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2023 Symposium

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Vaccine-Preventable Hospitalisations in Adult Mental Health Service Users: A Population Study

Grant Sara, Patrick Gould

Equally Well Forum, July 2023

Acknowledgements



The traditional owners of the lands on which we meet, work and live



People who have used NSW hospital or community mental health services, whose data we use with gratitude and respect



Context



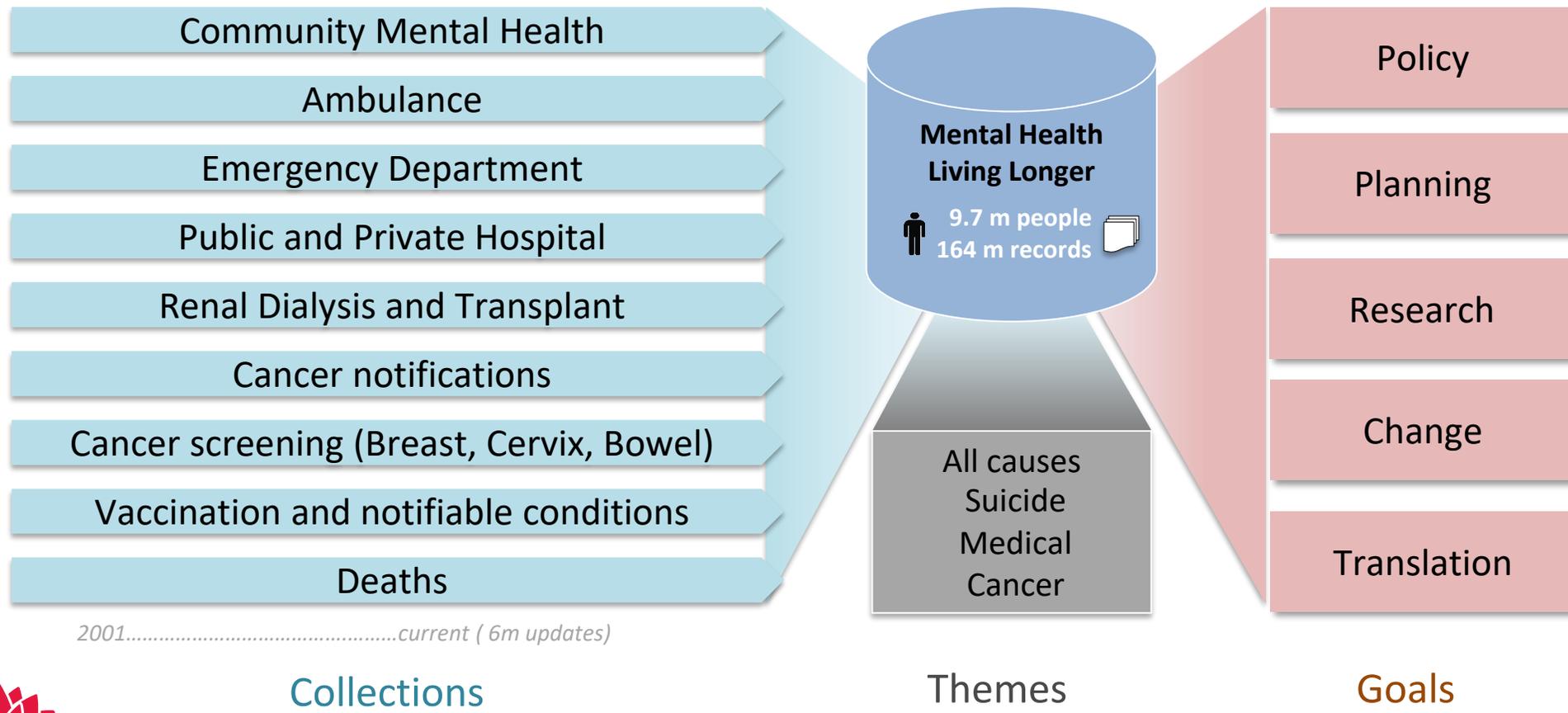
- ▶ Vaccine-preventable illnesses are an important cause of illness and death
- ▶ Studying preventable hospitalisations in NSW, we found very high rates of vaccine-preventable admissions in mental health service users

This study asks:

- ▶ **What is the rate of vaccine preventable hospitalisation (VPH) for NSW adults who have had recent contact with mental health services?**
- ▶ **How does this rate differ for different types of VPH?**
- ▶ **How do LHD rates vary?**

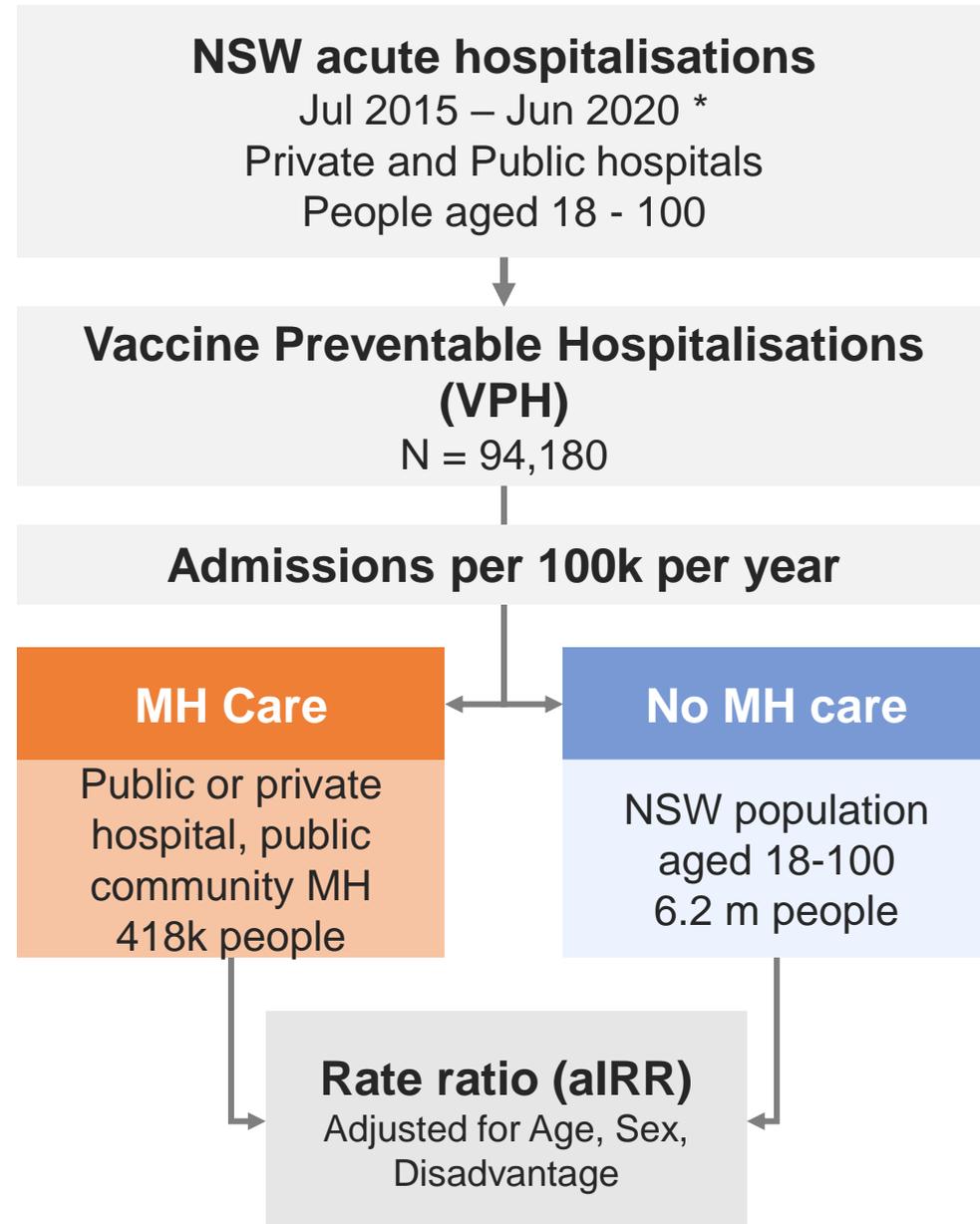
Mental Health Living Longer data linkage project

Linking NSW Health data to understand and reduce premature mortality in NSW mental health service users



Methods

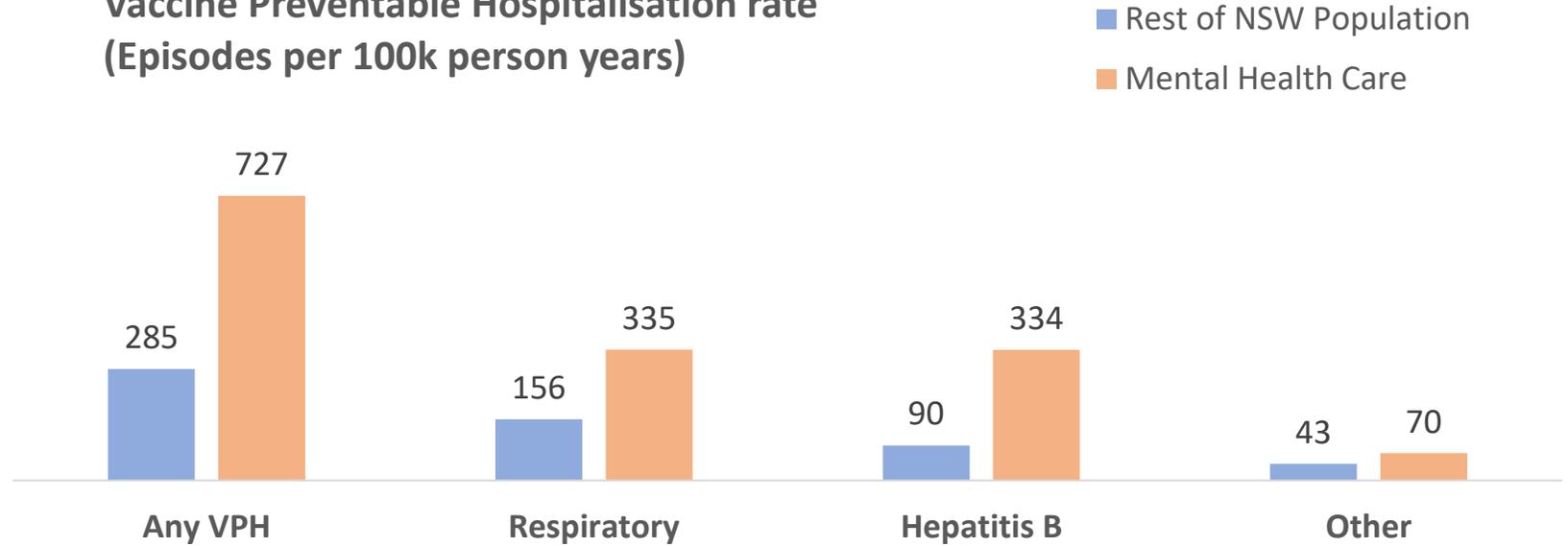
Hepatitis B
Chronic Hepatitis B
Acute Hepatitis B
Respiratory infections
Influenza
COVID *
Haemophilus pneumonia
Streptococcus pneumoniae
Pertussis
Diphtheria
Other
Zoster (Shingles)
Varicella
Mumps
Measles
Haemophilus meningitis
Rubella
Rotaviral enteritis
Acute poliomyelitis
Tetanus



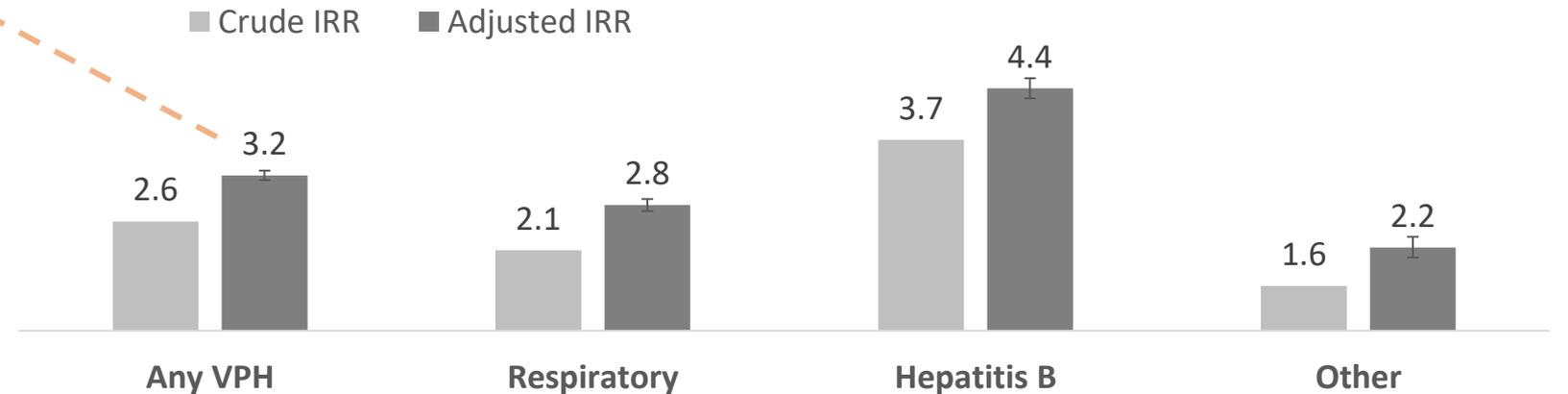
* COVID analysis done separately
(Jul 2020 – Sept 2021)
Public hospital admissions only

Mental health service users had **3.2x** more vaccine-preventable hospital admissions

Vaccine Preventable Hospitalisation rate (Episodes per 100k person years)



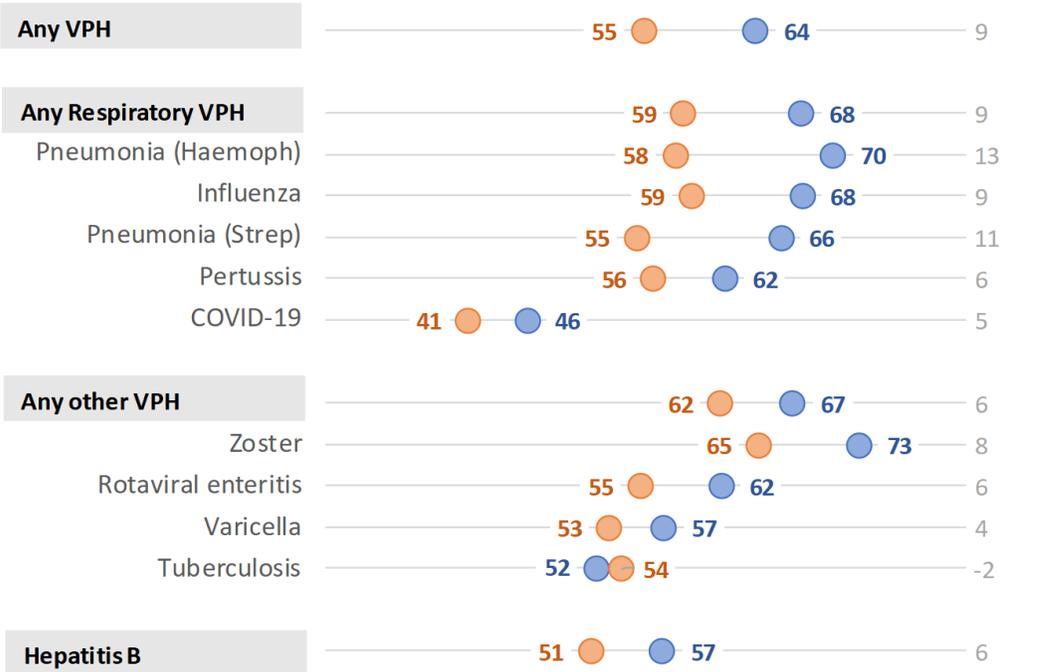
Incidence Rate Ratio



Particularly high risks in mental health service users aged 35 - 65

Average age at admission

MH service users Other NSW residents Gap (yrs)

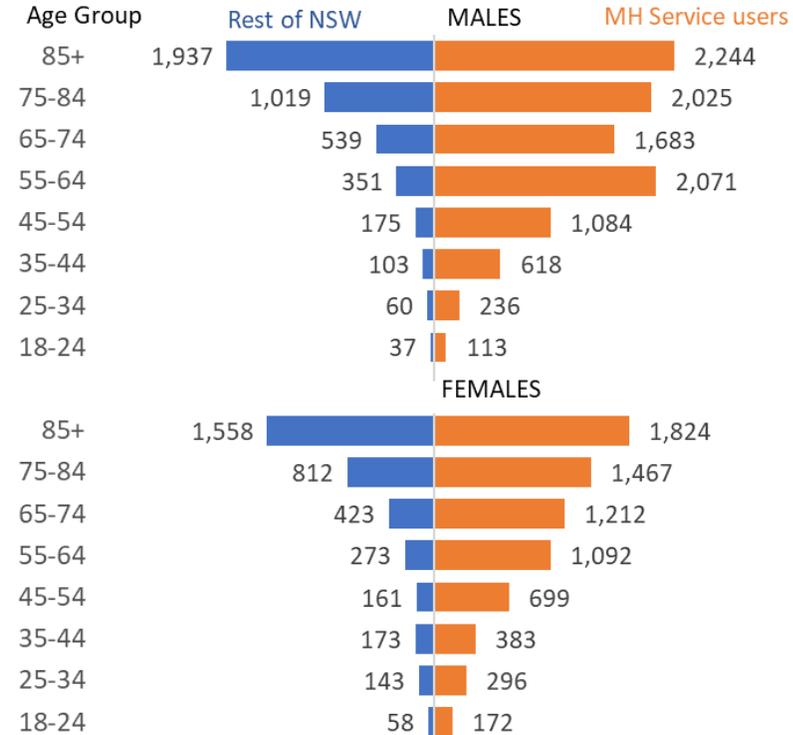


9 years younger average age

Biggest age gap for respiratory infections

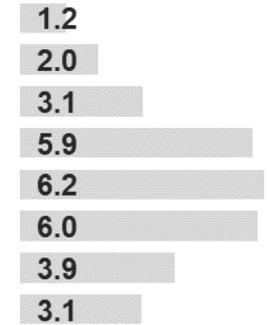
NSW Vaccine Preventable Hospitalisations

(Rate per 100k person years, 2015-2020)

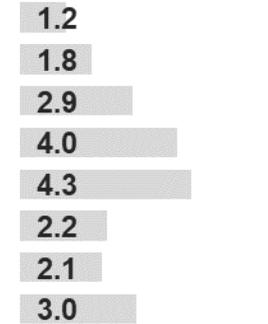


Relative Risk (aIRR)

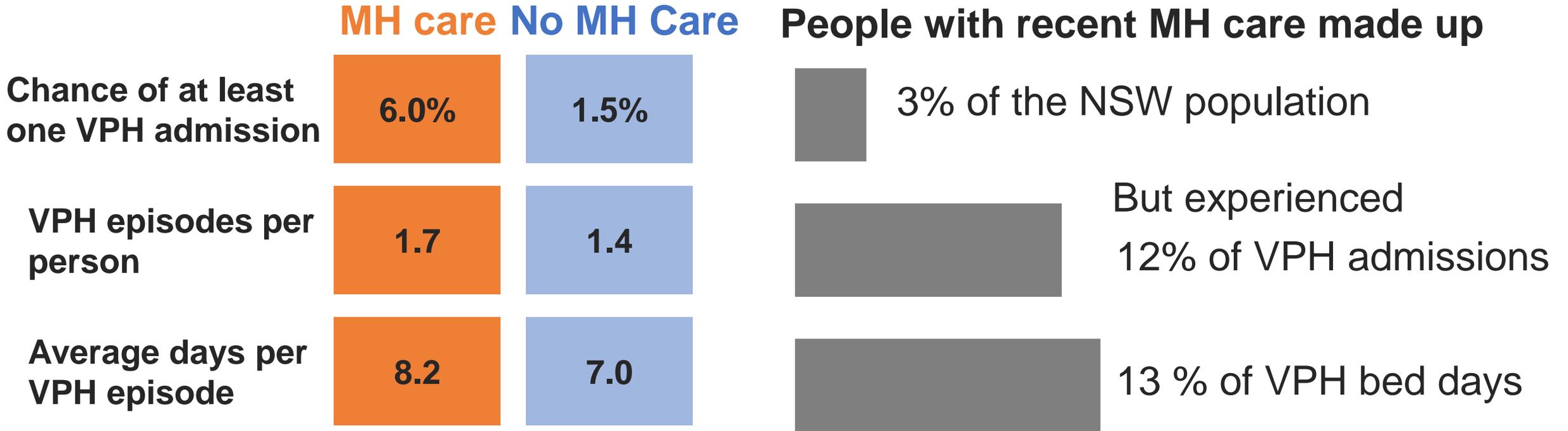
MALES



FEMALES



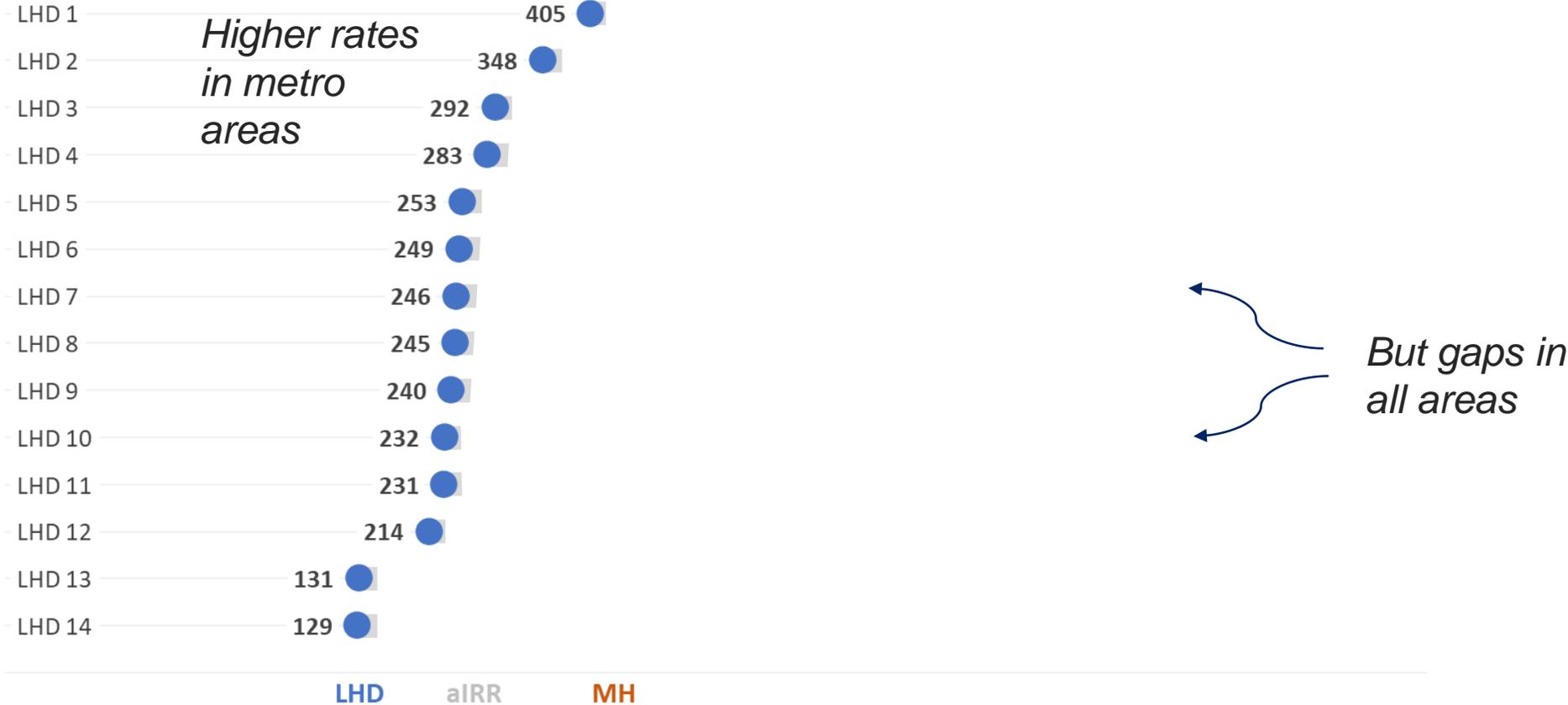
Personal and system impacts are considerable



Excludes admissions to MH units, non-acute admissions and very long hospital stays (>120 days)

VPH “gap” varies between health districts: 2.5 – 3.9 x

Vaccine preventable hospitalisations by LHD: **Mental health consumers** compared to **rest of LHD population**

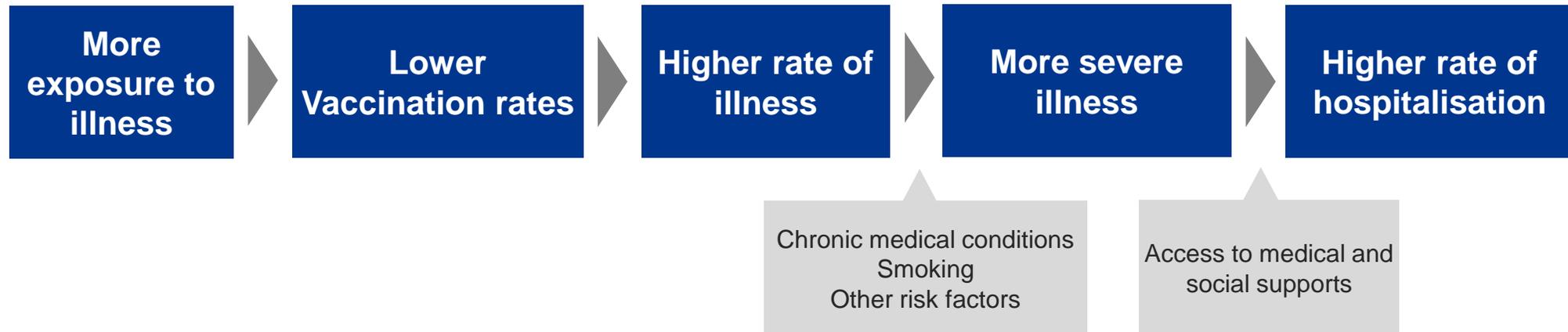


Gap figure is incidence rate ratio, adjusted for differences in age within each LHD (aIRR).



Why do MH service users experience higher rates ?

- ▶ Likely to be many interacting factors
- ▶ Different factors for different people, places and illnesses



- ▶ Understanding these could help to target improvement efforts

Next steps for this work

- ▶ More study planned ... adding data on:
 - ▶ Vaccination rates (AIR)
 - ▶ Rates of selected conditions (NCIMS)
- ▶ Identify and support models which support vaccine access and equity
- ▶ Identify policy barriers and advocate for change
- ▶ Develop local reports to support improvement efforts

Thankyou

Mental Health Living Longer project team and collaborators

- ▶ Steering Committee (Chair: Sharon Smith)
- ▶ Aboriginal Sovereign Steering Committee (Co-chairs: Ashley Brown, Pauline Ferkula)
- ▶ Academic Advisory Group and collaborating researchers: Matthew Large, Jackie Curtis (UNSW), Faye McMillan (UTS), Tracey O'Brien, Richard Walton, David Currow (Cancer Institute NSW), Angela Webster, Nicole de la Mata, Nick Glozier (USyd), Philip Burgess (UQ), Parashar Ramanuj (National Orthopaedic Hospital, London), Niels Mulder (Erasmus, Netherlands)
- ▶ InforMH: Jenn Humphrey, Wendy Chen, Fred Wu, Patrick Gould

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