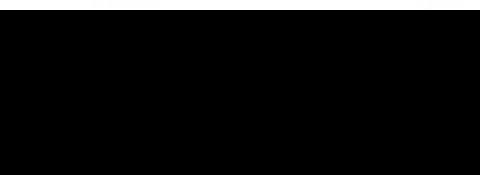


08 November 2019



Dear 

Re: OIA request - Colonoscopy discrepancy between Māori and non-Māori

Thank you for your Official Information Act request received by Waitematā District Health Board (DHB) on 16 October 2019 seeking the following information:

The attached OIA response notes although Māori represent 9.98% of the DHB's patient population, only 5.53% of colonoscopies are performed on Māori.

How is the DHB addressing the colonoscopy discrepancy between Māori and non-Māori?

In response to your request, we do not consider population proportionality to be the best way to assess either access to colonoscopies or whether access is appropriate for a patient's need. If we were to, then the rate of colonoscopies for people over 30-years-of-age is probably more useful which, as per the previous OIA you refer to, would be 6.65% of the population for Maori.

However, when assessing need, it is important to recognise that the incidence of different diseases varies by ethnicity. For example, we know that the incidence of inflammatory bowel diseases and colorectal cancers is higher in the European 'other' ethnic groups. These are conditions where an examination of the colon via a colonoscopy may be required.

Using colorectal cancer as an example, Māori are more likely to be diagnosed with colorectal cancer at a later stage of illness, yet they have a lower overall incidence of colorectal cancer when compared to European 'other'.

Looking at the most-recent five years, data on the New Zealand cancer registry (2012-2016), available on the Ministry of Health website, Waitematā DHB averages around 360 colorectal cancer registrations in any given year. Less than 5% of these registrations are for Māori and around 90% are for the European 'other' population group, despite this group making up 60% of our population. As such, we would expect to see a higher proportion of colonoscopies for colorectal cancer in the European 'other' group, as compared with Māori.

Using the national ethnic, age-specific rate to calculate the expected need for colonoscopies, we estimate the expected annual number of colonoscopies for Māori to be 276 while the observed number is 263, i.e. we are delivering to 95% of the expected need. This compares favourably to 'other' where the expected number is 4259 compared to an actual number of 4107, i.e. 96% of calculated expected need.

Where other DHBs are delivering more than 100% of expected need there is no improvement in outcomes for colorectal cancer in Māori. The focus needs to be on more-timely diagnosis, which is the objective of the national bowel screening programme.

I trust that this information meets your requirements. Waitematā DHB, like other agencies across the state sector, supports the open disclosure of information to assist the public's understanding of how we are delivering publicly-funded healthcare.

This includes the proactive publication of anonymised Official Information Act responses on our website from 10 working days after they have been released.

If you feel that there are good reasons why your response should not be made publicly available, we will be happy to consider this.

Yours sincerely

A handwritten signature in blue ink, appearing to read 'Debbie Holdsworth', with a large loop at the end.

Dr Debbie Holdsworth
Director Funding
Waitematā District Health Board