

Developing the NSW surveillance plan for Australia's Kava Pilot

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Issues: The Australian Government kava pilot program allows for commercial importation since 1 December 2021. A literature review identified that excessive kava consumption, and consumption with alcohol and other drugs (AOD) can lead to adverse health effects. A comprehensive surveillance plan was needed to monitor for impacts.

Approach: A cross-agency working group was formed in early 2021 and NSW Health comprehensively reviewed datasets capturing NSW data on AOD use and harms for kava.

Key Findings: There is no coding guidance for kava in the current International Classification of Disease (or the Australian Modification ICD-10-AM), preventing analysis of routine morbidity and mortality data. Kava is listed in the Australian Standard Classification of Drugs of Concern which supports monitoring of the Alcohol and Other Drug Treatment Services National Minimum Data Set.

Data sources on harms: NSW Poisons Information Centre (PIC), National Coronial Information System, NSW Health Pathology Forensic and Analytical Science Service (FASS) Forensic Toxicology and Drugs and Driving laboratories (including coronial and sexual assault cases), NSW Police Impaired Driving Research Unit, Alcohol and Drug Information Service, Emergency Departments (through keyword searching of triage text), liver transplant registry.

FASS developed a new assay to detect six key kavalactones in blood/urine as part of routine screening. The PIC implemented a new substance code for kava.

Data sources on use: National Drug Strategy Household Survey, Australian secondary school students' alcohol and drug survey (modified question), National Aboriginal and Torres Strait Islander Health Survey.

Discussions and Conclusions: Analysis of preliminary data is underway and will be regularly monitored. Cross-agency collaboration and early implementation of dataset modifications have been pivotal in developing a comprehensive NSW surveillance plan.

Implications for Practice or Policy: Prompt development of a surveillance plan facilitates monitoring of health and social harms to inform future policy responses.

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