Preventable, but not prevented

Research Snapshot #3

Source: Sara, G., et al. (2021). Potentially preventable hospitalisations for physical health conditions in community mental health service users: A population-wide linkage study. Epidemiology and Psychiatric Sciences.

Quick take

Many physical health hospitalisations among people living with mental health conditions could be prevented through effective primary and community care. Yet compared with the general population, mental health service users are:

- 4x more likely to be hospitalised for preventable physical health conditions
- Stay in hospital 5x longer
- Hospitalised at younger ages, with risks emerging decades earlier

Acronym guide

PPH	Potentially preventable hospitalisation
NSW	New South Wales

Methods at a glance

Population-wide data linkage study

178,000+ people using community mental health services

Compared to the general NSW population over

Outcomes: PPH admissions and hospital days (rates per 100,000 population)

Key issues → Practical recommendations

Preventable hospitalisations reflect gaps in care

→ Strengthen integration of primary, physical and mental health care

Inequities emerge early

→ Embed physical health screening and prevention in mental health services

High rates of vaccine-preventable admissions

→ Increase access to vaccinations

Longer and repeat hospital stays

→ Improve follow-up and care coordination after discharge

Key findings

Early onset inequity:

- People aged 20–29 with mental health conditions have similar preventable hospitalisation rates to the general population aged 60+

Major drivers:

- Highest excess risk: respiratory disease and diabetes complications
- Vaccine-preventable conditions account for most excess hospital days

Condition	Hospital admissions	Days in hospital
Acute	3x higher	5x higher
Chronic	4x higher	5x higher
Vaccine-preventable	5x higher	7x higher

Author's conclusion

> PPHs for physical health conditions are substantially increased in people with mental health conditions. PPH rates may be an indicator of less accessible, integrated or effective health care.