

New South Wales

ANTIFUNGAL USAGE – STATEWIDE BENCHMARKING REPORT

July – December 2024

Antifungal utilisation rates provided in this report are calculated using the number of defined daily doses (DDDs) of the antimicrobial class consumed per 1,000 occupied bed days (OBD). Usage rates represent total inpatient usage in the acute hospital setting, excluding emergency departments and operating theatres.

Contributing hospitals can find their de-identifying code via the NAUSP Portal 'Maintain My Hospital' drop-down menu.

Usage rates for antifungal agents are highly dependent on the casemix of the hospital, including whether the hospital provides transplant or haematology/oncology services. Usage of systemic antifungals is typically higher in larger hospitals, particularly Principal Referral hospitals. Usage rates reflect the quantity of antimicrobials dispensed from pharmacy and not actual consumption at patient level.

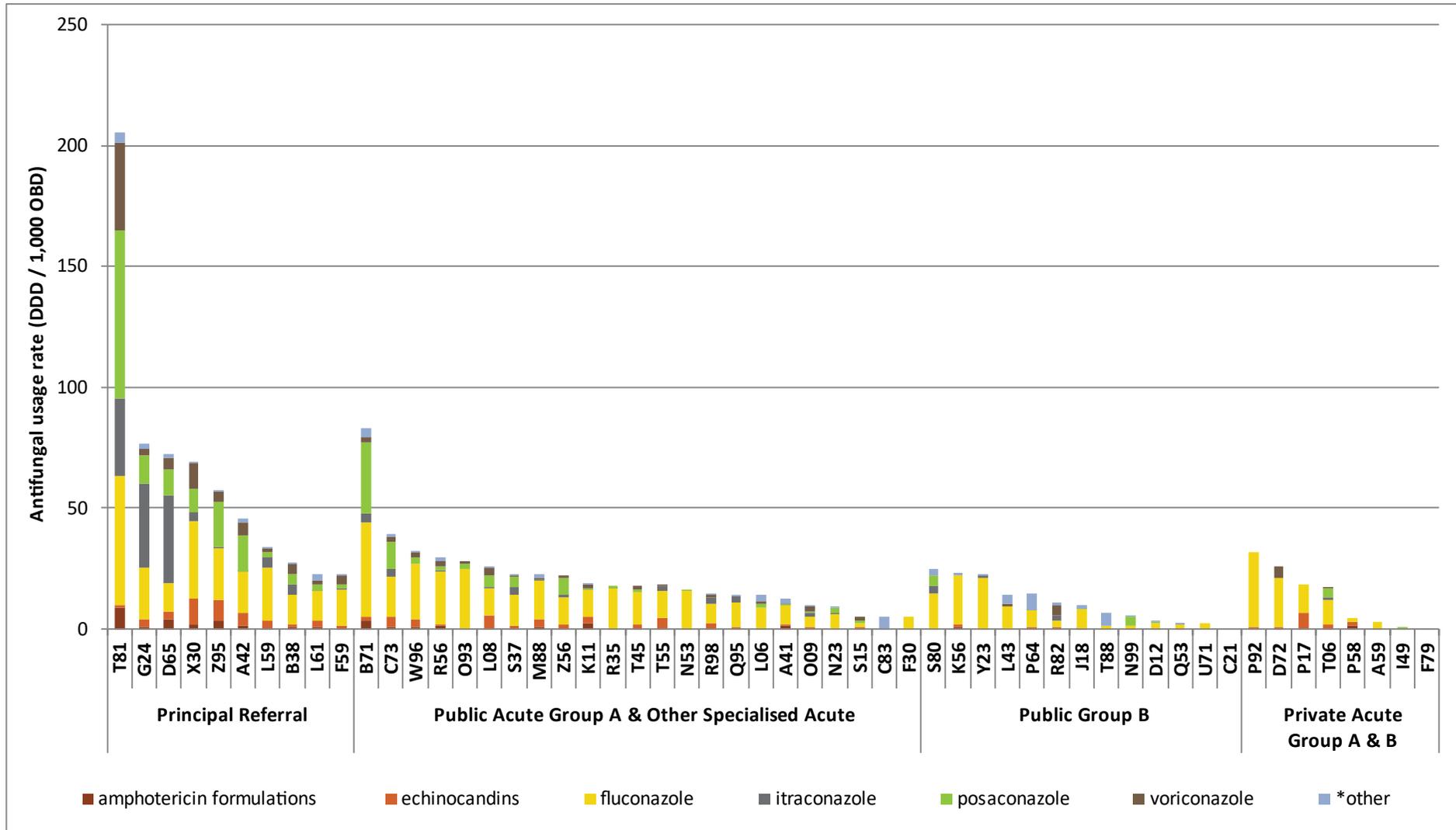
Contributing hospitals are assigned to Australian Institute for Health and Welfare (AIHW) defined peer groups.¹ [Note: Public and private acute group C and D hospitals have negligible systemic antifungal use and are excluded from this report].

DDD values for each antimicrobial are assigned by the World Health Organization (WHO) based on the "assumed average maintenance dose per day for the main indication in adults". DDDs are reviewed annually by the WHO as dosing recommendations change over time. For more information refer to: https://www.whocc.no/atc_ddd_methodology/purpose_of_the_atc_ddd_system/

The charts below present aggregated antifungal data for the six-month period from 1 July 2024 to 31 December 2024. The same data are presented in both charts with outlier hospital(s) removed from Chart 1b. Unless otherwise specified, the aggregate rates include all acute care areas of the hospital, excluding usage in the emergency department and the operating theatre.

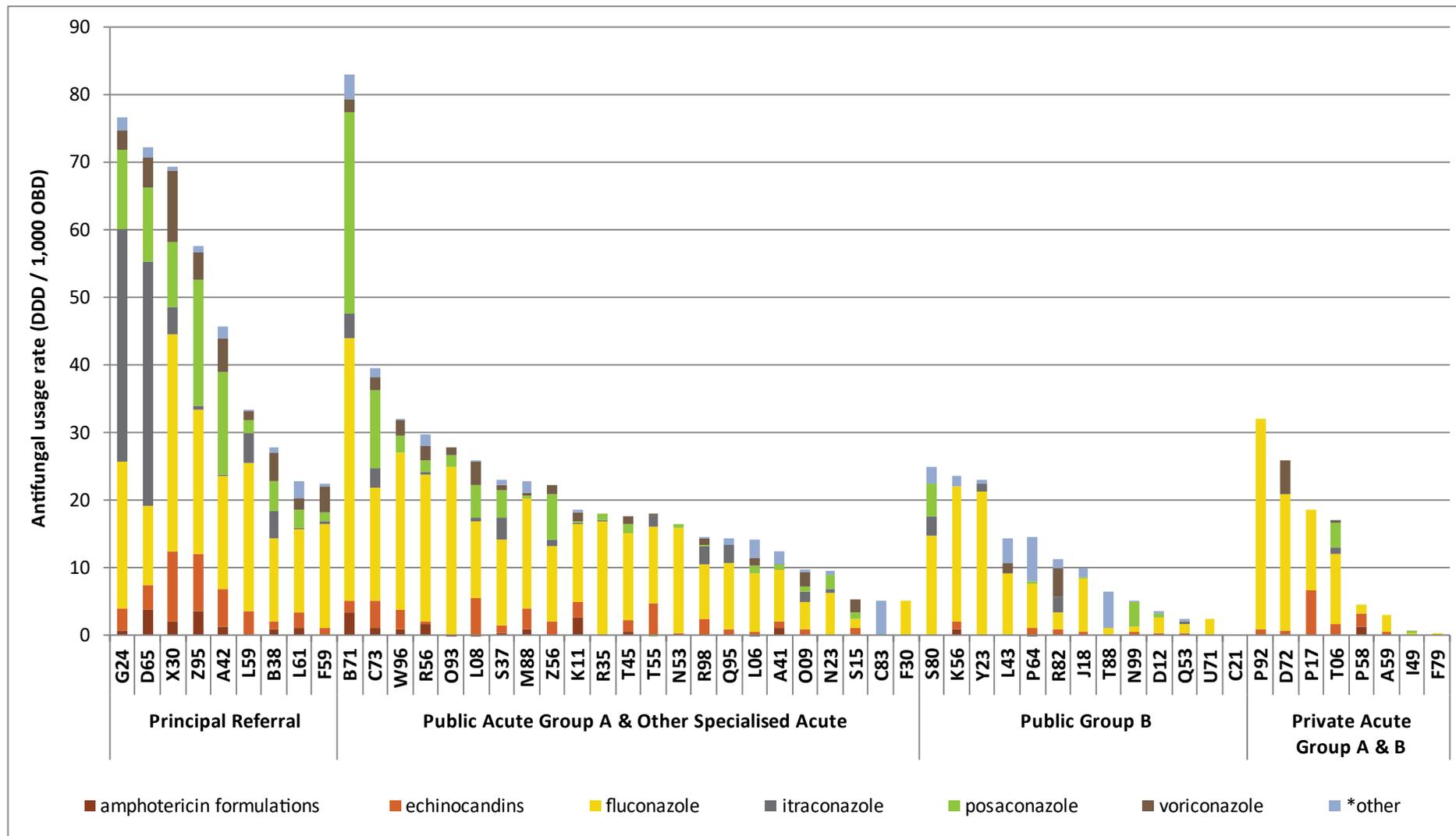
¹ AIHW. *Hospital resources 2017-18: Australian hospital statistics*. Available from <https://www.aihw.gov.au/reports/hospitals/hospital-resources-2017-18-ahs/data>

Chart 1a: Total acute hospital antifungal usage rates (DDD/1000 OBD) in NAUSP contributor hospitals, by peer group, New South Wales, July-December 2024 (excluding Emergency Department and Operating Theatre)



*Other = flucytosine, griseofulvin, isavuconazole, ketoconazole and terbinafine.

Chart 1b: Total acute hospital antifungal usage rates (DDD/1000 OBD) in NAUSP contributor hospitals*, by peer group, New South Wales, July-December 2024 (excluding Emergency Department and Operating Theatre)



*Other = flucytosine, griseofulvin, isavuconazole, ketoconazole and terbinafine.

NOTE: Outlier hospital T81 removed

OFFICIAL

This report includes data from 53 hospitals in NSW:

Armidale Hospital
Auburn Hospital
Bankstown Hospital
Bathurst Base Hospital
Belmont Hospital
Blacktown Hospital
Bowral Hospital
Brisbane Waters Private Hospital
Broken Hill Base Hospital
Calvary Riverina Hospital
Campbelltown Hospital
Canterbury Hospital
Chris O'Brien Lifehouse
Coffs Harbour Hospital
Concord Hospital
Cowra Health Service
Dubbo Base Hospital
Fairfield Hospital
Gosford Hospital
Gosford Private Hospital
Goulburn Base Hospital
Grafton Base Hospital
Griffith Base Hospital
Hornsby Ku-Ring-Gai Hospital
Institute Of Rheumatology And Orthopaedics
John Hunter Hospital
Kempsey District Hospital
Lingard Private Hospital
Liverpool Hospital
Maitland Hospital
Manning Base Hospital
Mater Hospital North Sydney
Nepean Private Hospital
Newcastle Mater
Northern Beaches Hospital
Orange Health Service
Port Macquarie Base Hospital
Prince Of Wales Hospital
Royal North Shore Hospital
Royal Prince Alfred Hospital
Ryde Hospital
Shellharbour Hospital
Shoalhaven Hospital
South East Regional Hospital
St George Hospital
St Vincent's Hospital Sydney
Sutherland Hospital
Sydney Adventist Hospital
Tamworth Hospital
Wagga Wagga Base Hospital
Westmead Hospital
Wollongong Hospital
Wyong Hospital

Disclaimer:

Data presented in this report were correct at the time of publication. As additional hospitals join NAUSP, retrospective data are included. Data may change when quality assurance processes identify the need for data updates.

The National Antimicrobial Utilisation Surveillance Program (NAUSP) is funded by the Commonwealth Department of Health and Aged Care. NAUSP is administered by the Communicable Disease Control Branch, Department for Health and Wellbeing, Government of South Australia. All individual hospital data contributed to this program will remain de-identified unless otherwise agreed in writing. Aggregated data may be provided to all contributors, the ACSQHC and the Commonwealth.