The impact of respiratory disease in New Zealand

- Cost of respiratory disease to New Zealand estimated at $6.68bn.
- Respiratory disease accounts for 1 in 10 overnight hospital stays.
- Hospitalisation for bronchiectasis, childhood bronchiolitis and total respiratory disease is on the rise.
- Pacific hospitalisation rates highest across all respiratory disease except for asthma and COPD, where Māori rates are higher.
- Māori have highest respiratory disease mortality.
- Economic deprivation is a major factor in respiratory disease.
- Return-to-school period greatly increases risk of respiratory hospitalisation for children.

What needs to change?

WE RECOMMEND:

1. Urgent new and extended programmes to reduce the severe ethnic and socio-economic inequalities in respiratory disease.
2. Targeted programmes in Māori and Pacific communities and in the most socio-economically deprived neighbourhoods to reduce not only inequalities, but overall rates of respiratory disease.
3. Research into the prevalence of obstructive sleep apnoea, to better estimate its impact on national health outcomes.
4. Initiatives to improve housing quality and warmth, and reduce dampness, in order to reduce respiratory illness.
5. Investigation of what measures might reduce the impact of the return to school on children’s asthma exacerbations.
6. Given the sharp drop in respiratory hospitalisations and deaths in 2020, further research to identify elements of COVID-19 pandemic control which could reduce respiratory illness on an ongoing basis.

“The first three recommendations are unchanged from when the last report was published two years ago. The fact that they have to be reiterated two years down the line indicates that more urgent action is required to reduce the huge burden of respiratory disease.”

LETITIA HARDING
CHIEF EXECUTIVE

“The massive and persistent inequity of outcomes for Māori and Pacific peoples highlights the failure of our current systems. This report includes concrete recommendations that would reduce death and suffering in Aotearoa New Zealand. We hope the new Māori Health Authority will be able to commission services that will target these inequities and look forward to working with them and Health NZ to improve this in the future.”

DR JAMES FINGLETON
MEDICAL DIRECTOR

“It is clear that Pacific and Māori populations are suffering disproportionately, and it’s vital that we have targeted information and resources for these groups.”

JOANNA TURNER
RESEARCH AND EDUCATION MANAGER