

21 February 2025

Marcus

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Tēnā koe Marcus,

**Your request for official information, reference: HNZ00076845**

Thank you for your email on 27 January 2025, asking Health New Zealand | Te Whatu Ora for the following under the Official Information Act 1982 (the Act):

*"I have a couple of questions around mortalities that are coded using the International Statistical Classification of Diseases and Related Health Problems.*

*1. Have there been any mortalities at any point within New Zealand coded against either "RA00.0 Vaping related disorder" (ICD-11) or "U07.0 Vaping-related disorder" (ICD-10)?*

*2. For each of the past 3 years, could I get a table showing how many cases of RA00.0/U07.0 have been diagnosed and how many of those ended up being fatal?*

*3. For each of the past 3 years, could I get a table showing how many fatal cases were there of the following nutritional deficiencies/excesses (ICD-11 codes):*

*5B55 Vitamin A deficiency*

*5B56 Vitamin C deficiency*

*5B57 Vitamine D deficiency*

*5B58 Vitamin E deficiency*

*5B59 Vitamin K deficiency*

*5B5A Vitamin B1 deficiency*

*5B5B Vitamin B2 deficiency*

*5B5C Vitamin B3 deficiency*

*5B5D Vitamin B6 deficiency*

*5B5E Folate deficiency*

*5B5F Vitamin B12 deficiency*

*5B5G Biotin deficiency*

*5B5H Pantothenic acid deficiency*

*5B5J Choline deficiency*

*5B5K.0 Iron deficiency*

*5B5K.1 Calcium deficiency*

*5B5K.2 Zinc deficiency*

*5B5K.3 Iodine deficiency*

*5B5K.4 Fluorine deficiency*

*5B5K.5 Sodium chlordine deficiency*

*5B5K.6 Copper deficiency*

*5B5K.7 Selenium deficiency*

*5B5K.8 Chromium deficiency*

*5B5K.9 Manganese deficiency*

*5B5K.A Molybdenum deficiency*

*5B5k.B Vanadium deficiency*

*5B70 Essential fatty acid deficiency*

*5B71 Protein deficiency*

*5B90.0 Hypervitaminosis A*

*5B90.1 Hypercarotenaemia*

*5B90.2 Hypervitaminosis D*

*5B90.3 Megavitamin-B6 syndrome*

*5B91.0 Hypercalcaemia*

*5B91.1 Zinc excess*

*5B91.2 Sodium chloride excess*

*5B91.3 Fluorine excess*

*5B91.4 Aluminium excess*

*5B91.5 Manganese excess*

*4. For each of the past 5 years, could I get a table showing how many instances there have been of the following anxiety-related disordered associated with cases, if it's standard to associate ICD-11 codes with cases which I believe is referred to as "Postcoordination"*

*6B00 Generalised anxiety disorder*

*6B01 Panic disorder*

*6B04 Social anxiety disorder"*

## Response

In order to provide you with context to the data supplied in the below response, **please note**:

Mortality data for 2020 is provisional, and hospitalisations data from 2022/23 onwards is provisional. This data has not been through the full quality assurance process that we use before publishing data and is subject to change. Published data may differ from the provisional data presented here. Published data should be considered the most accurate source and used where possible.

Health NZ uses ICD-10-AM for the coding of mortality and hospitalisations data.

The most recent year for which cause of death data is currently available is 2020 (refer response to your questions 1 and 2 below, and **Table 2** in reference to your question 3). After the close of the calendar year, there is a 12 to 18 month process to assign cause of death codes to the majority of deaths in that year. The Health NZ clinical coding team reviews the death certificate and health history of the deceased, to assign cause of death codes. Approximately 10% of deaths are referred to the Coroner each year to determine cause. Deaths which require a coronial inquiry can take 3 or more years for cause of death to be determined. The Chief Coroner has noted delays in the time it is taking them to determine cause of death. We do not make mortality data available publicly until the majority of deaths have been assigned a cause of death, so that the data we release is complete and accurate.

Health NZ does not receive national level data about diagnoses made by primary care providers, for example General Practitioners (GPs) (refer **Tables 1 and 3**, in reference to your questions 2 and 4). As the conditions you have asked about may be diagnosed in a primary care setting, we do not hold data on all cases of these conditions in New Zealand. Therefore, this aspect of your request is refused under section 18(g) of the Act, as the information requested is not held by Health NZ and we have no grounds to believe that the information is either held or connected more closely with the functions of another organisation subject to the Act.

We can provide data on the conditions that required hospital treatment. This information is provided below and should be considered in light of the context provided above.

1. *Have there been any mortalities at any point within New Zealand coded against either "RA00.0 Vaping related disorder" (ICD-11) or "U07.0 Vaping-related disorder" (ICD-10)?*

Please note that 'Vaping related disorder (U07.0)' is not a valid underlying cause of death code so deaths cannot be attributed to vaping. Up to and including calendar year 2020, there are no deaths recorded where vaping related disorder was listed as a contributing cause.

2. *For each of the past 3 years, could I get a table showing how many cases of RA00.0/U07.0 have been diagnosed and how many of those ended up being fatal?*

**Table 1: Number of publicly funded hospital discharges where vaping related disorder was recorded by financial year (1 July – 30 June)**

Year	Number of hospital discharges
2021/22	15
2022/23	19
2023/24	31

Please note the following about Table 1:

- The data includes people who received treatment in hospital, where a vaping related disorder was recorded. These hospitalisations were not necessarily caused by vaping, though it was documented on their hospital record.
- The data is a count of hospital discharges - people hospitalised multiple times (transfers, readmissions, multiple incidents) are counted each time.
- This data only includes people treated in hospital, it does not include people who received treatment for a vaping related disorder in another clinical setting, for example via their GP.

3. *For each of the past 3 years, could I get a table showing how many fatal cases were there [for the listed nutritional deficiencies/excesses set out in your request]:*

**Table 2: The number of deaths where the recorded cause of death was in the *Other nutritional deficiencies* (ICD-10-AM codes E50-E64) subgroup by calendar year**

Year	Number of deaths	Notes
2018	3	All deaths coded to E51.2 Wernicke's encephalopathy
2019	0	
2020	1	Coded to E51.1 Beriberi

Please note the following about Table 2:

- Mortality data for 2020 is provisional.
- Deaths are coded to the condition which caused the death, and not what may have caused that condition.

The specific codes included in the *Other nutritional deficiencies* (ICD-10-AM codes E50-E64) subgroup are outlined here: <https://www.icd10data.com/ICD10CM/Codes/E00-E89/E50-E64>

In the period 2018-2020, there were no deaths in any year coded to the *Hyperalimentation* (ICD-10-AM code E67) code. This code includes the following specific diagnostic codes:

- E670 Hypervitaminosis A
- E671 Hypercarotenaemia
- E672 Megavitamin-B6 syndrome
- E673 Hypervitaminosis D
- E678 Other specified hyperalimentation

4. *For each of the past 5 years, could I get a table showing how many instances there have been [for the requested] anxiety-related disorders associated with cases*

**Table 3: Number of hospitalisations by primary diagnosis and financial year (1 July - 30 June)**

Year	Number of hospitalisations by primary diagnosis		
	<i>F410 Panic disorder</i>	<i>F411 Generalised anxiety disorder</i>	<i>F932 Social anxiety disorder of childhood</i>
2019/20	308	138	4
2020/21	295	131	0
2021/22	289	171	2
2022/23	252	127	1
2023/24	287	133	1

Please note the following about Table 3:

- Hospitalisations data from 2022/23 onwards is provisional
- The data is a count of hospital discharges - people hospitalised multiple times (transfers, readmissions, multiple incidents) are counted each time.
- This data only includes people treated in hospital, it does not include people who received treatment for a vaping related disorder in another clinical setting, for example via their GP.

## How to get in touch

If you have any questions, you can contact us at [h.nzOIA@tewhatuora.govt.nz](mailto:h.nzOIA@tewhatuora.govt.nz).

If you are not happy with this response, you have the right to make a complaint to the Ombudsman. Information about how to do this is available at [www.ombudsman.parliament.nz](http://www.ombudsman.parliament.nz) or by phoning 0800 802 602.

As this information may be of interest to other members of the public, Health NZ may proactively release a copy of this response on our website. All requester data, including your name and contact details, will be removed prior to release.

Nāku iti noa, nā



## Stuart Bloomfield

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