

# Ambulance attendances for alcohol intoxication among mid age and older Victorians

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## Background

In our regular reporting of the AOD Ambo project, the average age of attendance for alcohol intoxication is around 40-41 years and this has been gradually increasing. Media and a substantial amount of research has focused on young people and this has resulted in those from about mid age being overlooked in the area of alcohol intoxication.

Those 40 years and older are a large cohort, they include the baby boomers born post war through to 1964 (approx.). In terms of numbers they are a cause for concern especially around future and current service demand and harm. The ageing population is not a new phenomenon. Examining consumption more generally, research shows an inverse relationship with age, and the focus tends to move to the younger age groups. Many analyses statistically adjust for age and consequently masks what is happening in these older groups. Furthermore, the conventional means of calculating consumption results often in an average consumption volume. Even the Australian alcohol guidelines are premised on averaged consumption.

Where older age groups have been examined the focus is in the 65 plus groups. The focus however has not been about intoxication but consumption, often low risk consumption and the interplay with ageing morbidities and prescribed medications. This is important work however intoxication is excluded.

Measuring intoxication is challenging. Using secondary data sources restricts to what is available. Heavy episodic drinking has been used as a proxy for intoxication or getting drunk. Hospital data does have the capacity to code for intoxication but these codes are rarely used. In examining the literature on those in mid age and older regarding intoxication there is a deficit of research. Language complicates the issues and our standard measures of consumption tend to hide it.

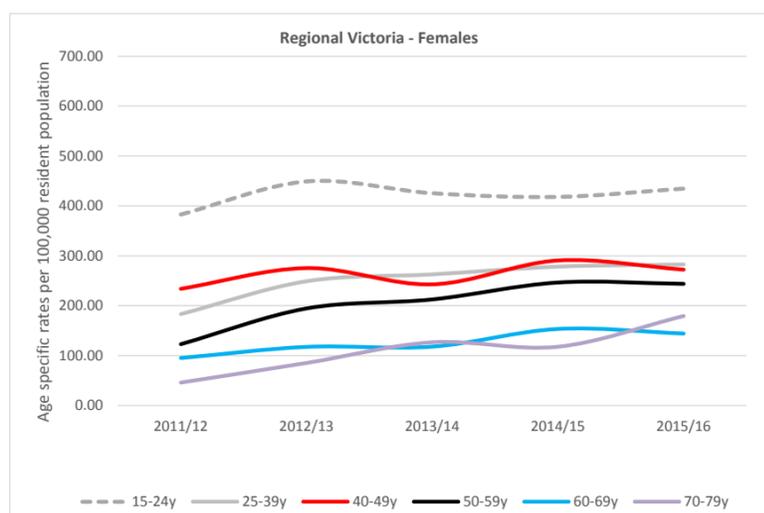
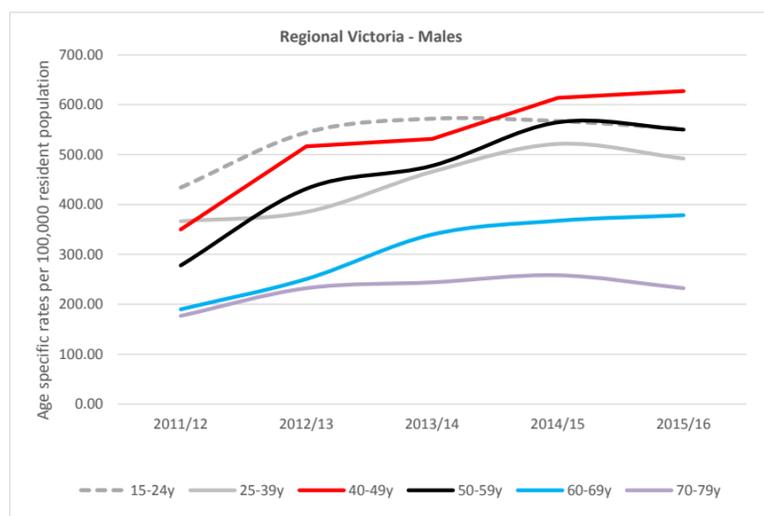
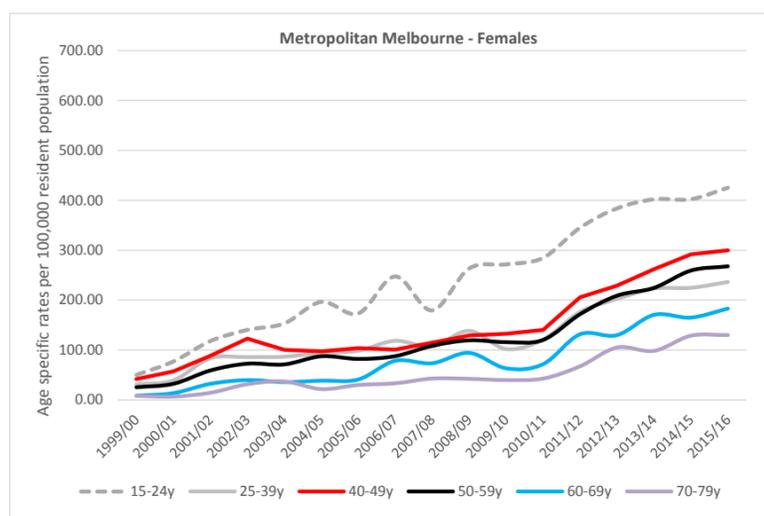
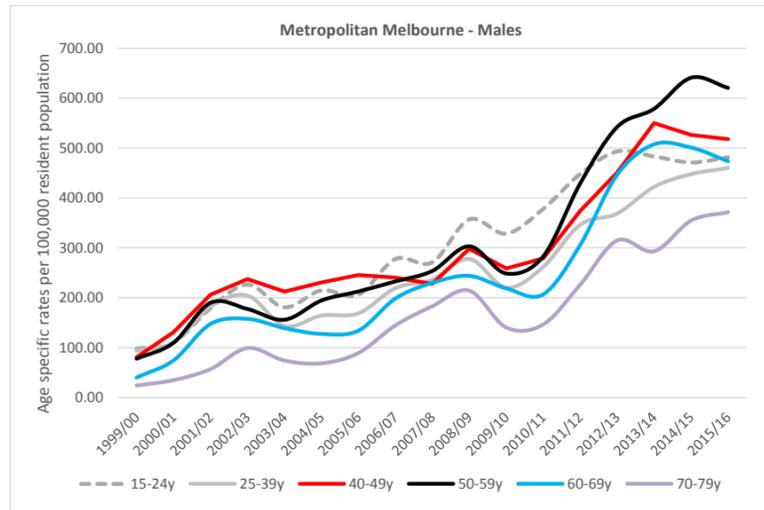
The Ambo project offers an opportunity to examine alcohol intoxication specifically over time for age and gender. This paper explores age and gender trends over time from 1999 to 2016 in metropolitan Melbourne, and 2011 to 2016 in regional Victoria.

## Method

Data has been derived from the Ambo Project. The Ambo Project was established in 1998 and is funded by the Victorian Department of Health and Human Services. The project was restricted to metropolitan Melbourne until 2011, when it was expanded to the rest of Victoria. Turning Point receives patient care records (electronic since 2006) from Ambulance Victoria and these records are examined and coded by a dedicated team of researchers at Turning Point adhering to strict protocols. The result is an extensive database spanning 18 years and over 500,000 cases relating to alcohol and drug-related attendances, as well as mental health, self harm and suicide since 2012.

This poster examines alcohol intoxication only. This is defined as the immediate or recent over or inappropriate ingestion of alcohol and where the assessment of causality is that only alcohol was involved in causing the attendance. That is as far as could be ascertained no other drugs were involved.

The age groups of interest are 40-49y, 50-59y, 60-69y and 70-79y. The 15-39y have been included for context. Sex and age specific rates were calculated and reported per 100,000 resident population. Financial years are reported. Melbourne metropolitan area includes for three metropolitan regions – North/West, Eastern and Southern metropolitan regions. The remainder of the state is defined as regional Victoria.



## Results

In metropolitan Melbourne, the rate of alcohol intoxication-related ambulance attendances has increased significantly for both males and females since 1999.

For males:

- Attendance rates have increased from 78 to 621 per 100,000 since 1999 among the 50-59y males, and from 81 to 518 per 100,000 among the 40-49y males.
- The 50-59y males have trended higher than the 25-39y males since around 2003.
- In the main the 40-49y males have trended higher than 25-39y males.
- The start of a downward turn may be evident for the 40-49y & 60-69y males (2013) and 50-59y (2015).
- The 70-79y males have fluctuated over time although continue to trend upwards.

For females:

- Rates are significantly lower than for males for all groups shown.
- Attendance rates have increased from 25 to 268 per 100,000 since 1999 among the 50-59y females, and from 42 to 300 per 100,000 among the 40-49y females.
- The 40-49y females have shown similar rates with the 25-39y, however since 2010 they have started to diverge with 40-49y females showing higher rates.
- Unlike males, 15-24y females have significantly higher rates than all shown age groups.
- Rates are continuing to trend upwards except for 70-79y females in 2015.

In regional Victoria, the rate of alcohol intoxication-related ambulance attendances has increased overall for the five years shown, with significant gender differences.

For males:

- Attendance rates have increased from 278 to 550 per 100,000 since 2011 among the 50-59y males, and from 350 to 627 per 100,000 among the 40-49y males.
- The 50-59y males have trended higher than the 25-39y males in the last two years.
- In the main the 40-59y males have trended higher than 25-39y (since 2012).
- The start of a downward turn is evident for the 50-59y and 70-79y males.

For females:

- Attendance rates have also increased from 123 to 244 per 100,000 since 2011 among the 50-59y females, and from 234 to 272 per 100,000 among the 40-49y females.
- The 70-79y females have shown the largest percentage increase in rates since 2011.
- The 40-49y females are similar to the 25-39y females
- Unlike males in regional Victorian the over 50 females have lower rates.
- The upturn in rates is evident in the 70-79y females.

## Conclusions

Rates for alcohol intoxication ambulance attendances increased over time for all age groups, gender and region. This increasing trend in the mid and older age groups cannot be explained simply by an ageing population. Importantly, given these groups are a large and growing cohort, demand is likely to increase with implications for service planning and use. This increasing burden on acute health services demonstrates need for targeted approaches to address harmful alcohol use in the over 40s.

## Acknowledgments

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