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| **Strengthening national COPD monitoring using linked health services data** |
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| **Introduction/Aim:**  Monitoring the prevalence of Chronic Obstructive Pulmonary Disease (COPD) is important for assessing the health and economic burden of the condition, health service planning and evaluating progress in prevention and management. Current monitoring efforts rely on survey data that is time consuming and expensive to collect which prevents annual updates.  The aim of this work was to develop methods to estimate the prevalence of COPD among health service users in linked health administrative data as a cost-efficient and routinely updatable alternative to survey estimates.  **Methods:**  Prevalence estimates are of the number of people aged 35 and over at 30 June 2019 who received emergency or hospital treatment for their COPD, or were dispensed 2 or more COPD-specific prescriptions in the year before.  **Results:**  2.7% of people aged 35 and over (n=365,000) were identified with COPD based on their health service use. After age-standardisation, COPD prevalence was:   * higher among men than women * higher among those living in the lowest socioeconomic areas compared with the highest * higher in areas outside of *Major cities*.   Linked data estimates of COPD prevalence are slightly lower than survey-based estimates.  **Conclusion:**  While undiagnosed COPD and mild COPD that is not managed with specific health services cannot be captured, linked data estimates provide a valuable source of information to monitor the prevalence of diagnosed COPD that is managed with specific health services. People with diagnosed COPD using these health services are an important group for population monitoring to inform health service planning.  **Grant Support:**  This work was funded by the Department of Health and Aged Care as part of the National Centre for Monitoring Chronic Conditions work plan. |