



West Coast District Health Board

Te Poari Hauora a Rohe o Tai Poutini

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4 February 2021

9(2)(a)

RE Official information request WCDHB 9517

I refer to your email dated 15 January 2021 requesting the following information under the Official Information Act from West Coast DHB. Specifically:

- 1. Please provide a monthly breakdown of the number of people treated at West Coast District Health Board from 2016 to 2021 to date (including through the COVID-19 period) for MDMA related admissions. Can you please break it down by age groups of those treated and ethnicity?**

Acute presentations to our West Coast DHB hospital are triaged through our Emergency Department (ED). The principle diagnosis or reason for admission to ED is often recorded as the injury or medical condition which is presented, rather than the underlying causative or contributory factor, such as the influence of drugs. Additionally, our central ED data system does not contain a complete profile of information regarding presentations to ED, especially where suspected or actual involvement of MDMA or drug types disguised as MDMA, such as synthetic cathinones, were a cause behind a person's admission. Any detailed information that may be recorded in this regard is held in individual clinical case notes and patient records. As there are some 11,500 admissions through our Emergency Department each year, we therefore decline to provide additional information that may or may not be held if we undertook manual research of each of individual patients' case notes, pursuant to Section 18(f) of the Official Information Act, i.e. "... that the information requested cannot be made available without substantial collation or research."

These caveats noted, we can accurately relay that there were seven presentations to our ED in the period from 1 January 2016 to 15 January 2021 where MDMA is specifically listed in our central ED data system as an actual or suspected primary factor in the individual's reason for admission. This included one case in 2017, two cases in 2018, one case in 2019 and three cases in 2020. Six were male and identified their ethnicity as European in the 16-26 age cohort; one was a female in the 26-45 age cohort and identified their ethnicity as Māori. Given this data relates to just a few individuals in any one year that may make them identifiable, we decline to provide any further information about these cases pursuant to Section 9(2)(a) of the Official Information Act, i.e. to "protect the privacy of natural persons..."

- 2. Please provide a monthly breakdown of the number of people admitted to West Coast District Health Board from 2016 to 2021 to date (including through the COVID-19 period) for MDMA related harm. Eg for those who have injured themselves with MDMA in their system. Can you please break it down by age groups of those admitted and ethnicity?**

Only one person was admitted as an inpatient between 1 January 2016 and 15 January 2021 where the admission was specifically coded as involving MDMA. This event was in 2018. Given that this relates to just one individual and further information would make them identifiable, we are declining to provide any further information about this case pursuant Section 9(2)(a) of the Official Information Act i.e. to "protect the privacy of natural persons...."

Further, we are unable to provide additional data on number of people admitted to ED for MDMA related harm due to data system limitations as stated in the response for question one above.

- 3. Please provide a monthly breakdown of patients admitted to West Coast District Health Board from 2016 to 2021 to date (including through the COVID-19 period) for consuming substances disguised as MDMA e.g. Synthetic Cathinones.**

As noted in the answer to Question 1 above, we do not specifically code events to the level where substances consumed are drug types disguised as MDMA, such as synthetic cathinones. We are therefore unable to provide a response to this part of the request pursuant to Section 18(f) of the Official Information Act, i.e. "... that the information requested cannot be made available without substantial collation or research."

- 4. Please provide a monthly breakdown of the number of people who have died from MDMA related harm at West Coast District Health Board from 2016 to 2021 to date (including through the COVID-19 period).**

There have been no deaths within West Coast DHB hospital facilities that were recorded as specifically due to MDMA, in the period from 1 January 2016 to 15 January 2021. We note that deaths and injuries due to drug-related causes within the West Coast DHB region, be they self-harm or caused by others, do not all present at our hospitals or health services. We do not hold data on deaths or injuries caused to individuals, or to others by people with drugs in their system (for an example: car crash deaths and injuries caused by drivers under the influence of drugs), that occur in the community in our DHB district that we cover. Additionally, we are not aware of any specific past research studies that explore these topics in respect of the West Coast that may have been undertaken in the time-period you request. We therefore decline your request for additional information pursuant to Section 18(g) of the Official Information Act, i.e. "that the information requested is not held..."

- 5. Please provide a monthly breakdown of the cost for each person who was treated at West Coast District Health Board from 2016 to 2021 to date (including through the COVID-19 period) for MDMA use.**

West Coast DHB does not have the ability within our costing systems to break down treatment costs for each person who has been treated by West Coast DHB-provided services, particularly when trying to isolate this down to just specific drug types such as MDMA or MDMA mimics. We note that treatments for drug-related causes – be they resultant from long term drug use or one-off events involving drug-related harm, and be it intentional, accidental, self-inflicted, inflicted by third party, or ill-defined in individual patient case note notation – could extend to all manner of emergency, medical, surgical, and mental health disciplines, physical and counselling treatments, and can be delivered in a wide range of inpatient, outpatient and community clinical settings. We therefore decline your request for costing information under Section 18(g) of the Official Information Act, i.e. "that the information requested is not held" and additionally under Section 18(f) of the Official Information Act, i.e. "that the information requested cannot be made available without substantial collation or research."

I trust this satisfies your interest in this matter.

You may, under section 28(3) of the Official Information Act, seek a review of our decision to withhold information by the Ombudsman. Information about how to make a complaint is available at www.ombudsman.parliament.nz; or Freephone 0800 802 602.

Please note that this response, or an edited version of this response, may be published on the West Coast DHB website after your receipt of this response.

Yours sincerely



Ralph La Salle
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Planning, Funding & Decision Support