

**Senate Community Affairs Committee**

**ANSWERS TO ESTIMATES QUESTIONS ON NOTICE**

**HEALTH AND AGEING PORTFOLIO**

Budget Estimates 2012-2013, 30 & 31 May and 1 June 2012

**Question:** E12-085

**OUTCOME 0:** Whole of Portfolio

**Topic:** Sudden Cardiac Arrest

**Type of Question:** Written Question on Notice

**Number of pages:** 1

**Senator:** Senator Siewert

**Question:**

- a) Is the Department aware that the ABS is not classifying sudden cardiac arrest deaths correctly (eg epilepsy unspecific rather than SCA)?
- b) What steps is the Department taking to ensure accurate statistics about SCA are collected and recorded?

**Answer:**

- a) The Department of Health and Ageing is aware that the Australian Bureau of Statistics (ABS) classifies causes of death according to the International Classification of Diseases Version 10 (ICD-10), which is administered by the World Health Organisation. The information used to allocate the underlying cause comes from either the Medical Certificate of Cause of Death produced by a Medical Practitioner or from the findings of a Coroner. The ABS does not make findings about the cause of a death, but simply applies ICD-10 coding rules to classify the findings of a Medical Practitioner or Coroner.
- b) The ABS uses the World Health Organisation's ICD-10 coding system and can only report on information provided by Coroners and Medical Practitioners with respect to the cause of death in any individual case. Advice from the ABS is that there is no specific classification in the ICD-10 for 'sudden cardiac arrest', however there are two codes, 'cardiac arrest' (I46) and 'sudden cardiac death, so described' (I46.1), which may capture causes intended by this description. Both descriptions are used by Medical Practitioners and Coroners when making findings on a death, although a finding of 'sudden cardiac death' by Medical Practitioners or Coroners is rare.