NHS Tayside has now considered your request dated 07 May 2019.

**Extract from Request** (NHS Tayside have added numbers for ease of reference)

1. “Out of the 1,045 admissions from the 26\textsuperscript{th} of May 2016 until the 31\textsuperscript{st} of December 2018 with a diagnosis relating to New Psychoactive Substances how many of patients were male?”

2. Out of the 1,045 admissions from the 26\textsuperscript{th} of May 2016 until the 31\textsuperscript{st} of December 2018 with a diagnosis relating to New Psychoactive Substances how many of patients were female?

3. Can the figures be broken down into age categories of those admitted between the period of the 26\textsuperscript{th} of May until the 31\textsuperscript{st} of December?

4. How many of the 1,045 admissions were repeat admissions?”

**Response**

1. Of the 1,045 admissions with a diagnosis relating to New Psychoactive Substances, 475 discharges were male.  
   Please note: the information provided is based on discharges not admissions. A patient will only have a completed SMR01 record once a discharge has been completed and their data coded and validated.

2. Of the 1,045 admissions with a diagnosis relating to New Psychoactive Substances, 570 discharges were female.  
   Please note: the ICD-10 codes used to provide the response are a best fit to the question asked. New Psychoactive Substances are not a homogenous group of compounds and are varied to recreate the effects of many different substances. As the codes used to define treatment are broad they will result in discharges being included that are not due to deliberate NPS use. For example, they could include episodes of patients having adverse reactions to prescribed medications, or intentional overdoses of prescribed medication for which they require treatment.

   Although within the data provided there is an apparent disparity between the numbers of males and females it is not safe to conclude from this data that more females required hospital treatment due to NPS use than males. It may be that there are conditions treated by drugs under these codes that more commonly affect women than men with age also playing a factor in the data.
3. Please see table below for discharges with a diagnosis relating to New Psychoactive Substances broken down by age, between the period 26th of May 2016 to 31st of December 2018.

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Discharges</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-15</td>
<td>32</td>
</tr>
<tr>
<td>16-19</td>
<td>110</td>
</tr>
<tr>
<td>20-24</td>
<td>164</td>
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<tr>
<td>25-29</td>
<td>118</td>
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<td>30-34</td>
<td>119</td>
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<td>35-39</td>
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<tr>
<td>40-44</td>
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<td>45-49</td>
<td>96</td>
</tr>
<tr>
<td>50-54</td>
<td>85</td>
</tr>
<tr>
<td>55-59</td>
<td>37</td>
</tr>
<tr>
<td>60-64</td>
<td>22</td>
</tr>
<tr>
<td>65+</td>
<td>46</td>
</tr>
</tbody>
</table>

The broadness of the diagnostic codes used is an important consideration in making any conclusions. For example, it is much less likely that the diagnosis codes in the cases of extremely young individuals or much older individuals are as a result of deliberate NPS use. These instances are far more likely to be accidental exposure or misuse of prescribed medications that are within the same ICD10 categories as NPS.

4. There were 261 discharges which were repeat admissions (110 individuals had more than one discharge).

Please note: the number of discharges where the person was in hospital more than once within the time period has been provided. However, the data spans 3 years and these may not be 'repeat admissions' with exactly the same diagnosis.


<table>
<thead>
<tr>
<th>Document Ref.</th>
<th>FOISA Exemption Applied</th>
<th>Justification</th>
</tr>
</thead>
<tbody>
<tr>
<td>IGTFOISA6267</td>
<td>None</td>
<td>None</td>
</tr>
</tbody>
</table>
Under section 20 (1) of the Act, if you are dissatisfied with the way NHS Tayside has dealt with your request, you have a right to request a review of our actions and decisions in relation to your request, and you have a right to appeal to the Scottish Information Commission.

A request for an internal review must be made in writing no later than forty working days from receipt of this response and addressed to:

Tayside NHS Board Secretary  
Tayside NHS Board Headquarters  
Ninewells Hospital & Medical School  
Dundee  
DD1 9SY

If you are not content with the outcome of the internal review, you have the right to apply directly to the Scottish Information Commissioner for a decision. The Scottish Information Commissioner can be contacted at:

Scottish Information Commissioner  
Kinburn Castle  
Doubledykes Road  
St Andrews  
Fife  
KY16 9DS

Or via the online appeal service: [www.itstackinfo/Appeal](http://www.itstackinfo/Appeal)

If you have any queries about this correspondence, please contact:

Information Governance Team  
Maryfield House  
30 Mains Loan  
Dundee  
DD4 7BT

Telephone - 01382 424413  
E-mail: [informationgovernance.tayside@nhs.net](mailto:informationgovernance.tayside@nhs.net)

Information Governance  
NHS Tayside  
22 May 2019