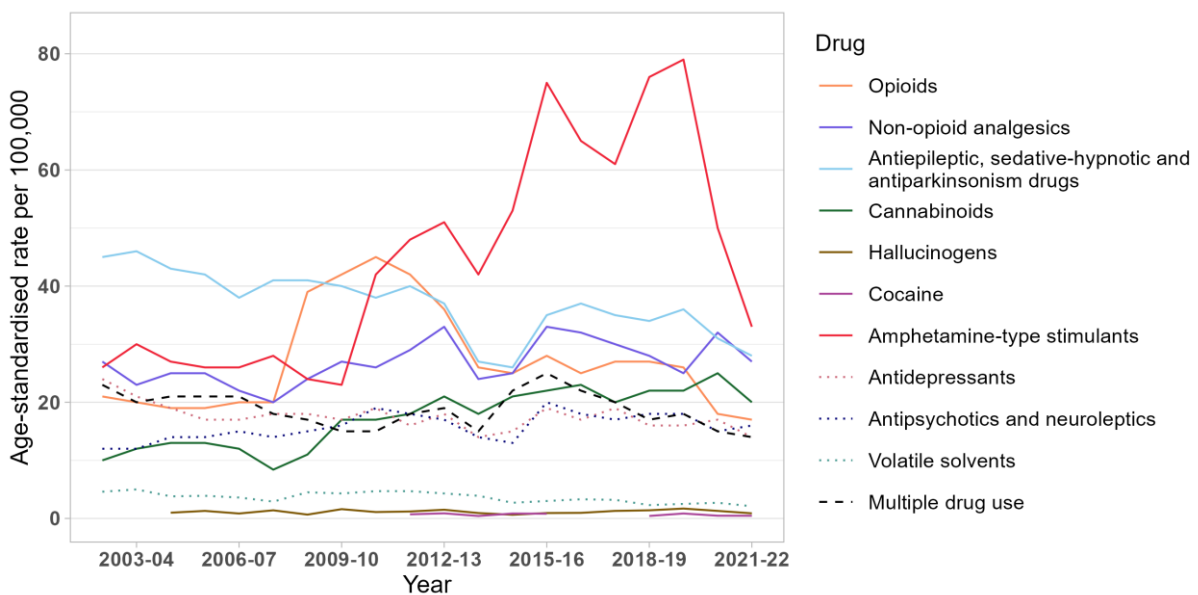


Figure 4. Age-standardised rate per 100,000 people of drug-related hospitalisations, by drug identified in the principal diagnosis, Western Australia, 2002-03 to 2021-22.



Note: Age-standardised rates were not calculated if the number of hospitalisations was less than or equal to 10 (please refer to our [methods](#) document for details). Suppressed data are visible as gaps in the data series.

Table A24. Age-standardised rate (per 100,000 people) of drug-related hospitalisations in 2021-22 and average percent change for difference compared to 2020-21, in Western Australia by drug type identified in the principal diagnosis

Drug	Rate in 2021-22 (95% CI)	Rate in 2020-21 (95% CI)	APC (95% CI)
All drugs	173 (168, 178)	207 (201, 212)	-16 (-20, -13)
Amphetamine-type stimulants	33 (31, 35)	50 (47, 53)	-33 (-39, -27)
Antiepileptic, sedative-hypnotic and antiparkinsonism drugs	28 (26, 30)	31 (29, 33)	-8.1 (-16.7, 1.5)
Non-opioid analgesics	27 (25, 29)	32 (30, 34)	-15 (-23, -6)
Methamphetamine	26 (24, 28)	41 (39, 44)	-38 (-44, -32)
Cannabinoids	20 (18, 21)	25 (23, 27)	-21 (-29, -11)
Opioids	17 (16, 19)	18 (17, 20)	-5.9 (-17.1, 6.8)
Antipsychotics and neuroleptics	16 (14, 17)	15 (13, 16)	5.9 (-7.8, 21.7)
Antidepressants	14 (13, 16)	17 (15, 19)	-15 (-26, -2)
Multiple drug use	14 (12, 15)	15 (13, 16)	-7.2 (-19.7, 7.1)
Volatile solvents	2.1 (1.6, 2.8)	2.7 (2.1, 3.4)	-21 (-44, 12)
GHB	1.7 (1.3, 2.3)	1.6 (1.2, 2.2)	5.1 (-30.7, 59.4)
Hallucinogens	0.88 (0.55, 1.33)	1.3 (0.9, 1.8)	-32 (-60, 17)
Cocaine	0.46 (0.24, 0.81)	0.47 (0.24, 0.83)	-2.2 (-56.1, 117.9)

Note: 95% confidence intervals for the age-standardised rate and average percent change are shown in brackets. Please refer to our [methods](#) document on 'Presentation of results' for interpretation of average percent change. Please also refer to our [methods](#) document on 'Scope of the data' and 'Coding of hospitalisations' for specifications of data selected and all exclusions.

ISSN 2982-0782

DOI <https://doi.org/10.26190/unsworks/30193>

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This report was prepared by researchers from the National Drug and Alcohol Research Centre for the Drug Trends program. The Drug Trends program is coordinated by the National Drug and Alcohol Research Centre, UNSW Sydney and undertaken in partnership with the Burnet Institute, National Drug Research Institute, University of Queensland, and University of Tasmania.

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Recommended citation: Chrzanowska, A, Man, N, Sutherland, R, Degenhardt, L, Peacock, A. Trends in drug-related hospitalisations in Australia, 2002-2022. Sydney: National Drug and Alcohol Research Centre, UNSW Sydney; 2024. Available from: <https://doi.org/10.26190/unsworks/30193>

Please note that as with all statistical reports there is the potential for minor revisions to data in this report. Please refer to the online version at [Drug Trends](#).

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

Funding

The Drug Trends program is funded by the Australian Government Department of Health and Aged Care under the Drug and Alcohol Program.

Data source

We would like to acknowledge the Australian Institute of Health and Welfare and jurisdictional data custodians for the provision of data from the National Hospital Morbidity Database.

Acknowledgements

We thank Dr Louise Tierney and her team from the Tobacco, Alcohol and Other Drugs Unit at the Australian Institute of Health and Welfare for reviewing the report.

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

Related Links

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