2007

Health Indicators

Statistics Canada
Statistique Canada

Canadian Institute for Health Information
Institut canadien d'information sur la santé

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About the Canadian Institute for Health Information

The **Canadian Institute for Health Information** (CIHI) collects and analyzes information on health and health care in Canada and makes it publicly available. Canada's federal, provincial and territorial governments created CIHI as a not-for-profit, independent organization dedicated to forging a common approach to Canadian health information. CIHI's goal: to provide timely, accurate and comparable information. CIHI's data and reports inform health policies, support the effective delivery of health services and raise awareness among Canadians of the factors that contribute to good health.

www.cihi.ca

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- **Mr. Ron Sapsford**, Deputy Minister, Ministry of Health and Long-Term Care, Ontario
- **Ms. Sheila Weatherill**, President and CEO, Capital Health Authority, Edmonton, Alberta

About Statistics Canada

Statistics Canada is authorized under the *Statistics Act* to collect, compile, analyze, abstract and publish statistics related to the health and well-being of Canadians. The Health Statistics Division's primary objective is to provide statistical information and analyses about the health of the population, the determinants of health and the scope and utilization of Canada's health care sector.

www.statcan.ca

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In particular, the *Health Indicators 2007* report has benefited greatly from consultations with our stakeholders across the country. The assistance offered by many individuals in health regions and provinces and territories who reviewed these indicators and offered useful suggestions is gratefully acknowledged.

CIHI wishes to thank the following experts for their contribution to the development of the wait time indicator for hip fracture surgery:

- **Dr. Cy Frank**, Professor, Chief of the Division of Orthopedics, University of Calgary
- **Dr. Michael J. Dunbar**, Associate Professor of Surgery, Dalhousie University; Director of Orthopedic Research, Queen Elizabeth II Health Sciences Centre

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- **Dr. Iris Weller**, Scientist, Epidemiologist Sunnybrook Health Sciences Centre
- **Dr. Carolyn De Coster**, Associate Director Research, Manitoba Centre for Health Policy
- **Dr. Alan Forster**, Associate Scientist, Assistant Professor of Medicine, OHRI, Clinical Epidemiology Program, University of Ottawa
- **Ms. Kathleen Ness**, Senior Director Health Services Planning, Capital Health; Representative, Western Canada Wait List Project.

It should be noted that the analyses and conclusions in this report do not necessarily reflect the opinions of individual experts or their affiliated organizations.

The project team responsible for the development and calculation of the health indicators include:

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- **Tonia Forte**, Senior Analyst
- **Patricia Finlay**, Writer (Editor)
- **Caroll Co**, Project Assistant

The health indicators project is a joint effort by CIHI and Statistics Canada that produces information on a broad range of health indicators. Statistics Canada contributed data and indicators on health status, non-medical determinants of health and community and health system characteristics for the *Heath Indicators 2007* print publication. Statistics Canada and CIHI also jointly produce the *Health Indicators* e-publication, which provides additional health indicator data. Special appreciation goes to Jillian Oderkirk, Brenda Wannell and Nick Koutsoumbis at Statistics Canada for their contribution to this print publication.

This report could not have been completed without the generous support and assistance of many other CIHI staff members who compiled and validated the data; worked on the print and web design, translation, communications and distribution; and provided ongoing support to the core team.

Executive Summary

From fall-prevention programs to new care paths for patients with heart attacks, questions about differences in health and health care highlighted by regional indicator results have triggered action across the country. *Health Indicators 2007* is the eighth in a series of annual reports containing the most recently available health indicator data from the Canadian Institute for Health Information and Statistics Canada. Health regions and others use the results to identify areas where improvements are needed and to learn from jurisdictions with the best outcomes.

This year's report includes results for health regions with a population of over 75,000 (encompassing about 95% of Canada's population), as well as for provinces and territories. Following the Health Indicator Framework, each of the indicators is grouped into one of the following four dimensions.

- **Health status**—provides insight on the health of Canadians, including well-being, human function and selected health conditions.
- **Non-medical determinants of health**—reflects factors outside of the health system that affect health.
- **Health system performance**—provides insight on the quality of health services, including accessibility, appropriateness, effectiveness and patient safety.
- **Community and health system characteristics**—provides useful contextual information, rather than direct measures of health status or quality of care.

Additional indicators, data for previous years, definitions and technical notes are available in the free *Health Indicators* e-publication on the CIHI and Statistics Canada websites.

Health Indicators 2007 also includes in-depth analyses for two indicators of health system performance—hip fracture hospitalizations and wait time for hip fracture surgery. This analytical focus responds to suggestions from stakeholders that we provide more assistance with the use and interpretation of indicator data. Based on other valuable feedback, we have also changed the format of the annual *Health Care in Canada* report and will publish it in the fall, a time better aligned with strategic planning processes in the health sector.

Highlights of This Report

Focus on Hip Fractures

- In 2005–2006, about 25,000 seniors were hospitalized with a hip fracture in Canada. That meant 502 hospitalizations per 100,000 seniors, down from 575 in 2000–2001. This difference represents a 13% reduction after adjustment for population growth and aging.
- Although most hip fractures occur in the community, a significant number also happen in hospitals. Nearly 1 in 1,000 seniors admitted to hospital in Canada fracture a hip during their stay. Rates of in-hospital hip fracture vary from province to province and region to region.
- In 2005–2006, almost two-thirds (65%) of surgeries to repair hip fractures were performed on the day of admission or the next day (data on the timing of surgery excludes Quebec because of differences in data collection). This percentage varied from 53% to 82% across provinces and territories and from 37% to 94% across regions.
- Some patients are more likely than others to wait for hip fracture surgery. Patients who are transferred tend to wait longer, as do those admitted to larger community or teaching hospitals and higher-volume hospitals. Patients admitted in the afternoon or evening hours or on a weekday are also less likely to have surgery on the day of admission or the next day.
- In 2005–2006, about 6% of seniors who underwent hip fracture surgery in Canadian hospitals outside of Quebec died in hospital within 30 days of their admission. Older patients, men and those with other illnesses in addition to their hip fracture had higher death rates than others. Compared with patients who underwent surgery on the day of admission or the next day, those who had their surgery later were 22% more likely to die in hospital within 30 days of admission.

Other Health Indicators

- There are two-fold or larger differences from region to region for readmission rates, heart attack and stroke survival, and most other health indicators. For example, across the country, 26.3% of women delivered babies by Caesarean section in 2005–2006, but rates for larger health regions ranged from 17.8% to 36.8%. The variation was even larger for provinces and territories ranging from 8.2% to 30.4%.
- In larger health regions, hospitalization rates for ambulatory care sensitive conditions, which reflect admissions for chronic conditions that can often be successfully managed in the community, ranged from 190 to 894 per 100,000 population in 2005–2006. The overall Canadian average was 389 per 100,000. While not all of these hospitalizations are avoidable, research suggests that differences in primary health care and chronic disease prevention and management may contribute to variations in hospitalization rates.
- Rates of surgery—such as joint replacements and cardiac surgery—both vary widely and are changing over time. For instance, joint replacement rates have increased substantially over the past five years. The most notable increase occurred in 2005–2006. Knee replacement rates showed a 19% increase after adjustment for population growth and aging, rising from 126 per 100,000 population aged 20 and over in 2004–2005 to 149 per 100,000 in 2005–2006. Hip replacement rates increased by 10%, rising from 92 per 100,000 in 2004–2005 to 102 per 100,000 in 2005–2006.
- In contrast, coronary artery bypass surgery (CABG) rates continued to fall. There were 84 CABG hospitalizations per 100,000 population in 2005–2006 compared to 88 per 100,000 in 2004–2005, a decrease of 5%. Age-adjusted rates of percutaneous coronary intervention (PCI), another approach to improving blood flow to the heart muscle, have remained relatively stable over the past year.

About This Report

In 1999, the Canadian Institute for Health Information (CIHI) and Statistics Canada launched a collaborative project on health indicators. The goal of this project is to identify and compile health indicators that can be used to report on the health of Canadians and the health system. In addition, the project aims to disseminate this information to a wide audience including policy-makers, health system managers, health professionals, researchers and the public. The groundwork for this project was laid by the first and second consensus conferences on Population Health Indicators.

Health Indicators 2007 represents the latest in a series of reports highlighting the most recently available information about the health system and the health of the population in Canada's health regions, provinces and territories.

What About *Health Care in Canada 2007*?

Look for CIHI's annual *Health Care in Canada* report to be released in the fall of 2007. As in previous years, the report will provide updated data and analyses on topics of continuing importance to policy-makers, health system managers, health professionals, researchers and the public.

New in 2007

For the first time this year, *Health Indicators* is being published as a stand-alone report. The publication includes interpretive analyses of selected indicators aimed at assisting the use and interpretation of the data by highlighting patient characteristics and processes of care that relate to variation in the rates. This year the report highlights hip fracture hospitalization rates and the new wait time indicator for hip fracture surgery. Surgical repair of hip fracture is one of the procedures targeted by Canada's health ministers' plan to reduce wait times.

The ***In Focus*** section provides an overview of hip fracture hospitalization rates and their impact on the health care system. We review trends and provincial comparisons of wait times for hip fracture surgery and explore the factors linked to processes of care that influence surgical delays. The relationships between 30-day in-hospital mortality, length of stay and wait time for hip fracture surgery are also explored.

Look for this symbol throughout the report. It will direct readers to resources for more information regarding initiatives or guidelines that can help to inform policy-making.

There's More on the Web

The *Health Indicators* e-publication, a free web-based resource that is jointly developed and maintained by CIHI and Statistics Canada, includes a broad range of additional health indicator data from both CIHI and Statistics Canada in one integrated online publication. This interactive online resource provides easy access to the most recent health indicator data, as well as to the data for all available years, with maps, complete technical notes and other important information.

***Health Indicators* e-publication**:
Providing the latest readings on the health of Canadians—region by region.

www.cihi.ca/indicators or
www.statcan.ca

For More Information

Highlights and the full text of *Health Indicators 2007* are available in English and French on the CIHI website at www.cihi.ca. With the release of *Health Indicators 2007* and in the weeks following, CIHI will add more information to the site. For example, it will be possible to:

- download the accompanying technical document
- look at related report series, such as *Health Care in Canada*, *Giving Birth in Canada* and *Medical Imaging in Canada*; CIHI's regular series of reports on aspects of health spending, health human resources, health services and population health; and reports from Statistics Canada.

To order additional free print copies of the report, please contact:

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CIHI welcomes comments and suggestions about this report and about how to make future reports more useful and informative. We encourage you to email your comments to indicators@cihi.ca.

Using This Report

Rates are provided for all health regions with a population of at least 75,000 as of July 1, 2004.

Data are reported based on the region of the patient's residence, not region of hospitalization. Consequently, these figures reflect the hospitalization experience of residents of the region wherever they are treated, including out-of-province, as opposed to reflecting the comprehensive activity of the region's hospitals (who will also treat people from outside of the region). Hospitalizations occurring abroad are not included.

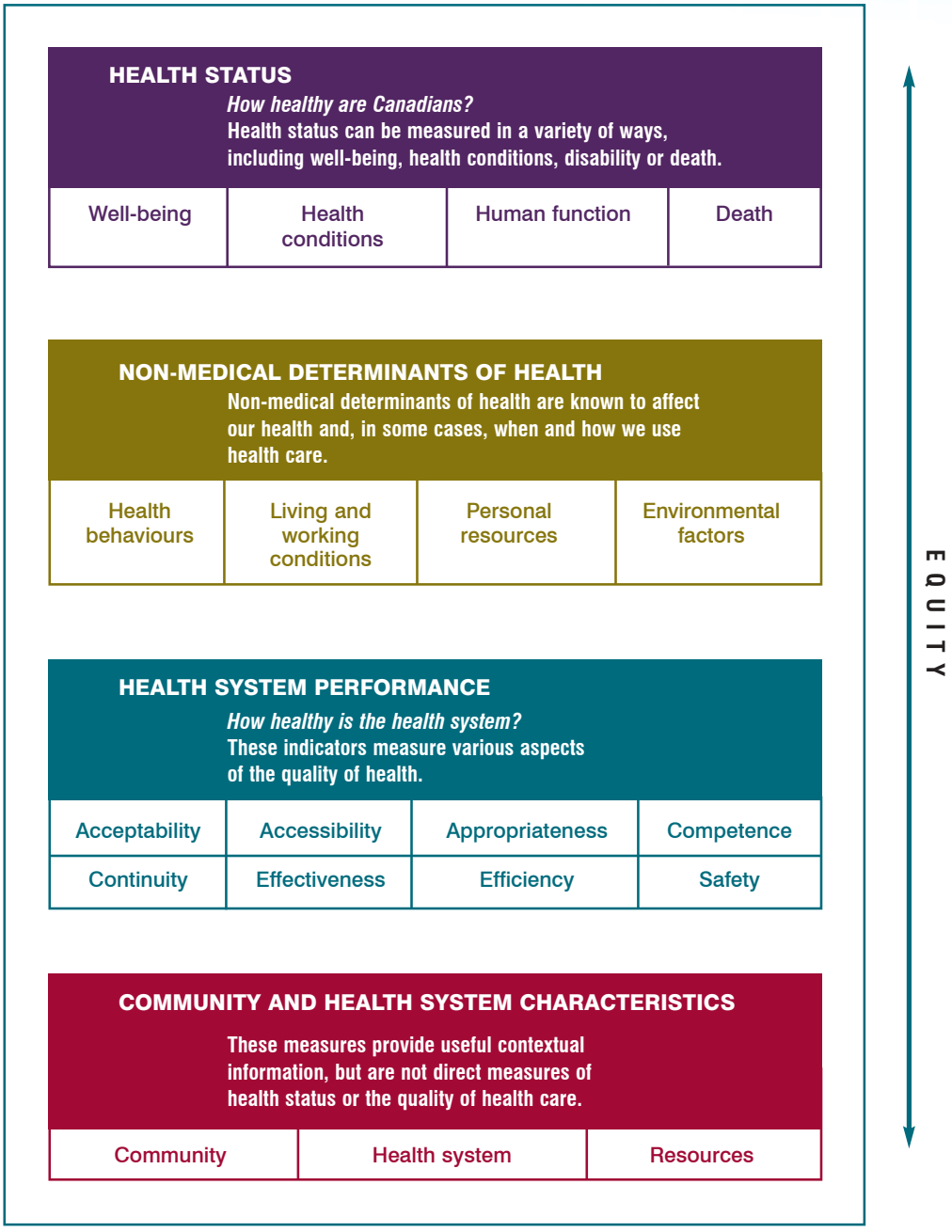
Confidence intervals are provided for most indicators to aid interpretation. The width of the confidence interval illustrates the degree of variability associated with the rate. Indicator values are estimated to be accurate within the upper and lower confidence interval 19 times out of 20 (95% confidence interval).

Please see page 84 for important interpretive notes.

Symbols and Abbreviations Used in This Report

..	Figures not available
*	Figures suppressed due to small numbers or incomplete data
▼	Interpret with caution
95% CI	95% confidence interval
✦	Statistically different from the average (Canada) rate ($p \leq 0.05$)
ASSS	Agence de santé et de services sociaux
HSDA	Health service delivery area
LHIN	Local health integration network
RHA	Regional health authority

Health Indicator Framework



Statistics Canada / Statistique Canada

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In Focus: Hip Fracture Hospitalizations

Slips, trips and falls often get big laughs in comedies, but they are not so funny in real life, particularly for seniors. Research estimates that one in three people aged 65 and over experience a fall each year, and that half of these individuals fall more than once.[1, 2] Although many falls do not result in injury, some are serious enough to require hospitalization.

For seniors in particular, hip fractures can carry significant risks. For example, about 7% of seniors admitted with hip fractures in 2005–2006 died in hospital within 30 days of admission.* Some studies have shown that between 18% and 36% of all hip fracture patients aged 65 and over die within 12 months.[3–5] In addition, research suggests that hip fracture patients may experience psychological and emotional problems.[6, 7] This may be due to the loss of mobility, independence and financial stability.

Hip fractures also often trigger significant health care costs. An Ontario study published in 2001 estimated that direct health care costs for treating a hip fracture, in the hospital and afterwards, average about $27,000 over a year.[8] These costs are affected by many factors, including the type and severity of fracture, type of surgery or intervention, age and sex of the patient, hospital length of stay and patient's need for physiotherapy. The study found that costs range from about $21,000 for a patient who is discharged home from hospital to roughly $44,000 for a patient discharged to long-term care.[8] Several studies have shown that many hip fracture patients who are discharged from hospital need nursing home care.[8, 9] Patients and their families may also incur a variety of costs. For example, in many cases, hip fracture patients will need the assistance of family members, other caregivers or informal support or care networks, particularly if they are discharged home from hospital.[6, 7, 10]

What the Numbers Tell Us

In 2005–2006, there were approximately 28,200 hip fracture admissions to Canadian hospitals. The majority (about 88%) involved patients aged 65 and older. This represents 502 hip fracture hospitalizations per 100,000 seniors, down from 575 in 2000–2001.† This difference reflects a 13% reduction, after population growth and aging are taken into account.

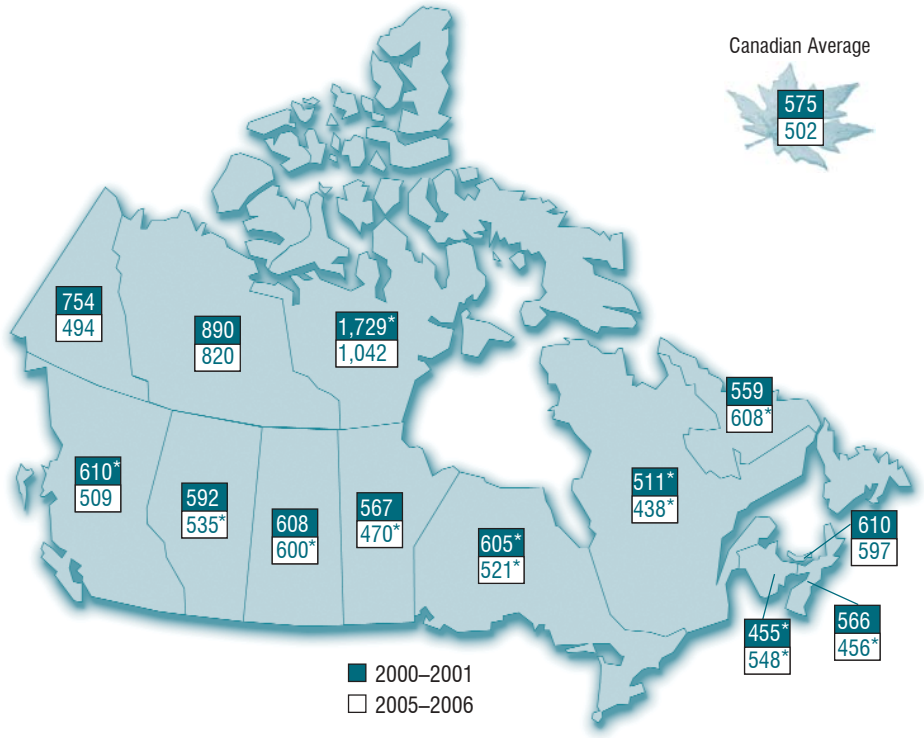
* Quebec data are not included because of differences in data collection. Data for 11 months were used to allow for the follow-up period.

† All rates include only hospital admissions for Canadians 65 years of age and older who had a most responsible diagnosis of hip fracture. For more on the rates, please refer to the technical notes at www.cihi.ca or www.statcan.ca.

Hip fracture hospitalization rates vary across the country. In 2005–2006, age-standardized rates were about the same as the overall average in one province and one territory—British Columbia and Yukon Territory. However, rates were lower than the overall average in Nova Scotia, Quebec and Manitoba, and higher in Newfoundland and Labrador, Prince Edward Island, Ontario, Saskatchewan, Alberta, the Northwest Territories and Nunavut. Even larger differences exist between health regions than between provinces (see regional hip fracture hospitalization rates on page 52). Rates in some regions are more than double those in other parts of the country. Recent trends in rates also differ across Canada. For example, rates in Manitoba fell from 567 to 470 per 100,000 seniors over five years, a decrease of 17%. In New Brunswick, on the other hand, rates rose over this period.

Figure 1. The Picture Across Canada

The map shows the age-standardized hospitalization rates for hip fracture among Canadians aged 65 years and older in 2000–2001 and 2005–2006 based on where patients lived, not where they were treated. There are fluctuations in those rates within that period. In 2005–2006, rates varied from a low of 438 per 100,000 seniors in Quebec to a high of 1,042 in Nunavut.



* Rates are significantly different than the Canadian average.

Sources: Discharge Abstract Database, CIHI; Hospital Morbidity Database, CIHI; ministère de la Santé et des Services sociaux du Québec.

Safety Initiatives and Guidelines Aimed at Reducing Falls: What Works

There are various approaches to decreasing the number of hip fractures. One strategy is to reduce the number of seniors who fall. Many studies have examined this issue and have made recommendations to address it. For example, in 2003, the Cochrane Collaboration conducted a systematic review of available evidence on preventing falls in the elderly. The review found 62 relevant studies involving interventions with seniors in community, facility and acute care settings. The authors concluded that a number of effective interventions exist for preventing falls.

www.cochrane.org

Based on this and similar evidence, various groups have developed guidelines for preventing falls. In Canada, a federal/provincial/territorial committee prepared *A Best Practices Guide for the Prevention of Falls Among Seniors Living in the Community* in 2001. To develop the guide, the committee incorporated findings from 34 studies. The researchers evaluated the effectiveness of strategies to prevent falls for seniors living in the community. Each study applied to one or more of six sections: exercise, environmental modification, education, medication, clinical intervention and multi-factorial intervention. Also included is a table of resources and an evaluation guide to help identify and measure the goals, processes and impacts of fall-prevention initiatives.

www.phac-aspc.gc.ca/seniors-aines/pubs/seniors_falls/chapter4_e.htm

Other countries have also issued guidelines. For instance, the American Geriatrics Society (AGS) guideline, prepared in collaboration with the British Geriatrics Society and the American Academy of Orthopaedic Surgeons, outlines recommendations based on evidence from the research literature.

www.americangeriatrics.org/products/positionpapers/falls.pdf

A number of factors may help to explain these variations. For example, although rates are adjusted for differences in population age structures, differences may also exist in other demographic characteristics, as well as in the prevalence of hip fracture risk factors. Patterns of health and illness are largely a consequence of how individuals learn, live, work and play. Examples of factors that have been associated with the risk of hip fracture in research studies include: [7, 9, 11, 12, 13]

- Age, race and sex
- Low body weight or body mass, low bone density
- Osteoporosis and other related diseases
- Comorbid medical conditions
- Physical/functional and cognitive impairment
- Prior fractures (especially hip and wrist fractures) and family history of fractures
- Reduced muscle strength and low level of physical activity
- Caffeine use, smoking
- Prescription medications such as benzodiazepines or other psychoactive medications
- Place and type of residence and quality of care
- Type of furniture and presence of staircases
- Season and weather

Risk Factors Associated With Hip Fractures

The many factors that contribute to, and reduce the risk of, hip fractures are related and may interact. Frameworks such as the Health Indicator Framework, developed by CIHI and Statistics Canada, help to display relationships among different indicators. Some examples are shown below.

HEALTH STATUS

- Over 28% of seniors living in the community reported moderate or severe functional health problems and over 52% reported participation and activity limitation in 2005.*
- Almost 2.6% of Canadian seniors living in the community are underweight, while almost 53% are overweight or obese (they had a body mass index higher than 25).*

NON-MEDICAL DETERMINANTS OF HEALTH

- Over 64% of seniors living in the community report currently smoking or having smoked in the past.*
- Approximately 53% of Canadians aged 65 and older living in the community reported being inactive in their leisure time.*

HEALTH SYSTEM PERFORMANCE

- Over 7% of seniors admitted with a hip fracture died in hospital within 30 days of admission.†
- About 1 in 1,000 seniors admitted to hospital fractured their hips during their stays.†
- In Nova Scotia in 1995–1996, approximately 25% of seniors were prescribed a benzodiazepine during the year.[14] Between 1991 and 1993, 7.9% of the seniors in Quebec on benzodiazepines were receiving high daily doses.[15]

COMMUNITY AND HEALTH SYSTEM CHARACTERISTICS

- In 2005, there were over 4,200,000 people aged 65 and over in Canada.*
- Approximately 57% of those aged 65 and older are women.*

EQUITY

Sources: * Statistics Canada 2005; † Discharge Abstract Database, CIHI.

Treatment of Hip Fractures

Hip fractures usually require surgery, such as fixation or hemiarthroplasty. Fixation is the most common procedure and is often used if the bone is still properly aligned after the fracture. Metal screws are inserted into the bone to hold it together while the fracture heals. Hemiarthroplasty, on the other hand, is when one half of the joint is replaced with an artificial surface. There are also cases where a total hip replacement is the preferred procedure.

Some hip fracture cases require non-operative treatment. These cases may include stress fractures of the hip, or fractures sustained by patients who have complex medical problems that preclude surgery.

Clinical practice guidelines, such as those developed in New Zealand and Scotland, specify criteria under which each type of surgery should be performed.[16, 17] These guidelines suggest that clinicians consider the type and severity of the fracture, the age and mental and physical condition of the patient, the presence of other comorbid conditions and other factors when deciding on the appropriate treatment for a particular patient.[16, 17] Some of these factors may also affect a patient's wait time before surgery and length of stay in hospital.

www.guideline.gov

In-Hospital Hip Fractures

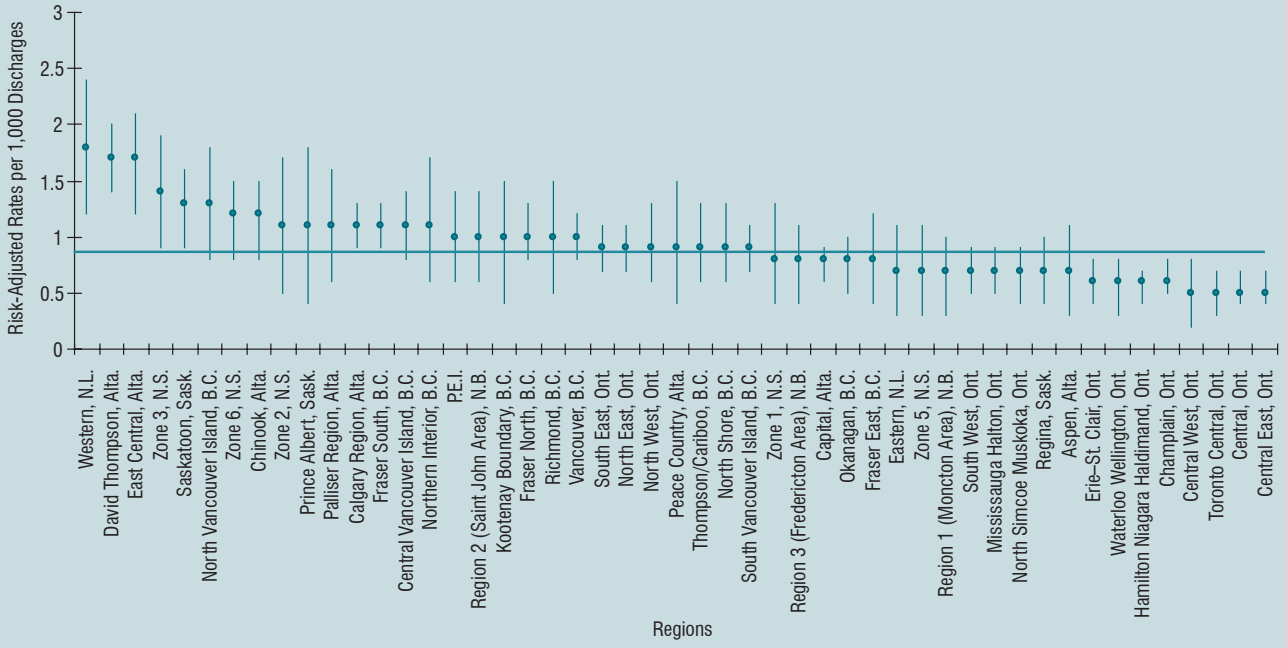
Although most hip fractures occur in the community, a significant number happen in hospitals, nursing homes and long-term care settings. For example, falls, a key risk factor for hip fractures, were documented for approximately 8% of longer-term patients in Ontario complex continuing care facilities in 2005–2006.[18] The risk of falling was higher for patients who required help in moving around, who used certain prescription medications (sedatives, for example) or who had fallen previously. The probability of falling increased significantly for patients with more than one of these risk factors.

Nearly 1 in 1,000 seniors admitted to hospital fracture their hips during their stays.[19] Rates vary from province to province and region to region. The rate of in-hospital hip fractures for seniors is one of the patient safety indicators at the regional, provincial/territorial and national levels reported in this document (please see page 52). These and other patient safety indicators play an instrumental role in understanding, managing and ultimately reducing adverse events in Canadian hospitals.

Several strategies have been proposed for reducing falls in hospitals. Some focus on identifying which patients are most at risk for falls (for example, the "oldest" old, women, those who have recently experienced a stroke and those on certain medications).[20–22] Others highlight staff education, monitoring, safety checks and standardized safety procedures and protocols. Still other strategies focus on modifying the physical environment (for example, providing adequate lighting and installing grab bars) in order to reduce falls and fractures.[20, 21] Experts suggest that reducing falls and fractures in hospitals and long-term care facilities is an integral part of a comprehensive quality assurance program that includes patient safety and has been identified as a key concern by health care organizations.[23]

Figure 2. Regional Variation in In-Hospital Hip Fractures

The graph below shows in-hospital hip fracture rates for seniors in larger health regions across Canada from 2003–2004 to 2005–2006. In-hospital hip fracture rates are risk-adjusted and reported based on a three-year average. The rates are estimated to be correct to within the range shown by the vertical bars 19 times out of 20. The solid line shows the overall rate of in-hospital hip fractures (0.8 per 1,000 discharges).



Source: Discharge Abstract Database, CIHI.

In Focus: Waiting for Hip Fracture Surgery

Timing, as the expression goes, is everything. While some patients who break their hip need medical treatment to stabilize their condition before surgery, research suggests patients typically benefit from timely surgery.[24] For example, studies have found that shorter delays are associated with reduced morbidity, mortality, pain and length of stay in hospital, as well as improved rehabilitation.[25–31] In December 2005, Canada's health ministers adopted a common goal of providing hip fracture surgery within 48 hours.* [33, 34]

How Long Do Canadians Wait?

Thousands of Canadians break their hip each year. In 2005–2006, hospitals outside of Quebec performed about 17,000 procedures to repair hip fractures on patients aged 65 and older. Almost two-thirds (65%) of these patients had their operation on the day that they were admitted to hospital or the next day. About 85% of patients underwent surgery on the day of admission to an acute care hospital, the next day or the day after. However, some patients waited much longer. For example, 8% spent four or more days in hospital before their surgery.

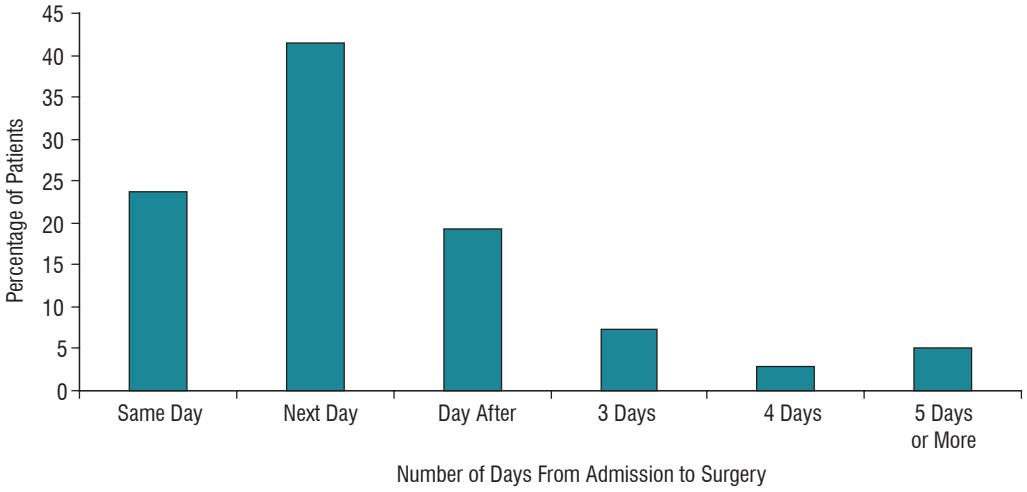
In the following analyses, we focus on the percentage of patients who underwent surgery on the day of admission or the next day. Wait times for hip fracture surgery vary across the country. Among provinces and territories, over half of all patients had surgery on the day of their admission or the next day, but risk-adjusted rates ranged from 53% to 82%.† The range was even wider for health regions. Many (21) regions had rates similar to the overall average. However, seniors in 15 regions were less likely to have surgery on the day of admission or the next day. Seniors in 22 regions were more likely to do so. Please see the data tables in this report (pages 50 to 51).

* In the companion agreement, *Asymmetrical Federalism That Respects Quebec's Jurisdiction*, it was noted that Quebec would apply its own wait time reduction plan, in accordance with the objectives, standards and criteria established by the relevant Quebec authorities.[32]

† Excludes Quebec. Percentages for the Yukon and Nunavut are not included because of small numbers.

Figure 3. When Does Hip Fracture Surgery Occur?

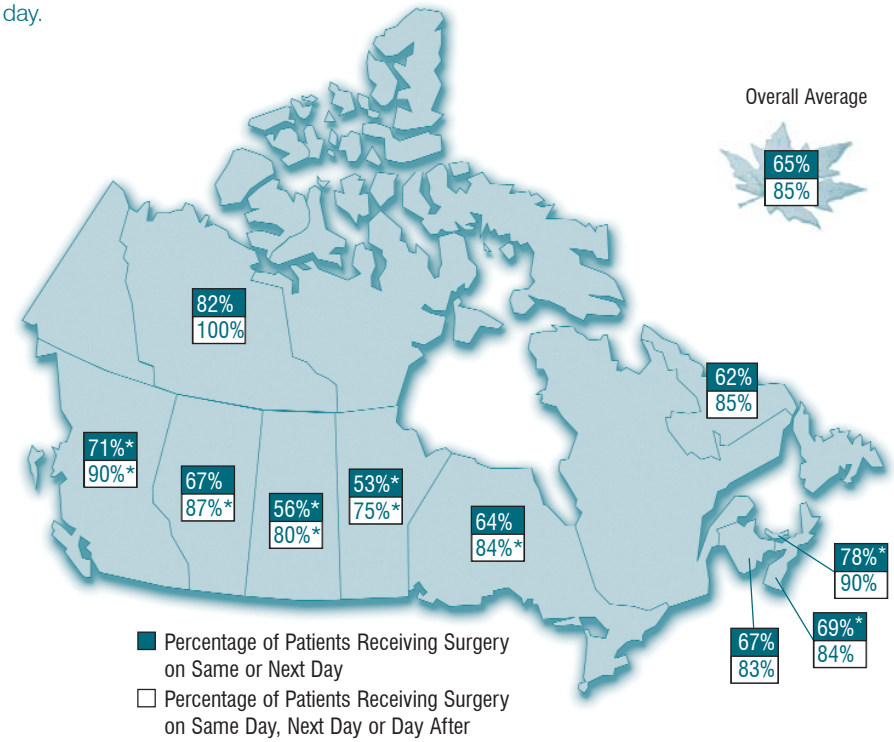
The graph below shows the number of days between admission with a hip fracture and surgery. Data include Canadians aged 65 and older admitted to hospitals outside of Quebec in 2005–2006. About two-thirds (65%) of hip fracture surgeries were performed on the day of admission or the next day.



Source: Discharge Abstract Database, CIHI.

Figure 4. What Is the Picture Across Canada?

The percentage of hip fracture procedures performed on the day of admission to hospital or the next day varies across the country. The map below shows the risk-adjusted percentage for 2005–2006. Among provinces and territories, most hip fracture procedures (53% to 82%) were performed on the day of admission or the next day.



Notes: Data from Quebec are excluded. Percentages for the Yukon and Nunavut are not reported because of small numbers. Analysis is based on where patients live, not where they are treated.

*Percentage significantly different than the overall average.

Source: Discharge Abstract Database, CIHI.

Defining Wait Time for Hip Fracture Surgery

Our analyses measure wait time for hip fracture surgery as the number of days between admission to an acute care hospital and surgery for patients aged 65 and older. Most results focus on the proportion of patients who underwent surgery on the day of admission or the next day in 2005–2006. An overview of the methods used to calculate this indicator is provided in the paragraphs that follow. More information regarding inclusion and exclusion criteria can be found at www.cihi.ca/indicators or www.statcan.ca.

Some types of patients are more likely than others to wait for surgery. For example, patients who have certain health problems on admission (comorbidities) are more likely to experience delays, perhaps because of the need to stabilize their condition prior to surgery. To make comparisons as fair as possible, we adjusted provincial, territorial and regional rates to take into account differences in age, sex and selected comorbidities. The comorbidities considered include heart failure, ischemic heart disease, hypertension, chronic obstructive pulmonary disease, diabetes with complications and cardiac dysrhythmia.

Some patients have surgery in a hospital other than the one to which they were first admitted, perhaps because that hospital does not have the resources necessary to perform hip fracture surgery. In 2005–2006, 8% of hip fracture patients were transferred at least once. The likelihood of this happening varies across the country. Transfers were more common than the overall Canadian average in B.C., Manitoba and Saskatchewan. They were less common in Nova Scotia, Newfoundland and Labrador and New Brunswick.* In calculating wait times, we include the number of days between first admission with a hip fracture and surgery—regardless of whether those days were spent in one or several hospitals.

Some patients may also be transferred directly from one hospital's emergency department (ED) to another hospital. We were not able to take this into account in our analyses, nor were we able to track time spent waiting in an ED prior to admission. To what extent does this matter? In Ontario (where the date and time of ED registration are available), the median wait in the ED prior to admission for patients who went on to have surgery was five hours. When wait time for hip fracture surgery is defined as the time from ED registration to surgery, 59% of hip fracture cases had their operation on the day of admission or the next day. This compares to 66% of cases when wait time is defined as the time from hospital admission to surgery (as elsewhere in this report).

The hip fracture wait time indicators in this report are intended to provide comparable measures of timely services across the country and to be used as tools to help identify opportunities for improvement in patient care, using a national data source where wait time can be measured only in days. The *same/next day* and the *same/next/day after* indicators can help jurisdictions evaluate their performance in a national context. However, these indicators are not intended to directly report on the 48-hour benchmark, for which some jurisdictions and hospitals may have more precise information available than the national database. The hip fracture wait time indicators in this report will be different from those measuring the benchmark and should not be directly compared.

Provincial, territorial and regional rates are based on where patients live, not where they are treated. Data from Quebec were excluded due to differences in data collection. We also excluded hip fractures that occurred in hospital.

* Territories were not included in the comparison because of small numbers.

How Does Canada Compare?

International comparisons are always challenging, particularly in the case of new indicators like wait time for hip fracture surgery. First, not all countries define "wait time" in the same way. For example, some countries count waits in hours, others in days. Another issue complicating comparisons is that countries report information for different years. The ways that surgery data are collected also vary among countries.[35]

In an attempt to move towards more consistent measurement, the Organisation for Economic Co-operation and Development (OECD) established the Health Care Quality Indicators Project in 2001. Among other indicators, the project compares wait times for surgery following hip fracture in adults aged 65 and older in selected countries. It highlights differences in wait time measurement, as well as potential variations among countries in how long seniors wait for surgery. An updated report is expected to be released in 2007.

Figure 5. Working Towards Comparability

The OECD's Health Care Quality Indicators Project compares wait time for surgery following hip fractures in 11 countries. All data are based on waits experienced by patients aged 65 and older. Variations in data years, classification systems used to track diagnoses of upper femur fracture, wait time measures and the percentage of patients who undergo timely surgery are reported below.

Country	Year Reported	Coding Scheme Used to Diagnose Upper Femur Fracture	Wait Time Measure	% Undergoing Surgery Within Wait Time Measure
Canada	2002–2003	ICD-10 or ICD-9	3 days	79% unadjusted; 80% age-adjusted
Denmark	2004	ICD-10	48 hours	68%
England	2002–2003	ICD-10	48 hours	62%
Finland	2003	ICD-10 or ICD-9	48 hours	86%
Iceland	1999–2003	ICD-10 or ICD-9	2 days	73%
Italy	2003	ICD-10	48 hours	33%
Mexico	2003	Not reported	120 hours	65%
The Netherlands	2001	ICD-10 or ICD-9	48 hours	80%
Norway	2004	ICD-10	48 hours	93%
Portugal	2004	ICD-9	48 hours	50%
Sweden*	2003	ICD-10 or ICD-9	Days (exact number not reported)	94%

Source: E. Kelley and J. Hurst, *Health Care Quality Indicators Project Initial Indicators Report* (OECD Health Working Paper no. 22) (Paris: Organisation for Economic Co-operation and Development, 2006), [online], from <http://www.oecd.org/dataoecd/1/34/36262514.pdf>.
*National data are not available. The register covers 80% of all surgeries in Sweden.

Who Waits Longer?

Some patients are more likely than others to wait for care. For example, some patients require treatment prior to surgery to stabilize medical conditions. Surgery may also be delayed while patients await consultations or tests, or if operating rooms, surgeons or other resources are not available.[36, 37]

In calculating the hip fracture surgery wait time indicator, we adjusted for the following factors:

- **Sex**: Our analyses show that men are less likely than women to undergo surgery on the day of admission or the next day (63% did so compared with 66%). This finding is consistent with other research.[26, 38]
- **Comorbidities**: Our data also support findings from a number of other studies that show surgery is more likely to be delayed among patients with certain pre-admission comorbidities.[25, 26, 36, 38]
- **Age**: Findings from studies examining the relationship between age and timing of hip fracture surgery have been mixed. Some studies found that older patients tend to wait longer for surgery,[25, 39] while another found that patients aged 85 and older undergo surgery earlier, on average, than patients in younger age groups.[38]

Transfers	Hospital size	Volume	Time of admission	Day of admission
Transfers ⟶ longer wait	Smaller hospital ⟶ shorter wait	Lower volume ⟶ shorter wait	Admission between noon and midnight ⟶ longer wait	Admission on the weekend ⟶ shorter wait

Other factors may influence how long an individual waits for hip fracture surgery. Examples include:*

- **Transfers:** About 8% of patients have their hip fracture surgery in a hospital other than the one to which they were first admitted. Patients who are transferred at least once are less likely to undergo surgery on the day of admission or the next day (31% did so) than patients not transferred (68%).

  Among transferred patients, 73% had their surgery in a hospital that was less than 100 kilometres away from the place where they were first admitted. Patients transferred to a facility less than 100 kilometres away are more likely to have surgery on the day of admission or the next day (32% did so) than those transferred to a facility located 100 kilometres away or farther (25%).
- **Hospital size**:† Patients cared for in small hospitals are more likely to undergo hip fracture surgery on the day of admission or the next day (74% did so) than those cared for in medium to large hospitals (67%) or teaching hospitals (57%).
- **Surgical volume**:‡ Hip fracture patients admitted to hospitals where less than 137 hip fracture procedures were performed annually are more likely than those admitted to a high-volume facility to undergo surgery on the day of admission or the next day.

* These factors were selected based on reviews of published literature, as well as availability and analysis of data available to CIHI.

† For this analysis, hospitals were grouped according to bed size as follows: large hospitals are those with 400 beds or more, medium hospitals are those with 200 to 399 beds and small hospitals are those with 199 beds or fewer.

‡ Based on the distribution of our data, low-volume facilities were those in which fewer than 137 hip fracture procedures were performed in 2005–2006. A high-volume facility was one in which 137 or more were performed.

- **Time of admission**: About 27% of patients who undergo hip fracture surgery are first admitted between midnight and noon. These patients are more likely to undergo surgery on the day of admission or the next day than those admitted in the afternoon or evening (77% versus 61%).
- **Day of admission**: Weekday admissions (73%) are more common than weekend admissions for patients who have hip fracture surgery. Patients admitted on a weekend are more likely to undergo surgery on the day of admission or the next day than those admitted on a weekday (70% versus 63%).

Outcomes of Hip Fracture Surgery

In the past, bed rest was one of the few options available to patients who broke their hips. While bed rest and traction are still necessary for some patients, modern surgical and other advances now offer new treatment options. Today, a hip fracture is still a serious health problem, but many patients can look forward to returning to an active life.

For patients who proceed to surgery, a number of studies suggest that outcomes tend to be best with timely surgery. Many, although not all, studies indicate that delays to surgery increase the risk of mortality.[24–26, 38, 40] Research also suggests that patients who wait longer for surgery are more likely to experience postoperative complications, to have longer stays in hospital and to have worse recovery of function.[27]

Figure 6. Recent Research

Many researchers have examined the association between surgical delay and patient outcomes for hip fracture patients. The table below highlights key findings of 10 recent studies. Most, but not all, studies found that a delay in hip fracture surgery is associated with an increased risk of mortality.

Study	Authors	Publication Year	Population	Wait Time		Association Between Longer Wait Time and Risk of Mortality	Other Outcomes
				Shorter Wait Time	Longer Wait Time		
Mortality Associated With Delay in Operation After Hip Fracture: Observational Study[25]	Bottle and Aylin	2006	129,522 admissions aged ≥65 in 151 National Health Service hospital trusts, discharged between April 2001 and March 2004 in England	≤1 day or ≤2 days	>1 day or >2 days	Delay in operation (1 or 2 days' delay) was associated with an increased risk of death (30-day in-hospital mortality and in-hospital mortality), which was reduced, but persisted after adjustment for comorbidity.	There was little evidence of an association between surgical delay and emergency readmission within 28 days.
Mortality Rate After Hip Hemiarthroplasty: Analysis of Risk Factors in 299 Consecutives *[sic]* Cases[41]	D'Angelo et al.	2005	314 patients aged 33–96 with bipolar implants for femoral neck fracture between January 1997 and September 2002 in Italy (299 were followed up for mortality)	≤24 hours	>24 hours	Wait time was a significant factor for mortality at 6, 12 and 24 months: patients surgically treated in the first 24 hours had lower mortality than those who waited longer.	Not measured
Risk Factors Correlated With Post-Operative Mortality for Hip Fracture Surgery in the Elderly: A Population-Based Approach[42]	Franzo et al.	2005	6,629 patients aged ≥65 who had surgery for hip fractures between 1996 and 2000 in Italy	≤1 day	>1 day	After adjustment for patient risk factors and hospital level variability, there was *no significant association* between increase in in-hospital mortality rate and a surgical wait time of more than 1 day.	Not measured

Figure 6. Recent Research (cont'd)

Study	Authors	Publication Year	Population	Wait Time		Association Between Longer Wait Time and Risk of Mortality	Other Outcomes
				Shorter Wait Time	Longer Wait Time		
Early Mortality After Hip Fracture: Is Delay Before Surgery Important?[24]	Moran et al.	2005	2,660 patients aged 17–103 who had hip fracture surgery at one university hospital in the UK from May 1999 to May 2003	Delay ≤4 days	Delay >4 days	A delay of more than 4 days significantly increased mortality (30-day, 90-day and 1-year mortality).	Not measured
Quality Effects of Operative Delay on Mortality in Hip Fracture Treatment[38]	Sund and Liski	2005	16,881 first-time hip fracture patients aged ≥65 from 47 hospitals in Finland from 1998 to 2001	0–2 nights	≥3 nights	Operative delay was associated with a higher 1-year mortality rate. After adjustment for provider and patient characteristics, the increased risk in mortality decreased, but remained significant.	Not measured
The Effect of Hospital Type and Surgical Delay on Mortality After Surgery for Hip Fracture[43]	Weller et al.	2005	57,315 hip fracture patients aged ≥50 who were admitted to hospital in Ontario, Canada, between 1993 and 1999	Delay 0 days	Delay ≥1 day	In-hospital mortality increased as the surgical delay increased for more than 1 day. The increase in mortality risk was higher for delays of more than 2 days.	Not measured
Post-Operative Mortality Related to Waiting Time for Hip Fracture Surgery[40]	Casaletto et al.	2004	Mortality data for 166 patients aged 30–98 with an average hip fracture surgical wait time of 0.47 days in 1994 and for 197 patients aged 28–99 with an average wait time of 1.01 days in 1996 were obtained from the Malta national mortality register	≤1 day	>1 day	1-year mortality rate is lower for patients who were medically fit for surgery and were operated on on the day of admission. There was also a 10% increase in the 1-year mortality risk for patients who had a higher average wait time compared to those who had a lower wait time.	Not measured
Delays Until Surgery After Hip Fracture Increases Mortality[26]	McGuire et al.	2004	18,209 Medicare recipients aged ≥65 in Pennsylvania during a 21-month period from 1995–1996	Delay <2 days	Delay ≥2 days	Patients with a surgical delay of 2 days or more had a 17% higher chance of dying by day 30 after admission.	Not measured
Association of Timing of Surgery for Hip Fracture and Patient Outcomes[27]	Orosz et al.	2004	1,206 patients aged ≥50 admitted over 29 months, ending December 1999; 1,178 were finally treated with surgery by 4 hospitals in the New York City area	≤24 hours	>24 hours	Earlier surgery was *not associated* with improved 6-month mortality.	Earlier surgery was associated with reduced pain, hospital length of stay and major complications among patients medically stable at admission.
The Effects of Time-to-Surgery on Mortality and Morbidity in Patients Following Hip Fracture[44]	Grimes et al.	2002	8,383 patients aged ≥60 had hip fracture surgery between 1983 and 1993; patients were from 20 hospitals in 4 metropolitan areas in the United States	24–48 hours	>96 hours	After adjustment for underlying medical problems and other differences, there was *no difference* in long-term (up to 18 years) or 30-day mortality for patients having surgery more than 96 hours after admission when compared with 24–48 hours.	Surgical delay was associated with an increased risk of decubitus ulcer.

Mortality Following Hip Fracture Surgery

In 2005–2006, about 6% of seniors who underwent hip fracture surgery in Canadian hospitals outside of Quebec died in hospital within 30 days of their admission.* However, the risk of dying was not the same for all patients. Older patients, men and those with other illnesses in addition to their hip fracture had higher death rates than others. Timing of surgery is another factor that may affect mortality rates. Patients who had surgery on the same day as their admission to hospital or the next day had a mortality rate of 5.6% compared to 7.1% for those who waited longer. Even after age, sex, the presence of comorbidities and the number of hip fracture procedures that the hospital performed annually were taken into account, those who had their surgery later were 22% more likely to die within 30 days of admission than those who underwent surgery on the day of admission or the next day. Other factors may influence a patient's risk of dying that our data do not take into account.

Figure 7. Who Is More at Risk?

A patient's age, sex and co-existing illnesses are strongly associated with the risk of dying in hospital within 30 days of admission for hip fracture surgery. However, as the table below shows, other factors also mattered for seniors who broke their hips in 2005–2006. These results are each adjusted for the influence of the other factors listed and are statistically significant.

% increase in 30-day in-hospital mortality risk for:	
Older patients compared with those aged 65–84	+303% for those aged 95+ +128% for those aged 85–94
Men compared with women	+133%
Those with one or more selected comorbid conditions* present on admission compared to those without such co-existing illnesses	+111%
Patients who did not have their surgery on the same day as their admission or the next day compared with those who did	+22%
Patients who had surgery in a lower-volume facility (performing less than 137 hip fracture procedures in 2005–2006) compared with those treated in other hospitals	+16%

Note: Quebec data are not included because of differences in data collection.
* Based on the 19 conditions included in the Charlson Comorbidity Index.[45–47]
Source: Discharge Abstract Database, CIHI.

Other Outcomes

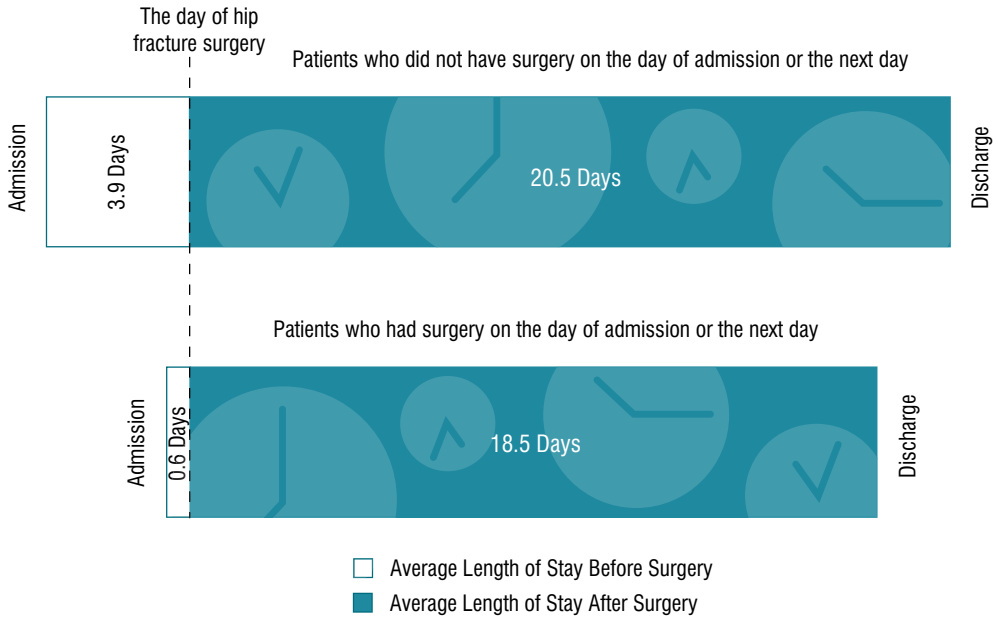
Most research on the effects of delays in hip fracture surgery focus on mortality, but a few studies have explored other outcomes. For example, one study found that earlier surgery was associated with lower levels of pain and fewer major complications among patients who were medically stable at the time of admission.[27] This study and others have also linked delays in surgical repair and subsequent mobilization to increased risks of complications such as thromboembolism, urinary tract infections and decubitus ulcers.[27, 44, 48] Researchers have also suggested that timely surgery is associated with improved quality of life. This includes functional recovery and independence.[48, 49]

* Excludes Quebec because of differences in data collection. Data reflect hip fractures that occurred in the first 11 months of the year only to allow for the follow-up period. Deaths in any hospital during the 30 days after first admission with a hip fracture were captured in these totals.

In addition to health status outcomes, many studies have found an association between earlier hip fracture surgery and shorter hospital length of stay.[27, 29, 50] This pattern is reflected in Canadian data for 2005–2006. Patients who had surgery on the day of admission or the next day stayed an average of 19.1 days total in hospital. This compares to 24.4 days for patients with later operations. Interestingly, patients who did not have hip fracture surgery on the day they were admitted or the next day also tended to stay longer in hospital after surgery—20.5 days on average compared with 18.5 days for others. These differences are statistically significant, even after adjustment for age, sex and the presence of co-existing illnesses. It is important to note, however, that patients whose surgery was postponed while their medical condition was stabilized may also have more complex postoperative care.

Figure 8. The Association Between Wait Time and Hospital Length of Stay

Patients who waited longer (those who did not have hip fracture surgery on the day of admission or the next day) were more likely to have a longer hospital stay (total and postoperative) than those who did not. These differences are statistically significant and remain even after adjustment for a patient's sex, age and comorbid conditions.



Note: Quebec data are not available because of differences in data collection.
Source: Discharge Abstract Database, CIHI.

Information Gaps

What We Know

- Falls and hip fractures are relatively common, especially among seniors, and they happen everywhere—homes, long-term care facilities, hospitals, outdoors and elsewhere.
- The number of seniors who are hospitalized across the country for hip fracture surgery has been declining in recent years.
- Hip fractures carry costs to patients as well as to the health system.
- There are effective ways to reduce the number of hip fractures. These include fall-prevention strategies, as well as efforts to reduce the prevalence of osteoporosis and related bone diseases.
- Following a hip fracture, most Canadians aged 65 and older have their surgery on the day of admission to hospital or the next day.
- Wait times for hip fracture surgery vary across the country and across regions.
- Some patients are more likely than others to wait for hip fracture surgery. Patients who are transferred tend to wait longer, as do those admitted to larger community or teaching hospitals and higher-volume hospitals. Patients admitted in the afternoon or evening hours or on a weekday are less likely to have surgery on the day of admission or the next day than other patients.
- Longer wait times for hip fracture surgery are associated with increased in-hospital mortality within 30 days of admission.
- Longer wait times for hip fracture surgery are associated with a longer hospital length of stay (total and postoperative).

What We Don't Know

- The complete list of factors that explain the regional and provincial differences in hip fracture rates or how long a patient waits for surgery following hip fracture.
- The average length of time a patient waits for hip fracture surgery from the time the fracture occurs to the time surgery is performed.
- To what extent longer wait times for hip fracture surgery affect long-term mortality rate, functional impairment and other outcomes.

What's Happening

- This year's OECD Health Care Quality Indicators Project release will provide the latest in international comparisons of wait time data for hip fracture surgery. The OECD plans to continue reporting on this indicator and to work to improve comparability across countries.
- Newfoundland and Labrador has launched a provincial initiative to track and report the wait time for hip fracture surgery and to compare it to the national benchmark of 48 hours. Special effort was made to collect data and to report wait time in hours from registration in the emergency department till time of surgery. This initiative engages orthopedic surgeons, wait time coordinators and operating hospitals and is aimed to improve access to surgical services for hip fracture patients.
- CIHI and the ministère de la Santé et des Services sociaux in Quebec are working together to evaluate the feasibility of producing a comparable wait time for hip fracture surgery indicator using data from Quebec. The indicator for Quebec was not available for this publication because of differences in data collection.

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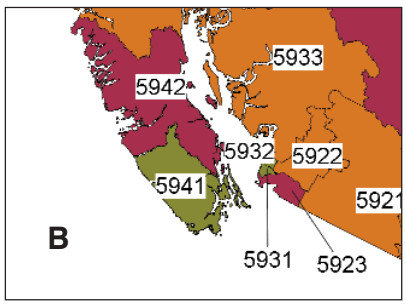
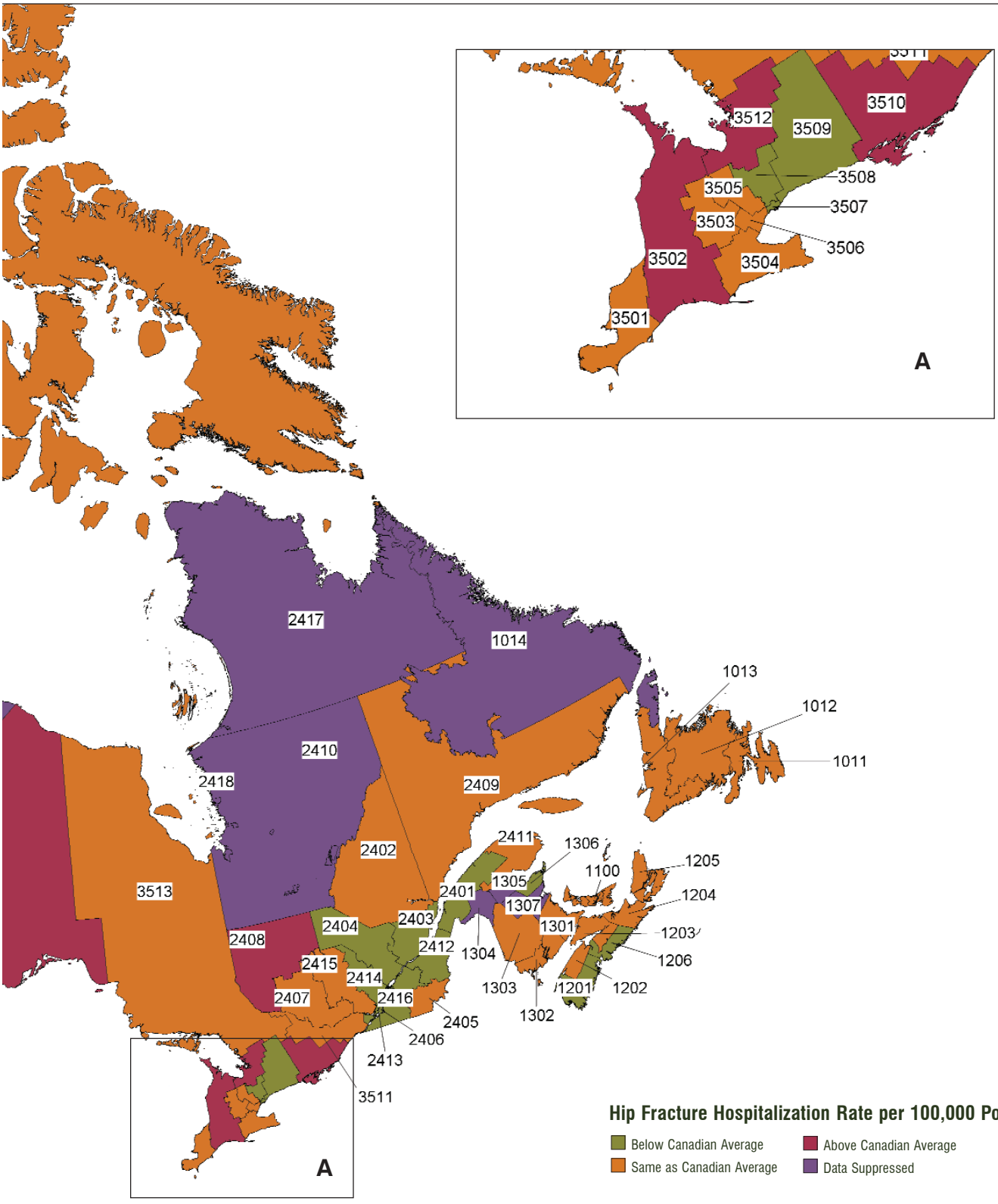
Hip Fracture Hospitalization Rate by Health Region
2005–2006





Hip Fracture Hospitalization Rate per 100,000 Population

- Below Canadian Average
- Same as Canadian Average
- Above Canadian Average
- Data Suppressed

Source: Canadian Institute for Health Information.

Note: For Prince Edward Island (1100), the Yukon (6001), the Northwest Territories (6101) and Nunavut (6201), the data on the map represent the entire province or territory.

Map Code	Health Region	Legend Name	Population ('000), 2005	% Population Age 65+, 2005	Dependency Ratio, 2005
	Newfoundland and Labrador	**N.L.**	**516**	**13.2**	**55.1**
1011	Eastern Regional Integrated Health Authority	Eastern, N.L.	299	12.5	53.1
1012	Central Regional Integrated Health Authority	Central, N.L.	98	15.6	58.9
1013	Western Regional Integrated Health Authority	Western, N.L.	81	14.8	58.4
	Prince Edward Island	**P.E.I.**	**138**	**14.1**	**64.7**
	Nova Scotia	**N.S.**	**938**	**14.3**	**59.2**
1201	Zone 1	Zone 1, N.S.	124	17.5	63.6
1202	Zone 2	Zone 2, N.S.	83	16.2	65.5
1203	Zone 3	Zone 3, N.S.	107	15.9	64.1
1204	Zone 4	Zone 4, N.S.	94	16.0	64.7
1205	Zone 5	Zone 5, N.S.	130	16.2	65.8
1206	Zone 6	Zone 6, N.S.	400	11.4	52.3
	New Brunswick	**N.B.**	**752**	**14.0**	**57.8**
1301	Region 1	Region 1, N.B. (Moncton area)	195	14.0	55.6
1302	Region 2	Region 2, N.B. (Saint John area)	176	13.8	61.6
1303	Region 3	Region 3, N.B. (Fredericton area)	172	12.8	57.8
1306	Region 6	Region 6, N.B. (Bathurst area)	81	14.4	53.2
	Quebec	**Que.**	**7,617**	**13.8**	**57.3**
2401	ASSS du Bas-Saint-Laurent	Bas-Saint-Laurent	202	16.4	60.2
2402	ASSS du Saguenay-Lac-Saint-Jean	Saguenay-Lac-Saint-Jean	275	14.2	58.0
2403	ASSS de la Capitale nationale	Capitale nationale	668	14.9	53.2
2404	ASSS de la Mauricie et du Centre-du-Québec	Mauricie et Centre-du-Québec	487	15.9	60.5
2405	ASSS de l'Estrie	Estrie	300	14.5	60.0
2406	ASSS de Montréal	Montréal	1,874	15.1	55.1
2407	ASSS de l'Outaouais	Outaouais	342	10.8	54.5
2408	ASSS de l'Abitibi-Témiscamingue	Abitibi-Témiscamingue	145	12.5	60.6
2409	ASSS de la Côte-Nord	Côte-Nord	96	11.5	56.0
2411	ASSS de la Gaspésie-Îles-de-la-Madeleine	Gaspésie-Îles-de-la-Madeleine	96	17.2	60.1
2412	ASSS de Chaudière-Appalaches	Chaudière-Appalaches	396	13.8	58.5
2413	ASSS de Laval	Laval	370	13.9	60.8
2414	ASSS de Lanaudière	Lanaudière	424	11.5	58.4
2415	ASSS des Laurentides	Laurentides	509	11.8	58.2
2416	ASSS de la Montérégie	Montérégie	1,372	12.3	58.0
	Ontario	**Ont.**	**12,590**	**12.8**	**60.4**
3501	Erie St. Clair LHIN	Erie St. Clair	646	13.7	63.9
3502	South West LHIN	South West	929	14.5	65.4
3503	Waterloo Wellington LHIN	Waterloo Wellington	699	11.6	60.4
3504	Hamilton Niagara Haldimand Brant LHIN	Hamilton Niagara Haldimand Brant	1,365	14.7	64.8
3505	Central West LHIN	Central West	741	9.5	57.0
3506	Mississauga Halton LHIN	Mississauga Halton	1,076	9.8	57.6
3507	Toronto Central LHIN	Toronto Central	1,149	13.3	55.2
3508	Central LHIN	Central	1,577	11.3	56.9
3509	Central East LHIN	Central East	1,464	13.1	60.6
3510	South East LHIN	South East	483	15.9	64.4
3511	Champlain LHIN	Champlain	1,180	12.6	58.6
3512	North Simcoe Muskoka LHIN	North Simcoe Muskoka	423	14.1	65.7
3513	North East LHIN	North East	568	15.5	64.3
3514	North West LHIN	North West	241	13.2	64.8
	Manitoba	**Man.**	**1,178**	**13.5**	**67.6**
4610	Winnipeg RHA	Winnipeg	663	13.6	61.1
4630	Interlake RHA	Interlake	80	14.5	71.5
4640	RHA—Central Manitoba Inc.	Central	103	13.0	79.0

Map Code	Health Region	Legend Name	Population ('000), 2005	% Population Age 65+, 2005	Dependency Ratio, 2005
Saskatchewan		**Sask.**	**993**	**14.8**	**72.9**
4704	Regina Qu'Appelle Health Region	Regina	242	14.0	65.7
4706	Saskatoon Health Region	Saskatoon	286	13.2	66.1
4709	Prince Albert Parkland RHA	Prince Albert	75	15.0	80.9
Alberta		**Alta.**	**3,281**	**10.5**	**58.3**
4820	Chinook Health	Chinook	155	12.9	69.3
4821	Palliser Health Region	Palliser	101	13.4	67.0
4822	Calgary Health Region	Calgary	1,189	9.5	53.3
4823	David Thompson Health Region	David Thompson	293	11.2	63.1
4824	East Central Health	East Central	113	15.6	73.0
4825	Capital Health	Capital	1,023	10.9	56.9
4826	Aspen Regional Health	Aspen	176	11.1	69.6
4827	Peace Country Health	Peace Country	134	8.3	64.3
British Columbia		**B.C.**	**4,271**	**13.8**	**58.0**
5911	East Kootenay HSDA	East Kootenay	83	14.1	60.3
5912	Kootenay Boundary HSDA	Kootenay Boundary	80	16.6	62.7
5913	Okanagan HSDA	Okanagan	331	19.6	70.8
5914	Thompson/Cariboo/Shuswap HSDA	Thompson/Cariboo/Shuswap	222	14.3	61.9
5921	Fraser East HSDA	Fraser East	264	13.8	69.6
5922	Fraser North HSDA	Fraser North	562	11.5	52.0
5923	Fraser South HSDA	Fraser South	640	11.7	59.8
5931	Richmond HSDA	Richmond	173	13.4	51.1
5932	Vancouver HSDA	Vancouver	593	13.0	45.3
5933	North Shore/Coast Garibaldi HSDA	North Shore	274	14.3	56.6
5941	South Vancouver Island HSDA	South Vancouver Island	351	17.3	59.3
5942	Central Vancouver Island HSDA	Central Vancouver Island	253	18.1	68.8
5943	North Vancouver Island HSDA	North Vancouver Island	119	13.7	62.5
5951	Northwest HSDA	Northwest	84	8.4	61.5
5952	Northern Interior HSDA	Northern Interior	154	9.1	58.0
Yukon Territory		**Y.T.**	**31**	**7.1**	**49.1**
Northwest Territories		**N.W.T.**	**43**	**4.7**	**59.2**
Nunavut		**Nun.**	**30**	**2.7**	**90.4**
Canada		**Canada**	**32,378**	**13.1**	**59.6**

Population

The number of people living in a geographic area. A population's size and age/sex composition may affect the health status of a region and its need for health services. Population data also provide the "denominators" used to calculate rates for most health and social indicators.
Sources: Statistics Canada, Demography Division. Data are derived from the census and administrative sources on births, deaths and migration. Population growth for health regions in Alberta and British Columbia were supplied by Alberta Health and Wellness and BC Stats, respectively.

Dependency ratio

The ratio of the combined population aged 0 to 19 years old and the population aged 65 years and over to the population aged 20 to 64 years old. This ratio is presented as the number of dependents for every 100 people in the working-age population. Canadians aged 65 and over and those under age 20 are more likely to be socially and/or economically dependent on working-age Canadians and they may also put additional demands on health services.
Note: The definition of the indicator has been revised from previous years.
Source: Statistics Canada, Demography Division (special tabulation).

Self-Reported Conditions

Self-Rated Health, 2005 (Fair or Poor)

	Age 12–64		Age 65+	
	%	95% CI	%	95% CI
N.L.	10.0	(8.7–11.3)	23.6	(20.1–27.1)
P.E.I.	11.7	(9.5–13.9)	27.9	(23.1–32.6)
N.S.	11.1	(9.9–12.3)	31.8	(28.8–34.8)
N.B.	11.4	(10.2–12.5)	32.2	(28.8–35.6)
Que.	7.8	(7.3–8.3)	24.7	(23.1–26.4)
Ont.	8.6	(8.1–9.0)	25.7	(24.3–27.0)
Man.	8.2	(7.1–9.3)	28.4	(25.2–31.7)
Sask.	9.5	(8.4–10.5)	29.0	(26.3–31.7)
Alta.	8.3	(7.5–9.2)	27.0	(24.4–29.5)
B.C.	9.0	(8.4–9.7)	26.7	(24.8–28.6)
Y.T.	8.6▼	(5.8▼–11.5▼)	19.1▼	(8.4▼–29.7▼)
N.W.T.	9.6	(6.7–12.5)	38.7▼	(23.8▼–53.6▼)
Nun.	9.7	(7.0–12.4)	50.8	(34.6–66.9)
Canada	**8.6**	**(8.3–8.9)**	**26.2**	**(25.5–27.0)**

Functional Health Status, 2005 (Moderate or Severe)

	Age 12–64		Age 65+	
	%	95% CI	%	95% CI
N.L.	19.2	(16.3–22.1)	30.1	(24.3–35.9)
P.E.I.	19.3	(15.7–23.0)	37.1	(29.8–44.3)
N.S.	20.7	(18.2–23.2)	31.9	(26.6–37.2)
N.B.	18.2	(15.3–21.0)	29.7	(24.4–35.0)
Que.	12.8	(11.5–14.1)	24.3	(20.9–27.8)
Ont.	16.3	(15.1–17.5)	28.6	(25.8–31.3)
Man.	16.0	(13.5–18.5)	30.9	(25.7–36.2)
Sask.	16.2	(13.9–18.4)	34.7	(30.0–39.4)
Alta.	16.1	(14.2–18.0)	32.2	(27.2–37.1)
B.C.	16.9	(15.3–18.6)	31.5	(27.6–35.3)
Y.T.	18.4	(14.5–22.4)	40.5	(27.5–53.6)
N.W.T.	15.6	(12.2–19.0)	48.3▼	(31.0▼–65.5▼)
Nun.	16.9	(13.6–20.2)	35.9▼	(16.7▼–55.1▼)
Canada	**15.8**	**(15.1–16.4)**	**28.7**	**(27.3–30.2)**

Participation and Activity Limitation, 2005

	Age 12–64		Age 65+	
	%	95% CI	%	95% CI
N.L.	30.2	(28.2–32.3)	55.0	(50.5–59.5)
P.E.I.	26.4	(23.6–29.2)	62.4	(56.8–68.1)
N.S.	34.4	(32.4–36.4)	66.5	(62.9–70.0)
N.B.	29.0	(27.1–31.0)	57.5	(54.0–61.0)
Que.	23.5	(22.8–24.3)	45.8	(44.0–47.7)
Ont.	25.4	(24.7–26.1)	53.1	(51.6–54.6)
Man.	26.4	(24.5–28.3)	58.5	(55.3–61.8)
Sask.	27.2	(25.6–28.8)	59.9	(56.8–63.0)
Alta.	25.9	(24.5–27.2)	56.3	(53.5–59.1)
B.C.	27.0	(25.8–28.1)	54.1	(51.8–56.3)
Y.T.	26.0	(21.3–30.6)	55.9	(43.5–68.2)
N.W.T.	22.2	(18.5–25.9)	70.4	(57.4–83.4)
Nun.	28.5	(23.4–33.5)	65.5▼	(43.0▼–88.0▼)
Canada	**25.7**	**(25.4–26.1)**	**52.8**	**(51.9–53.6)**

Pain or Discomfort that Affects Activities, 2005

	Age 12–64		Age 65+	
	%	95% CI	%	95% CI
N.L.	10.8	(8.5–13.0)	17.6	(12.6–22.7)
P.E.I.	11.7	(8.9–14.5)	22.2	(16.4–27.9)
N.S.	12.1	(9.8–14.3)	16.5	(12.3–20.8)
N.B.	12.1	(9.7–14.4)	18.8	(13.8–23.7)
Que.	7.4	(6.4–8.4)	14.9	(12.2–17.5)
Ont.	9.8	(8.8–10.8)	19.7	(17.2–22.2)
Man.	10.8	(8.7–13.0)	20.1	(15.5–24.6)
Sask.	9.8	(8.0–11.7)	21.1	(16.9–25.3)
Alta.	8.9	(7.4–10.5)	21.1	(16.5–25.6)
B.C.	10.4	(9.1–11.7)	21.7	(18.4–25.0)
Y.T.	13.0	(9.9–16.1)	36.1▼	(22.2▼–49.9▼)
N.W.T.	9.0	(6.7–11.4)	27.2▼	(18.3▼–36.1▼)
Nun.	7.9▼	(5.1▼–10.8▼)	*	* *
Canada	**9.4**	**(8.9–9.9)**	**18.8**	**(17.4–20.2)**

Arthritis or Rheumatism, 2005

	Age 12–64		Age 65+	
	%	95% CI	%	95% CI
N.L.	16.1	(14.6–17.7)	51.9	(47.7–56.2)
P.E.I.	14.6	(12.6–16.7)	56.3	(50.4–62.2)
N.S.	17.2	(15.8–18.7)	51.9	(48.5–55.3)
N.B.	15.0	(13.7–16.3)	49.1	(45.6–52.6)
Que.	9.3	(8.8–9.9)	41.0	(39.2–42.7)
Ont.	11.9	(11.4–12.4)	48.3	(46.7–49.8)
Man.	12.8	(11.6–13.9)	49.6	(46.2–52.9)
Sask.	13.3	(12.1–14.4)	47.1	(44.2–50.0)
Alta.	10.3	(9.6–11.1)	48.6	(45.7–51.5)
B.C.	10.8	(10.1–11.6)	42.4	(40.2–44.5)
Y.T.	10.4	(8.0–12.8)	54.8	(42.6–67.1)
N.W.T.	10.3	(7.8–12.9)	45.0	(32.3–57.7)
Nun.	4.8▼	(2.3▼–7.2▼)	54.5▼	(30.3▼–78.8▼)
Canada	**11.4**	**(11.1–11.7)**	**45.9**	**(45.1–46.8)**

Body Mass Index, 2005 (30 and Over)

	Age 18–64		Age 65+	
	%	95% CI	%	95% CI
N.L.	25.4	(23.2–27.6)	15.4	(12.5–18.2)
P.E.I.	24.0	(20.9–27.2)	15.4	(11.4–19.4)
N.S.	21.6	(19.7–23.4)	16.7	(14.3–19.1)
N.B.	23.7	(21.7–25.6)	17.0	(14.2–19.7)
Que.	14.0	(13.2–14.7)	15.1	(13.8–16.5)
Ont.	15.1	(14.5–15.7)	14.8	(13.8–15.8)
Man.	18.2	(16.7–19.8)	17.4	(14.8–20.1)
Sask.	21.1	(19.4–22.7)	18.6	(16.5–20.7)
Alta.	15.6	(14.5–16.7)	16.9	(14.7–19.0)
B.C.	13.3	(12.4–14.2)	12.8	(11.4–14.2)
Y.T.	17.4	(13.5–21.4)	22.0▼	(12.7▼–31.4▼)
N.W.T.	24.3	(20.1–28.4)	28.3▼	(16.5▼–40.2▼)
Nun.	26.1	(22.8–29.5)	*	* *
Canada	**15.5**	**(15.2–15.9)**	**15.1**	**(14.5–15.7)**

Self-rated health
Proportion of household population who rated their own health status as being either fair or poor. A measure of overall health status, this indicator can reflect aspects of health not captured in other measures, such as incipient disease, disease severity, aspects of positive health status, physiological and psychological reserves, and social and mental function.
Source: Statistics Canada, Canadian Community Health Survey, 2005.

Functional health status
Proportion of household population who reported having moderate or severe functional health status. This indicator is based on the self-reporting of measures of overall functional health, based on eight dimensions of functioning (vision, hearing, speech, mobility, dexterity, feelings, cognition and pain). Otherwise known as Health Utility Index, this index, developed at McMaster University's Centre for Health Economics and Policy Analysis, is based on the Comprehensive Health Status Measurement System. A score of 0.8 to 1.0 is considered to be very good or perfect functional health; scores below 0.8 are considered to indicate moderate or severe functional health status.
Source: Statistics Canada, Canadian Community Health Survey, 2005.

Participation and activity limitation
Proportion of household population who reported being limited in selected activities (home, school, work and other) because of a physical condition, mental condition or health problem that has lasted or is expected to last six months or longer.
Source: Statistics Canada, Canadian Community Health Survey, 2005.

Pain or discomfort that affects activities
Proportion of household population who reported having pain or discomfort that prevents or limits a few, some or most activities on a continuing basis.
Source: Statistics Canada, Canadian Community Health Survey, 2005.

Arthritis or rheumatism
Proportion of household population who reported being diagnosed by a health professional as having arthritis or rheumatism. Arthritis or rheumatism includes both rheumatoid arthritis and osteoarthritis, but excludes fibromyalgia.
Source: Statistics Canada, Canadian Community Health Survey, 2005.

Body mass index
Proportion of household population with a body mass index (BMI) of 30 or greater. According to the World Health Organization and Health Canada guidelines, a BMI of 30 or greater is classified as obesity and is associated with high health risk. BMI is calculated from weight and height collected from respondents by dividing body weight (in kilograms) by height (in metres) squared.
Source: Statistics Canada, Canadian Community Health Survey, 2005.

Map Code	Health Region	Asthma %	Asthma 95% CI	Diabetes %	Diabetes 95% CI	High Blood Pressure %	High Blood Pressure 95% CI
		Self-Reported Conditions, 2005					
	Newfoundland and Labrador	**9.2**	**(8.0–10.3)**	**6.8**	**(5.9–7.8)**	**19.2**	**(17.7–20.7)**
1011	Eastern, N.L.	9.0	(7.3–10.6)	6.4	(5.0–7.7)	18.8	(16.7–20.9)
1012	Central, N.L.	7.6	(5.4–9.7)	8.1	(5.8–10.3)	20.3	(16.7–23.9)
1013	Western, N.L.	10.8	(8.4–13.1)	7.5	(5.1–9.8)	19.5	(16.4–22.7)
	Prince Edward Island	**8.9**	**(7.3–10.5)**	**6.3**	**(5.2–7.5)**	**16.1**	**(14.5–17.7)**
	Nova Scotia	**9.3**	**(8.3–10.4)**	**6.6**	**(5.8–7.5)**	**18.1**	**(17.0–19.3)**
1201	Zone 1, N.S.	10.0	(7.3–12.7)	8.2	(6.1–10.3)	21.6	(18.5–24.8)
1202	Zone 2, N.S.	9.6	(7.0–12.2)	6.1▼	(4.1▼–8.1▼)	16.3	(13.3–19.2)
1203	Zone 3, N.S.	8.2	(5.8–10.6)	7.7	(5.4–9.9)	20.0	(16.6–23.4)
1204	Zone 4, N.S.	7.3	(5.0–9.7)	7.3	(5.2–9.4)	21.8	(18.7–24.8)
1205	Zone 5, N.S.	8.7	(6.6–10.9)	8.9	(6.9–10.9)	23.1	(20.1–26.2)
1206	Zone 6, N.S.	10.1	(8.0–12.1)	5.1	(3.8–6.5)	14.4	(12.3–16.6)
	New Brunswick	**8.6**	**(7.6–9.7)**	**6.0**	**(5.2–6.7)**	**19.4**	**(18.1–20.7)**
1301	Region 1, N.B. (Moncton area)	8.1	(6.1–10.2)	6.5	(4.5–8.4)	17.6	(14.7–20.6)
1302	Region 2, N.B. (Saint John area)	9.2	(6.8–11.5)	5.3	(3.9–6.8)	21.0	(18.1–23.9)
1303	Region 3, N.B. (Fredericton area)	8.0	(5.7–10.2)	5.2	(3.8–6.6)	18.0	(15.3–20.8)
1306	Region 6, N.B. (Bathurst area)	9.9	(7.1–12.7)	6.5▼	(4.2▼–8.8▼)	19.7	(16.5–23.0)
	Quebec	**8.6**	**(8.1–9.0)**	**5.1**	**(4.8–5.5)**	**15.1**	**(14.6–15.6)**
2401	Bas-Saint-Laurent	8.6	(7.4–9.8)	5.6	(4.7–6.5)	18.8	(17.3–20.3)
2402	Saguenay-Lac-Saint-Jean	10.5	(8.4–12.7)	4.1	(3.0–5.3)	17.1	(14.7–19.6)
2403	Capitale nationale	7.2	(5.9–8.5)	5.4	(4.2–6.6)	15.3	(13.4–17.2)
2404	Mauricie et Centre-du-Québec	7.5	(5.9–9.1)	5.0	(3.6–6.3)	15.0	(12.9–17.1)
2405	Estrie	7.6	(5.6–9.5)	3.5▼	(2.2▼–4.8▼)	12.2	(10.2–14.3)
2406	Montréal	9.0	(7.9–10.1)	5.2	(4.5–5.9)	14.3	(13.2–15.4)
2407	Outaouais	10.7	(8.7–12.8)	4.6	(3.3–5.9)	17.0	(14.5–19.4)
2408	Abitibi-Témiscamingue	10.9	(8.5–13.3)	4.8	(3.5–6.1)	15.6	(13.4–17.9)
2409	Côte-Nord	8.8	(7.1–10.6)	6.3	(4.5–8.0)	20.2	(17.9–22.5)
2411	Gaspésie-Îles-de-la-Madeleine	9.8	(7.5–12.0)	8.3	(6.0–10.5)	20.9	(18.3–23.4)
2412	Chaudière-Appalaches	6.2	(4.7–7.7)	6.4	(4.7–8.1)	15.8	(13.3–18.2)
2413	Laval	8.3	(6.7–9.8)	5.6	(4.6–6.6)	14.8	(13.2–16.4)
2414	Lanaudière	9.0	(7.4–10.6)	6.1	(4.9–7.4)	14.4	(12.4–16.5)
2415	Laurentides	9.2	(7.3–11.1)	5.6	(3.8–7.3)	13.6	(11.6–15.5)
2416	Montérégie	8.5	(7.0–9.9)	4.4	(3.5–5.4)	15.1	(13.5–16.7)
	Ontario	**8.0**	**(7.6–8.3)**	**4.8**	**(4.5–5.1)**	**15.2**	**(14.8–15.7)**
3501	Erie St. Clair	8.5	(7.2–9.8)	5.5	(4.5–6.4)	17.1	(15.5–18.6)
3502	South West	7.3	(6.4–8.2)	5.2	(4.5–6.0)	17.2	(15.9–18.4)
3503	Waterloo Wellington	8.8	(7.4–10.2)	4.4	(3.3–5.5)	13.7	(12.2–15.3)
3504	Hamilton Niagara Haldimand Brant	8.6	(7.7–9.5)	5.9	(5.0–6.7)	17.7	(16.4–18.9)
3505	Central West	6.4	(4.9–7.8)	4.0▼	(2.5▼–5.4▼)	15.8	(13.3–18.3)
3506	Mississauga Halton	7.4	(5.9–8.8)	3.8	(2.8–4.9)	14.3	(12.3–16.3)
3507	Toronto Central	6.7	(5.3–8.1)	3.0	(2.1–3.9)	11.4	(9.7–13.2)
3508	Central	6.7	(5.6–7.7)	4.4	(3.4–5.3)	12.5	(11.0–14.1)
3509	Central East	8.0	(6.8–9.3)	4.8	(3.9–5.7)	15.2	(13.6–16.8)
3510	South East	11.2	(9.7–12.8)	6.0	(5.0–7.1)	19.1	(17.5–20.7)
3511	Champlain	9.7	(8.6–10.7)	5.1	(4.1–6.1)	14.3	(13.1–15.6)
3512	North Simcoe Muskoka	8.3	(6.6–10.0)	5.4	(4.2–6.6)	15.9	(13.8–17.9)
3513	North East	8.9	(7.9–9.9)	7.1	(6.2–8.0)	19.3	(18.1–20.5)
3514	North West	8.1	(6.5–9.7)	6.0	(4.7–7.2)	18.5	(16.4–20.6)
	Manitoba	**7.9**	**(7.0–8.7)**	**4.4**	**(3.8–5.0)**	**15.2**	**(14.1–16.3)**
4610	Winnipeg	7.4	(6.2–8.7)	3.8	(2.9–4.6)	14.6	(12.9–16.3)
4630	Interlake	9.4▼	(5.9▼–12.8▼)	5.8▼	(3.9▼–7.7▼)	18.0	(14.9–21.1)
4640	Central	6.3▼	(4.1▼–8.6▼)	5.9	(4.3–7.5)	13.6	(11.2–16.0)

Map Code	Health Region	Asthma %	Asthma 95% CI	Diabetes %	Diabetes 95% CI	High Blood Pressure %	High Blood Pressure 95% CI
	Saskatchewan	**8.5**	**(7.6–9.4)**	**5.1**	**(4.5–5.7)**	**15.9**	**(15.0–16.8)**
4704	Regina	9.9	(7.8–11.9)	5.3	(3.8–6.7)	14.2	(12.2–16.2)
4706	Saskatoon	7.7	(5.9–9.5)	4.3	(3.0–5.7)	12.4	(10.7–14.2)
4709	Prince Albert	6.7▼	(4.3▼–9.0▼)	6.6▼	(4.4▼–8.9▼)	18.5	(15.0–21.9)
	Alberta	**8.6**	**(7.8–9.3)**	**3.9**	**(3.4–4.4)**	**12.8**	**(12.0–13.6)**
4820	Chinook	10.0	(7.5–12.4)	5.8	(4.0–7.6)	15.9	(13.4–18.5)
4821	Palliser	8.3	(6.0–10.6)	3.2▼	(2.0▼–4.4▼)	15.2	(12.5–17.9)
4822	Calgary	8.9	(7.5–10.2)	3.2	(2.4–3.9)	11.6	(10.1–13.0)
4823	David Thompson	8.9	(6.7–11.0)	4.0	(2.9–5.2)	12.7	(10.6–14.7)
4824	East Central	6.2	(4.3–8.1)	5.1	(3.5–6.7)	15.9	(13.2–18.6)
4825	Capital	8.5	(7.0–10.0)	4.4	(3.4–5.4)	12.9	(11.4–14.4)
4826	Aspen	7.6	(5.4–9.8)	3.7▼	(2.3▼–5.0▼)	15.4	(12.9–18.0)
4827	Peace Country	8.0	(5.5–10.4)	5.0▼	(3.1▼–6.9▼)	12.7	(10.4–15.0)
	British Columbia	**8.1**	**(7.6–8.7)**	**4.6**	**(4.1–5.0)**	**13.2**	**(12.6–13.8)**
5911	East Kootenay	7.8▼	(5.2▼–10.3▼)	4.7▼	(2.9▼–6.6▼)	10.6	(8.2–12.9)
5912	Kootenay Boundary	8.0▼	(5.2▼–10.7▼)	7.1▼	(3.9▼–10.3▼)	14.2	(10.3–18.0)
5913	Okanagan	9.0	(6.9–11.2)	5.0	(3.5–6.5)	16.6	(14.1–19.1)
5914	Thompson/Cariboo/Shuswap	7.4	(5.1–9.6)	5.2▼	(3.3▼–7.1▼)	13.5	(11.0–16.1)
5921	Fraser East	8.4	(6.3–10.6)	5.1	(3.7–6.4)	13.5	(11.3–15.8)
5922	Fraser North	9.5	(7.5–11.4)	5.3	(3.9–6.7)	11.6	(9.8–13.4)
5923	Fraser South	7.1	(5.6–8.5)	4.6	(3.5–5.7)	11.6	(9.8–13.3)
5931	Richmond	5.7▼	(3.5▼–8.0▼)	3.3▼	(1.9▼–4.7▼)	12.0	(9.4–14.7)
5932	Vancouver	6.5	(5.0–7.9)	4.0▼	(2.6▼–5.4▼)	14.1	(11.9–16.3)
5933	North Shore	9.9	(7.6–12.2)	2.2▼	(1.3▼–3.2▼)	12.1	(9.9–14.3)
5941	South Vancouver Island	8.6	(6.8–10.4)	4.3	(3.0–5.6)	14.3	(12.3–16.3)
5942	Central Vancouver Island	10.5	(8.1–12.8)	5.0	(3.5–6.5)	14.1	(11.9–16.4)
5943	North Vancouver Island	9.3▼	(5.0▼–13.6▼)	4.6▼	(2.7▼–6.4▼)	12.3	(9.3–15.3)
5951	Northwest	5.5▼	(3.5▼–7.4▼)	5.8▼	(3.8▼–7.8▼)	16.4	(13.2–19.7)
5952	Northern Interior	7.4	(5.2–9.6)	4.6▼	(2.4▼–6.8▼)	12.2	(9.3–15.1)
	Yukon Territory	**8.7**	**(6.6–10.8)**	**4.3▼**	**(2.8▼–5.7▼)**	**11.3**	**(9.2–13.4)**
	Northwest Territories	**8.7**	**(6.5–10.8)**	**3.4▼**	**(2.0▼–4.8▼)**	**8.8**	**(6.7–11.0)**
	Nunavut	**4.3▼**	**(2.6▼–6.0▼)**	*****	*** ***	**7.0**	**(5.0–8.9)**
	Canada	**8.3**	**(8.1–8.5)**	**4.9**	**(4.7–5.0)**	**14.9**	**(14.7–15.2)**

Self-Reported Conditions, 2005

Asthma
Proportion of household population aged 12 and over who reported being diagnosed by a health professional as having asthma.
Source: Statistics Canada, Canadian Community Health Survey, 2005.

Diabetes
Proportion of household population aged 12 and over who reported being diagnosed by a health professional as having diabetes.
Source: Statistics Canada, Canadian Community Health Survey, 2005.

High blood pressure
Proportion of household population aged 12 and over who reported being diagnosed by a health professional as having high blood pressure.
Source: Statistics Canada, Canadian Community Health Survey, 2005.

Map Code	Health Region	Injury Hospitalization 2004–2005 Age-Standardized Rate/100,000	95% CI	2005–2006 Age-Standardized Rate/100,000	95% CI
Newfoundland and Labrador		***526**	**(507–546)**	**532**	**(512–552)**
1011	Eastern, N.L.	*438	(415–462)	*451	(427–475)
1012	Central, N.L.	*492	(449–535)	*419	(378–460)
1013	Western, N.L.	588	(534–641)	594	(541–648)
Prince Edward Island		***619**	**(579–659)**	**581**	**(542–620)**
Nova Scotia		***478**	**(465–492)**	***494**	**(480–508)**
1201	Zone 1, N.S.	*450	(415–486)	*482	(444–520)
1202	Zone 2, N.S.	*414	(372–457)	*426	(383–468)
1203	Zone 3, N.S.	546	(503–590)	506	(464–549)
1204	Zone 4, N.S.	533	(487–579)	534	(489–579)
1205	Zone 5, N.S.	*636	(593–679)	*657	(612–701)
1206	Zone 6, N.S.	*384	(365–403)	*407	(387–426)
New Brunswick		***657**	**(638–676)**	***648**	**(630–666)**
1301	Region 1, N.B. (Moncton area)	*523	(492–554)	550	(518–582)
1302	Region 2, N.B. (Saint John area)	555	(521–588)	526	(493–558)
1303	Region 3, N.B. (Fredericton area)	*700	(661–739)	*675	(637–713)
1306	Region 6, N.B. (Bathurst area)	*	* *	*677	(618–737)
Quebec		***511**	**(506–516)**	***504**	**(499–509)**
2401	Bas-Saint-Laurent	*621	(587–655)	*617	(583–650)
2402	Saguenay-Lac-Saint-Jean	*657	(627–688)	*629	(599–658)
2403	Capitale nationale	*527	(510–544)	*508	(491–525)
2404	Mauricie et Centre-du-Québec	*585	(563–606)	*566	(545–587)
2405	Estrie	*652	(623–680)	*630	(602–658)
2406	Montréal	*386	(377–394)	*388	(379–396)
2407	Outaouais	*517	(492–541)	*453	(430–476)
2408	Abitibi-Témiscamingue	*714	(670–759)	*697	(653–740)
2409	Côte-Nord	*753	(696–810)	*732	(677–787)
2411	Gaspésie-Îles-de-la-Madeleine	*743	(688–798)	*755	(700–811)
2412	Chaudière-Appalaches	*514	(492–536)	543	(520–566)
2413	Laval	*414	(394–435)	*410	(390–430)
2414	Lanaudière	546	(523–569)	556	(533–579)
2415	Laurentides	*595	(573–616)	*582	(561–603)
2416	Montérégie	*500	(488–512)	*494	(482–506)
Ontario		***472**	**(468–476)**	***450**	**(446–454)**
3501	Erie St. Clair	*496	(480–513)	*466	(450–482)
3502	South West	570	(555–585)	550	(536–565)
3503	Waterloo Wellington	*472	(456–487)	*448	(433–464)
3504	Hamilton Niagara Haldimand Brant	*525	(513–536)	*506	(495–518)
3505	Central West	*384	(370–399)	*361	(347–375)
3506	Mississauga Halton	*365	(353–377)	*339	(328–351)
3507	Toronto Central	*385	(374–396)	*363	(353–374)
3508	Central	*341	(332–350)	*316	(307–324)
3509	Central East	*422	(411–432)	*401	(391–411)
3510	South East	*509	(490–528)	*482	(464–501)
3511	Champlain	*458	(446–470)	*453	(441–465)
3512	North Simcoe Muskoka	*625	(601–648)	551	(530–573)
3513	North East	*704	(682–725)	*692	(670–713)
3514	North West	*776	(742–811)	*756	(722–790)
Manitoba		***670**	**(656–685)**	***672**	**(658–687)**
4610	Winnipeg	*504	(488–521)	*510	(493–526)
4630	Interlake	*838	(774–903)	*784	(720–848)
4640	Central	*755	(703–808)	*703	(654–752)

Map Code	Health Region	Injury Hospitalization 2004–2005 Age-Standardized Rate/100,000	95% CI	2005–2006 Age-Standardized Rate/100,000	95% CI
Saskatchewan		**†847**	**(829–864)**	**†839**	**(821–857)**
4704	Regina	†796	(761–831)	†779	(745–814)
4706	Saskatoon	†598	(570–626)	†597	(570–625)
4709	Prince Albert	†977	(905–1,049)	†849	(784–915)
Alberta		**†772**	**(762–781)**	**†756**	**(747–766)**
4820	Chinook	†796	(753–839)	†817	(774–860)
4821	Palliser	†1,085	(1,021–1,149)	*	* *
4822	Calgary	†580	(566–594)	†575	(561–589)
4823	David Thompson	†1,161	(1,122–1,200)	†1,199	(1,160–1,238)
4824	East Central	†928	(873–983)	†866	(814–918)
4825	Capital	†645	(629–660)	†626	(611–641)
4826	Aspen	†1,198	(1,146–1,249)	†1,112	(1,063–1,162)
4827	Peace Country	†1,354	(1,289–1,420)	†1,269	(1,207–1,331)
British Columbia		**†622**	**(614–629)**	**†598**	**(591–605)**
5911	East Kootenay	†872	(807–937)	†920	(854–985)
5912	Kootenay Boundary	†837	(770–905)	†784	(721–847)
5913	Okanagan	†704	(675–733)	†638	(611–665)
5914	Thompson/Cariboo/Shuswap	†776	(739–812)	†786	(749–822)
5921	Fraser East	†595	(566–624)	†593	(565–622)
5922	Fraser North	547	(527–566)	†517	(499–536)
5923	Fraser South	543	(525–561)	548	(530–566)
5931	Richmond	†372	(344–400)	†352	(324–379)
5932	Vancouver	†451	(435–468)	†455	(438–472)
5933	North Shore	†589	(560–618)	†597	(569–626)
5941	South Vancouver Island	†690	(663–718)	†587	(562–612)
5942	Central Vancouver Island	†725	(691–758)	†654	(623–686)
5943	North Vancouver Island	†811	(758–864)	†786	(735–836)
5951	Northwest	†1,132	(1,056–1,209)	†1,026	(954–1,098)
5952	Northern Interior	†889	(840–939)	†815	(768–862)
Yukon Territory		**†1,213**	**(1,076–1,350)**	**†1,164**	**(1,031–1,297)**
Northwest Territories		**†1,311**	**(1,183–1,439)**	**†1,348**	**(1,222–1,475)**
Nunavut		**†1,052**	**(878–1,226)**	**†1,201**	**(1,017–1,385)**
Canada		**558**	**(555–560)**	**543**	**(540–545)**

Injury hospitalization

Age-standardized rate of acute care hospitalization due to injury resulting from the transfer of energy (excludes poisoning and other non-traumatic injuries), per 100,000 population. Injury is defined by the first valid documented external cause of injury code that meets CIHI's definition of trauma. This indicator contributes to an understanding of the adequacy and effectiveness of injury-prevention efforts, including public education, product development and use, community and road design, and prevention and treatment resources.

Sources: National Trauma Registry, CIHI; ministère de la Santé et des Services sociaux du Québec.

Self-Reported Conditions

	Sense of Community Belonging, 2005 (Strong/Somewhat Strong)				Life Stress, 2005 (Quite a Lot)			
	Age 12–64		Age 65+		Age 18–64		Age 65+	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI
N.L.	76.5	(74.5–78.5)	79.5	(76.1–82.8)	16.7	(14.8–18.7)	6.9	(4.9–9.0)
P.E.I.	73.1	(70.1–76.1)	77.0	(72.1–81.9)	19.2	(16.5–21.9)	9.8	(6.9–12.8)
N.S.	70.1	(68.2–72.1)	72.6	(69.5–75.8)	23.3	(21.3–25.3)	9.4	(7.4–11.4)
N.B.	70.6	(68.8–72.4)	75.8	(72.8–78.7)	22.0	(20.1–23.8)	10.3	(8.0–12.7)
Que.	51.7	(50.7–52.7)	60.1	(58.3–61.8)	29.1	(28.2–30.0)	9.8	(8.7–10.8)
Ont.	63.2	(62.4–64.0)	64.5	(62.9–66.0)	25.5	(24.7–26.2)	10.8	(9.7–11.8)
Man.	65.5	(63.5–67.5)	68.2	(65.0–71.4)	21.6	(19.9–23.2)	11.5	(9.3–13.7)
Sask.	69.0	(67.3–70.8)	76.0	(73.4–78.6)	23.5	(21.7–25.4)	11.2	(9.4–12.9)
Alta.	62.4	(60.9–63.8)	66.3	(63.5–69.2)	24.3	(22.9–25.7)	9.6	(7.9–11.3)
B.C.	66.8	(65.7–67.9)	68.7	(66.7–70.6)	25.3	(24.1–26.5)	9.4	(8.2–10.6)
Y.T.	69.7	(65.6–73.7)	64.3	(52.2–76.3)	23.4	(19.4–27.4)	*	* *
N.W.T.	71.9	(67.3–76.6)	79.9	(68.9–90.8)	18.6	(15.2–22.0)	*	* *
Nun.	81.1	(78.0–84.2)	75.3	(55.1–95.5)	20.3▼	(13.1▼–27.4▼)	*	* *
Canada	**61.8**	**(61.3–62.2)**	**65.5**	**(64.7–66.4)**	**25.7**	**(25.2–26.1)**	**10.2**	**(9.6–10.7)**

	Current Smoker, 2005 (Daily or Occasional)				Heavy Drinking, 2005 (5+ Drinks on 1 Occasion, 12 or More Times a Year)			
	Age 12–64		Age 65+		Age 12–64		Age 65+	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI
N.L.	25.0	(22.9–27.1)	11.7	(9.4–14.0)	35.3	(32.9–37.7)	8.8▼	(5.9▼–11.7▼)
P.E.I.	24.2	(21.3–27.0)	10.9▼	(7.2▼–14.7▼)	28.7	(25.1–32.2)	*	* *
N.S.	24.6	(22.8–26.4)	12.2	(9.9–14.4)	28.5	(26.4–30.5)	8.0	(5.5–10.6)
N.B.	24.8	(23.1–26.5)	9.6	(7.3–12.0)	28.6	(26.5–30.7)	7.9	(5.3–10.4)
Que.	26.4	(25.6–27.2)	12.6	(11.4–13.8)	22.3	(21.4–23.1)	6.4	(5.4–7.3)
Ont.	22.6	(21.9–23.2)	9.3	(8.6–10.1)	23.8	(23.1–24.6)	5.7	(4.9–6.5)
Man.	22.6	(20.8–24.3)	8.6	(6.8–10.4)	24.5	(22.6–26.5)	6.4▼	(4.2▼–8.6▼)
Sask.	26.4	(24.8–27.9)	11.4	(9.6–13.1)	28.2	(26.4–30.0)	4.7	(3.2–6.3)
Alta.	24.2	(23.0–25.4)	12.0	(10.0–14.1)	24.6	(23.2–26.0)	4.7	(3.2–6.2)
B.C.	19.3	(18.3–20.2)	9.3	(8.1–10.6)	23.5	(22.4–24.6)	7.8	(6.4–9.2)
Y.T.	31.4	(26.8–35.9)	18.7▼	(8.3▼–29.1▼)	29.5	(24.6–34.3)	*	* *
N.W.T.	36.3	(32.1–40.4)	31.8▼	(15.2▼–48.4▼)	36.2	(31.2–41.3)	*	* *
Nun.	53.6	(48.8–58.4)	*	* *	32.5	(25.2–39.9)	*	* *
Canada	**23.5**	**(23.2–23.9)**	**10.5**	**(10.0–11.1)**	**24.1**	**(23.7–24.5)**	**6.2**	**(5.7–6.7)**

	Fruit and Vegetable Consumption, 2005 (5+per Day)				Leisure-Time Physical Activity, 2005 (Active/Moderately Active)			
	Age 12–64		Age 65+		Age 12–64		Age 65+	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI
N.L.	21.6	(18.5–24.6)	31.5	(25.5–37.5)	47.3	(45.0–49.6)	28.1	(24.2–32.0)
P.E.I.	30.1	(27.1–33.2)	42.7	(36.7–48.6)	47.0	(43.9–50.2)	22.7	(18.0–27.4)
N.S.	33.7	(30.5–36.8)	32.9	(27.4–38.5)	51.8	(49.8–53.8)	27.4	(24.3–30.6)
N.B.	34.4	(31.3–37.6)	40.0	(34.2–45.9)	48.4	(46.5–50.4)	30.1	(27.0–33.2)
Que.	50.1	(48.2–52.1)	48.8	(44.8–52.7)	49.3	(48.3–50.4)	38.8	(37.1–40.4)
Ont.	40.2	(39.4–41.0)	45.6	(44.1–47.1)	53.0	(52.2–53.8)	41.2	(39.7–42.6)
Man.	31.7	(28.7–34.6)	33.2	(27.9–38.5)	50.1	(48.0–52.2)	32.0	(28.8–35.3)
Sask.	33.4	(30.4–36.4)	38.7	(33.9–43.5)	51.8	(50.0–53.6)	36.3	(33.5–39.1)
Alta.	36.2	(34.8–37.6)	37.8	(34.9–40.7)	55.3	(53.9–56.7)	40.3	(37.5–43.2)
B.C.	39.6	(38.4–40.9)	40.1	(38.0–42.2)	59.0	(57.7–60.3)	50.2	(48.0–52.5)
Y.T.	43.4	(38.6–48.2)	36.9▼	(24.2▼–49.7▼)	59.4	(55.3–63.5)	36.9	(25.1–48.6)
N.W.T.	28.1	(22.9–33.3)	22.5▼	(10.2▼–34.9▼)	51.6	(46.7–56.5)	30.9▼	(15.5▼–46.4▼)
Nun.	26.7	(20.4–33.1)	*	* *	48.6	(44.5–52.8)	*	* *
Canada	**40.8**	**(39.9–41.7)**	**43.7**	**(42.0–45.5)**	**52.8**	**(52.3–53.2)**	**40.2**	**(39.5–41.0)**

The data presented here represent a sample of a wider range of the non-medical determinants of health that are available in the *Health Indicators* e-publication.

www.cihi.ca/indicators or www.statcan.ca

Sense of community belonging
Proportion of household population reporting their sense of belonging to their local community as very strong or somewhat strong. Research shows a high correlation of sense of community belonging with physical and mental health.
Source: Statistics Canada, Canadian Community Health Survey, 2005.

Life stress
Proportion of household population who described their level of life stress as quite a lot.
Source: Statistics Canada, Canadian Community Health Survey, 2005.

Current smoker
Proportion of household population who reported being a current smoker on either a daily or occasional basis.
Source: Statistics Canada, Canadian Community Health Survey, 2005.

Heavy drinking
Proportion of household population who reported being a current drinker and having five or more drinks on one occasion, 12 or more times a year.
Source: Statistics Canada, Canadian Community Health Survey, 2005.

Fruit and vegetable consumption
Proportion of household population who reported consuming fruits and vegetables five or more times per day, on average.
Source: Statistics Canada, Canadian Community Health Survey, 2005.

Leisure-time physical activity
Proportion of household population reporting active or moderately active level of physical activity, based on responses to questions about the frequency, duration and intensity of participation in leisure-time physical activity over the past three months.
Source: Statistics Canada, Canadian Community Health Survey, 2005.

Map Code	Health Region	Wait Time for Hip Fracture Surgery, 2005–2006			
		Proportion With Surgery Same or Next Day		Proportion With Surgery Same, Next Day or Day After	
		Risk-Adjusted Rate (%)	95% CI	Risk-Adjusted Rate (%)	95% CI
	Newfoundland and Labrador	**61.8**	**(57.2–66.5)**	**85.3**	**(81.8–88.8)**
1011	Eastern, N.L.	*56.6	(50.5–62.7)	85.0	(80.3–89.6)
1012	Central, N.L.	*83.6	(71.9–95.4)	92.2	(83.5–100.0)
1013	Western, N.L.	63.9	(51.3–76.6)	86.3	(76.9–95.8)
	Prince Edward Island	***78.3**	**(70.2–86.4)**	**89.6**	**(83.5–95.7)**
	Nova Scotia	***69.2**	**(65.9–72.6)**	**84.0**	**(81.5–86.5)**
1201	Zone 1, N.S.	*76.1	(67.3–84.8)	84.8	(78.2–91.4)
1202	Zone 2, N.S.	*82.9	(72.5–93.4)	*95.1	(87.3–100.0)
1203	Zone 3, N.S.	69.3	(59.3–79.2)	86.0	(78.6–93.5)
1204	Zone 4, N.S.	*82.6	(72.9–92.4)	89.5	(82.1–96.8)
1205	Zone 5, N.S.	*74.4	(66.7–82.1)	*91.1	(85.4–96.9)
1206	Zone 6, N.S.	*53.5	(47.5–59.6)	*73.0	(68.4–77.6)
	New Brunswick	**67.1**	**(63.4–70.8)**	**83.4**	**(80.6–86.2)**
1301	Region 1, N.B. (Moncton area)	67.9	(60.7–75.2)	82.5	(77.0–87.9)
1302	Region 2, N.B. (Saint John area)	*54.1	(46.7–61.6)	78.8	(73.2–84.5)
1303	Region 3, N.B. (Fredericton area)	*75.5	(67.0–83.9)	85.8	(79.4–92.1)
1306	Region 6, N.B. (Bathurst area)	*84.3	(69.2–99.4)	95.0	(83.5–100.0)
	Quebec	**..**	**.. ..**	**..**	**.. ..**
2401	Bas-Saint-Laurent	..	.. ..	..	.. ..
2402	Saguenay-Lac-Saint-Jean	..	.. ..	..	.. ..
2403	Capitale nationale	..	.. ..	..	.. ..
2404	Mauricie et Centre-du-Québec	..	.. ..	..	.. ..
2405	Estrie	..	.. ..	..	.. ..
2406	Montréal	..	.. ..	..	.. ..
2407	Outaouais	..	.. ..	..	.. ..
2408	Abitibi-Témiscamingue	..	.. ..	..	.. ..
2409	Côte-Nord	..	.. ..	..	.. ..
2411	Gaspésie-Îles-de-la-Madeleine	..	.. ..	..	.. ..
2412	Chaudière-Appalaches	..	.. ..	..	.. ..
2413	Laval	..	.. ..	..	.. ..
2414	Lanaudière	..	.. ..	..	.. ..
2415	Laurentides	..	.. ..	..	.. ..
2416	Montérégie	..	.. ..	..	.. ..
	Ontario	**64.5**	**(63.5–65.5)**	***83.5**	**(82.7–84.3)**
3501	Erie St. Clair	*54.4	(50.0–58.7)	81.8	(78.5–85.0)
3502	South West	*49.4	(46.1–52.6)	*71.1	(68.7–73.6)
3503	Waterloo Wellington	*83.2	(78.6–87.8)	*93.3	(89.8–96.7)
3504	Hamilton Niagara Haldimand Brant	66.1	(63.3–69.0)	83.8	(81.7–86.0)
3505	Central West	63.4	(58.0–68.9)	82.7	(78.6–86.8)
3506	Mississauga Halton	*80.5	(76.3–84.8)	*91.8	(88.6–95.0)
3507	Toronto Central	*58.9	(55.5–62.4)	82.6	(80.0–85.2)
3508	Central	*70.8	(67.5–74.0)	*88.1	(85.6–90.5)
3509	Central East	66.4	(63.3–69.6)	85.4	(83.1–87.8)
3510	South East	*72.1	(67.9–76.3)	86.9	(83.7–90.1)
3511	Champlain	*59.7	(56.3–63.2)	81.9	(79.3–84.5)
3512	North Simcoe Muskoka	*52.1	(46.7–57.6)	*72.9	(68.8–77.0)
3513	North East	66.5	(61.9–71.1)	84.6	(81.1–88.0)
3514	North West	67.3	(60.3–74.3)	85.0	(79.6–90.3)
	Manitoba	***53.3**	**(50.3–56.3)**	***75.4**	**(73.2–77.7)**
4610	Winnipeg	*49.3	(45.3–53.3)	*72.0	(69.0–75.0)
4630	Interlake	*49.3	(36.8–61.9)	*64.0	(54.4–73.5)
4640	Central	*50.3	(40.6–60.1)	79.6	(72.2–86.9)

Map Code	Health Region	Wait Time for Hip Fracture Surgery, 2005–2006 Proportion With Surgery Same or Next Day Risk-Adjusted Rate (%)	95% CI	Proportion With Surgery Same, Next Day or Day After Risk-Adjusted Rate (%)	95% CI
Saskatchewan		**†55.6**	**(52.6–58.6)**	**†80.0**	**(77.8–82.3)**
4704	Regina	66.9	(60.7–73.1)	87.8	(83.2–92.4)
4706	Saskatoon	†52.2	(46.0–58.4)	80.1	(75.5–84.8)
4709	Prince Albert	68.8	(56.3–81.3)	80.4	(70.8–90.0)
Alberta		**66.8**	**(64.6–69.0)**	**†86.6**	**(84.9–88.2)**
4820	Chinook	†82.2	(74.1–90.3)	†91.1	(85.0–97.3)
4821	Palliser	†79.8	(68.7–90.8)	89.7	(81.4–98.1)
4822	Calgary	†69.9	(66.0–73.8)	†89.0	(86.1–92.0)
4823	David Thompson	†54.8	(48.7–60.9)	†79.2	(74.7–83.8)
4824	East Central	67.3	(58.5–76.1)	83.0	(76.3–89.7)
4825	Capital	66.2	(62.3–70.2)	†87.9	(84.9–90.9)
4826	Aspen	†37.2	(25.4–49.1)	†69.6	(60.6–78.6)
4827	Peace Country	64.4	(50.9–77.8)	89.0	(78.6–99.3)
British Columbia		**†70.7**	**(69.1–72.3)**	**†89.8**	**(88.6–91.1)**
5911	East Kootenay	†84.3	(72.6–96.0)	†96.3	(87.4–100.0)
5912	Kootenay Boundary	†81.8	(71.5–92.2)	†92.9	(85.0–100.0)
5913	Okanagan	69.1	(64.4–73.8)	†89.2	(85.7–92.8)
5914	Thompson/Cariboo/Shuswap	66.7	(59.6–73.8)	87.2	(81.8–92.6)
5921	Fraser East	†79.7	(73.3–86.2)	†93.4	(88.6–98.3)
5922	Fraser North	†53.1	(48.2–57.9)	81.2	(77.6–84.9)
5923	Fraser South	†73.7	(69.2–78.2)	†90.2	(86.8–93.6)
5931	Richmond	†77.1	(68.2–85.9)	†92.6	(85.9–99.2)
5932	Vancouver	69.2	(64.8–73.5)	†89.3	(86.0–92.6)
5933	North Shore	66.3	(60.1–72.6)	86.6	(81.9–91.4)
5941	South Vancouver Island	67.8	(63.1–72.5)	†91.8	(88.3–95.4)
5942	Central Vancouver Island	†81.7	(75.9–87.4)	†96.5	(92.1–100.0)
5943	North Vancouver Island	†93.6	(82.5–100.0)	†97.6	(89.2–100.0)
5951	Northwest	68.7	(49.6–87.7)	87.5	(72.8–100.0)
5952	Northern Interior	71.5	(61.0–82.1)	88.3	(80.3–96.3)
Yukon Territory		*	* *	*	* *
Northwest Territories		**82.2**	**(55.8–100.0)**	**99.5**	**(79.4–100.0)**
Nunavut		*	* *	*	* *
Canada		**65.2**		**84.5**	

Wait time for hip fracture surgery

Proportion with surgery same or next day: Risk-adjusted proportion of hip fracture patients aged 65 and older who underwent hip fracture surgery on the day of admission or the next day.
Proportion with surgery same, next day or day after: Risk-adjusted proportion of hip fracture patients aged 65 and older who underwent hip fracture surgery on the day of admission, the next day or the day after that.
While some hip fracture patients need medical treatment to stabilize their condition before surgery, research suggests patients typically benefit from timely surgery in terms of reduced morbidity, mortality, pain, length of stay in hospital and improved rehabilitation. This indicator is intended to provide a comparable measure of access to care across the country and to be used as a tool to identify opportunities for improvement, using a national data source where wait time can be measured only in days. However, this indicator is not designed to directly report on the 48-hour benchmark, for which some jurisdictions and hospitals may have more precise information available than the national database. The hip fracture wait time indicator in this report will be different from those measuring the benchmark and should not be directly compared.
Note: The Canada rate does not include Quebec.
Source: Discharge Abstract Database, CIHI.

Map Code	Health Region	Hip Fracture Hospitalization 2004–2005 Age-Standardized Rate/100,000	95% CI	Hip Fracture Hospitalization 2005–2006 Age-Standardized Rate/100,000	95% CI	In-Hospital Hip Fracture 2004† Risk-Adjusted Rate/1,000	95% CI
	Newfoundland and Labrador	***593**	**(537–649)**	***608**	**(552–664)**	**0.9**	**(0.6–1.2)**
1011	Eastern, N.L.	540	(469–610)	573	(501–646)	0.7	(0.3–1.1)
1012	Central, N.L.	*655	(529–781)	483	(375–592)	*	* *
1013	Western, N.L.	542	(411–672)	609	(473–745)	*1.8	(1.2–2.4)
	Prince Edward Island	**577**	**(479–675)**	**597**	**(497–697)**	**1.0**	**(0.6–1.4)**
	Nova Scotia	***472**	**(438–506)**	***456**	**(423–489)**	**1.0**	**(0.8–1.2)**
1201	Zone 1, N.S.	451	(368–534)	*418	(342–495)	0.8	(0.4–1.3)
1202	Zone 2, N.S.	479	(370–589)	510	(401–619)	1.1	(0.5–1.7)
1203	Zone 3, N.S.	598	(488–707)	458	(362–553)	*1.4	(0.9–1.9)
1204	Zone 4, N.S.	540	(433–647)	514	(409–620)	*	* *
1205	Zone 5, N.S.	511	(421–600)	571	(476–666)	0.7	(0.3–1.1)
1206	Zone 6, N.S.	*359	(307–412)	*342	(292–392)	1.2	(0.8–1.5)
	New Brunswick	**538**	**(495–582)**	***548**	**(506–589)**	**0.8**	**(0.6–1.0)**
1301	Region 1, N.B. (Moncton area)	499	(421–576)	516	(437–594)	0.7	(0.3–1.0)
1302	Region 2, N.B. (Saint John area)	568	(480–656)	587	(499–675)	1.0	(0.6–1.4)
1303	Region 3, N.B. (Fredericton area)	619	(522–716)	541	(452–631)	0.8	(0.4–1.1)
1306	Region 6, N.B. (Bathurst area)	*	* *	*321	(224–418)	*	* *
	Quebec	***469**	**(457–482)**	***438**	**(426–450)**	**..**	**.. ..**
2401	Bas-Saint-Laurent	460	(393–527)	*386	(325–446)	..	.. ..
2402	Saguenay-Lac-Saint-Jean	460	(391–529)	503	(432–573)	..	.. ..
2403	Capitale nationale	*470	(430–511)	*432	(394–470)	..	.. ..
2404	Mauricie et Centre-du-Québec	*445	(401–490)	*408	(366–450)	..	.. ..
2405	Estrie	*451	(392–509)	471	(412–531)	..	.. ..
2406	Montréal	*480	(457–504)	*462	(439–485)	..	.. ..
2407	Outaouais	542	(467–617)	475	(406–544)	..	.. ..
2408	Abitibi-Témiscamingue	527	(423–632)	*647	(533–762)	..	.. ..
2409	Côte-Nord	477	(344–610)	455	(328–583)	..	.. ..
2411	Gaspésie-Îles-de-la-Madeleine	*383	(293–472)	463	(367–559)	..	.. ..
2412	Chaudière-Appalaches	478	(423–532)	*414	(364–465)	..	.. ..
2413	Laval	*428	(371–485)	*381	(328–433)	..	.. ..
2414	Lanaudière	474	(410–538)	*401	(344–458)	..	.. ..
2415	Laurentides	*453	(397–508)	451	(397–505)	..	.. ..
2416	Montérégie	*479	(446–511)	*423	(393–453)	..	.. ..
	Ontario	***553**	**(542–564)**	***521**	**(511–532)**	***0.6**	**(0.6–0.6)**
3501	Erie St. Clair	502	(458–546)	538	(493–583)	0.6	(0.4–0.8)
3502	South West	*630	(590–669)	*670	(630–710)	0.7	(0.5–0.9)
3503	Waterloo Wellington	555	(507–603)	507	(461–552)	0.6	(0.3–0.8)
3504	Hamilton Niagara Haldimand Brant	518	(489–548)	514	(485–543)	*0.6	(0.4–0.7)
3505	Central West	*469	(419–519)	465	(417–514)	0.5	(0.2–0.8)
3506	Mississauga Halton	*594	(547–640)	495	(454–536)	0.7	(0.5–0.9)
3507	Toronto Central	*479	(447–511)	*444	(413–475)	*0.5	(0.3–0.7)
3508	Central	502	(470–533)	*454	(425–483)	*0.5	(0.4–0.7)
3509	Central East	517	(486–547)	*472	(444–501)	*0.5	(0.4–0.7)
3510	South East	*624	(571–677)	*612	(561–664)	0.9	(0.7–1.1)
3511	Champlain	502	(469–536)	471	(439–504)	0.6	(0.5–0.8)
3512	North Simcoe Muskoka	*800	(730–870)	*703	(639–767)	0.7	(0.4–0.9)
3513	North East	*626	(575–678)	530	(483–576)	0.9	(0.7–1.1)
3514	North West	562	(484–641)	*615	(534–695)	0.9	(0.6–1.3)
	Manitoba	***442**	**(412–471)**	***470**	**(439–500)**	**..**	**.. ..**
4610	Winnipeg	*339	(306–373)	*365	(329–401)	..	.. ..
4630	Interlake	*723	(576–871)	589	(458–721)	..	.. ..
4640	Central	545	(431–659)	440	(340–540)	..	.. ..

Map Code	Health Region	Hip Fracture Hospitalization 2004–2005 Age-Standardized Rate/100,000	95% CI	Hip Fracture Hospitalization 2005–2006 Age-Standardized Rate/100,000	95% CI	In-Hospital Hip Fracture 2004† Risk-Adjusted Rate/1,000	95% CI
Saskatchewan		**⁺634**	**(598–671)**	**⁺600**	**(564–635)**	**0.9**	**(0.8–1.0)**
4704	Regina	541	(470–613)	557	(485–629)	0.7	(0.4–1.0)
4706	Saskatoon	538	(471–604)	496	(433–559)	⁺1.3	(0.9–1.6)
4709	Prince Albert	566	(443–690)	520	(399–640)	1.1	(0.4–1.8)
Alberta		**⁺561**	**(538–585)**	**⁺535**	**(512–558)**	**⁺1.1**	**(1.0–1.2)**
4820	Chinook	⁺374	(296–452)	540	(447–632)	1.2	(0.8–1.5)
4821	Palliser	636	(516–757)	*	* *	1.1	(0.6–1.6)
4822	Calgary	528	(488–569)	470	(432–507)	⁺1.1	(0.9–1.3)
4823	David Thompson	⁺784	(694–875)	⁺843	(751–935)	⁺1.7	(1.4–2.0)
4824	East Central	574	(474–674)	⁺678	(567–788)	⁺1.7	(1.2–2.1)
4825	Capital	505	(465–545)	491	(452–530)	0.8	(0.6–0.9)
4826	Aspen	⁺684	(572–795)	529	(432–626)	0.7	(0.3–1.1)
4827	Peace Country	⁺758	(597–918)	605	(464–746)	0.9	(0.4–1.5)
British Columbia		**522**	**(505–539)**	**509**	**(492–525)**	**⁺1.0**	**(0.9–1.0)**
5911	East Kootenay	644	(504–784)	⁺685	(542–828)	*	* *
5912	Kootenay Boundary	446	(339–552)	566	(447–685)	1.0	(0.4–1.5)
5913	Okanagan	534	(482–585)	524	(474–575)	0.8	(0.5–1.0)
5914	Thompson/Cariboo/Shuswap	⁺611	(526–696)	⁺665	(578–752)	0.9	(0.6–1.3)
5921	Fraser East	477	(411–543)	495	(429–561)	0.8	(0.4–1.2)
5922	Fraser North	⁺613	(556–671)	551	(499–604)	1.0	(0.8–1.3)
5923	Fraser South	⁺580	(530–629)	⁺619	(565–673)	⁺1.1	(0.9–1.3)
5931	Richmond	498	(409–588)	⁺386	(313–459)	1.0	(0.5–1.5)
5932	Vancouver	⁺404	(362–447)	⁺394	(354–434)	1.0	(0.8–1.2)
5933	North Shore	482	(419–545)	504	(440–568)	0.9	(0.6–1.3)
5941	South Vancouver Island	⁺367	(325–410)	⁺352	(311–394)	0.9	(0.7–1.1)
5942	Central Vancouver Island	571	(505–637)	⁺571	(507–636)	1.1	(0.8–1.4)
5943	North Vancouver Island	⁺701	(576–827)	566	(455–677)	1.3	(0.8–1.8)
5951	Northwest	⁺1,037	(788–1,286)	600	(418–782)	*	* *
5952	Northern Interior	⁺741	(593–888)	⁺653	(517–789)	1.1	(0.6–1.7)
Yukon Territory		**770**	**(359–1,182)**	**494**	**(169–820)**	*	* *
Northwest Territories		**⁺1,056**	**(568–1,544)**	**820**	**(405–1,234)**	*	* *
Nunavut		*	* *	**1,042**	**(231–1,853)**	*	* *
Canada		**525**	**(519–532)**	**502**	**(495–508)**	**0.8**	

† Rates are based on three years of pooled data (2003–2004 to 2005–2006), and the reference year (2004) reflects the mid-point of the three-year period.

Hip fracture hospitalization

Age-standardized acute care hospitalization rate for fracture of the hip, per 100,000 population aged 65 and over. Hip fractures can have various causes, including environmental hazards, the prescription of potentially inappropriate psychotropic medications to the ambulatory elderly and safety issues in long-term care facilities. As well as causing disability or death, hip fracture may have a major effect on independence and quality of life.

Sources: Hospital Morbidity Database, CIHI; Discharge Abstract Database, CIHI; ministère de la Santé et des Services sociaux du Québec.

In-hospital hip fracture

The risk-adjusted rate of in-hospital hip fracture among acute care inpatients aged 65 years and over, per 1,000 discharges. This indicator represents a potentially preventable complication resulting from an inpatient stay in an acute care facility. Variations in the rates may be attributed to numerous factors, including hospital processes, environmental safety and availability of nursing care. High rates may prompt investigation of potential quality-of-care deficiencies.

Note: The Canada rate does not include Quebec and Manitoba.

Source: Discharge Abstract Database, CIHI.

Map Code	Health Region	Pap Smear (in the Last 3 Years) 2005 %	Pap Smear (in the Last 3 Years) 2005 95% CI	Screening Mammography (in the Last 2 Years) 2005 %	Screening Mammography (in the Last 2 Years) 2005 95% CI
	Newfoundland and Labrador	**75.8**	**(73.2–78.4)**	**45.2**	**(40.1–50.3)**
1011	Eastern, N.L.	76.9	(73.4–80.4)	45.2	(38.1–52.3)
1012	Central, N.L.	68.4	(61.7–75.1)	43.5	(33.7–53.2)
1013	Western, N.L.	77.7	(72.5–82.9)	49.3	(36.4–62.2)
	Prince Edward Island	**79.9**	**(76.3–83.5)**	**41.9**	**(35.1–48.7)**
	Nova Scotia	**81.0**	**(79.0–83.1)**	**49.9**	**(45.6–54.3)**
1201	Zone 1, N.S.	81.7	(77.0–86.5)	46.8	(36.3–57.4)
1202	Zone 2, N.S.	79.2	(73.7–84.7)	58.6	(46.5–70.7)
1203	Zone 3, N.S.	83.6	(78.9–88.3)	58.5	(47.7–69.2)
1204	Zone 4, N.S.	75.2	(68.9–81.4)	46.1	(35.1–57.1)
1205	Zone 5, N.S.	74.5	(69.0–80.1)	43.6	(34.3–53.0)
1206	Zone 6, N.S.	83.6	(80.2–87.1)	49.8	(41.7–57.9)
	New Brunswick	**76.5**	**(74.2–78.8)**	**54.8**	**(50.6–59.1)**
1301	Region 1, N.B. (Moncton area)	74.5	(69.0–80.0)	64.7	(55.9–73.6)
1302	Region 2, N.B. (Saint John area)	76.9	(72.1–81.6)	48.4	(38.8–58.1)
1303	Region 3, N.B. (Fredericton area)	84.0	(79.4–88.7)	57.6	(48.2–67.0)
1306	Region 6, N.B. (Bathurst area)	73.3	(67.0–79.6)	52.8	(41.9–63.6)
	Quebec	**68.5**	**(67.2–69.8)**	**50.5**	**(48.3–52.7)**
2401	Bas-Saint-Laurent	62.8	(59.3–66.3)	48.1	(42.9–53.3)
2402	Saguenay-Lac-Saint-Jean	45.4	(39.5–51.3)	46.6	(38.3–55.0)
2403	Capitale nationale	69.1	(64.7–73.6)	57.2	(50.1–64.3)
2404	Mauricie et Centre-du-Québec	56.8	(51.8–61.9)	46.8	(39.2–54.4)
2405	Estrie	69.2	(63.4–74.9)	58.1	(48.1–68.1)
2406	Montréal	70.5	(68.0–72.9)	45.9	(41.3–50.4)
2407	Outaouais	72.3	(67.6–76.9)	47.5	(37.7–57.4)
2408	Abitibi-Témiscamingue	69.9	(64.8–74.9)	51.9	(42.7–61.2)
2409	Côte-Nord	65.5	(60.5–70.5)	46.1	(37.9–54.3)
2411	Gaspésie-Îles-de-la-Madeleine	70.6	(64.2–77.0)	53.8	(45.6–62.1)
2412	Chaudière-Appalaches	68.6	(63.5–73.8)	55.2	(45.7–64.8)
2413	Laval	71.0	(67.4–74.7)	50.6	(44.4–56.8)
2414	Lanaudière	71.5	(66.3–76.7)	44.7	(36.7–52.7)
2415	Laurentides	78.3	(74.3–82.2)	51.7	(43.7–59.7)
2416	Montérégie	68.4	(64.3–72.5)	54.2	(47.3–61.0)
	Ontario	**72.9**	**(71.8–73.9)**	**53.0**	**(51.0–55.0)**
3501	Erie St. Clair	73.3	(70.1–76.6)	61.0	(54.9–67.1)
3502	South West	74.3	(71.7–76.9)	51.2	(46.1–56.3)
3503	Waterloo Wellington	73.1	(69.4–76.9)	47.3	(40.5–54.1)
3504	Hamilton Niagara Haldimand Brant	71.7	(69.2–74.3)	54.5	(50.2–58.7)
3505	Central West	66.9	(61.2–72.6)	43.8	(35.0–52.5)
3506	Mississauga Halton	73.3	(69.3–77.4)	51.4	(43.5–59.4)
3507	Toronto Central	75.2	(70.8–79.5)	56.5	(47.1–66.0)
3508	Central	69.5	(65.8–73.3)	59.8	(52.1–67.5)
3509	Central East	71.1	(67.3–74.9)	55.5	(48.8–62.2)
3510	South East	75.5	(72.4–78.6)	47.2	(41.7–52.7)
3511	Champlain	79.7	(77.2–82.2)	52.6	(47.1–58.0)
3512	North Simcoe Muskoka	71.9	(67.0–76.7)	44.3	(36.6–51.9)
3513	North East	71.6	(68.7–74.6)	49.2	(44.6–53.8)
3514	North West	74.5	(70.2–78.8)	48.0	(39.2–56.8)
	Manitoba	**75.1**	**(72.5–77.8)**	**42.6**	**(37.5–47.7)**
4610	Winnipeg	73.9	(69.9–77.8)	39.6	(31.8–47.4)
4630	Interlake	77.0	(69.9–84.1)	40.2	(28.4–52.0)
4640	Central	74.1	(67.4–80.8)	42.8▾	(27.9▾–57.8▾)

Map Code	Health Region	Pap Smear (in the Last 3 Years) 2005 %	Pap Smear (in the Last 3 Years) 2005 95% CI	Screening Mammography (in the Last 2 Years) 2005 %	Screening Mammography (in the Last 2 Years) 2005 95% CI
Saskatchewan		**77.1**	**(75.1–79.1)**	**46.4**	**(42.2–50.6)**
4704	Regina	76.6	(72.2–81.1)	50.1	(41.4–58.8)
4706	Saskatoon	81.9	(78.1–85.6)	46.9	(36.9–56.9)
4709	Prince Albert	72.9	(65.2–80.6)	25.3▼	(16.3▼–34.2▼)
Alberta		**76.6**	**(74.8–78.3)**	**52.3**	**(48.7–56.0)**
4820	Chinook	69.8	(63.2–76.3)	51.1	(39.7–62.5)
4821	Palliser	77.9	(72.3–83.5)	45.6	(34.3–56.8)
4822	Calgary	80.7	(77.8–83.6)	58.3	(51.1–65.6)
4823	David Thompson	73.4	(68.1–78.7)	49.0	(40.3–57.6)
4824	East Central	71.8	(64.8–78.8)	59.9	(50.1–69.6)
4825	Capital	74.7	(71.0–78.4)	51.3	(43.9–58.7)
4826	Aspen	74.3	(68.8–79.7)	38.9	(29.3–48.6)
4827	Peace Country	76.0	(70.5–81.6)	35.0	(24.5–45.4)
British Columbia		**72.6**	**(71.0–74.2)**	**48.2**	**(45.4–50.9)**
5911	East Kootenay	69.6	(61.9–77.3)	56.6	(46.7–66.4)
5912	Kootenay Boundary	72.6	(64.3–80.9)	42.3	(28.9–55.7)
5913	Okanagan	71.2	(65.7–76.8)	54.1	(44.3–64.0)
5914	Thompson/Cariboo/Shuswap	71.9	(66.0–77.9)	51.0	(41.8–60.1)
5921	Fraser East	65.5	(59.7–71.4)	43.3	(33.1–53.4)
5922	Fraser North	70.8	(65.9–75.7)	40.8	(32.4–49.3)
5923	Fraser South	68.7	(63.3–74.0)	48.1	(38.9–57.4)
5931	Richmond	64.1	(58.2–70.0)	65.3	(53.7–76.8)
5932	Vancouver	74.2	(69.5–78.9)	45.0	(36.9–53.1)
5933	North Shore	81.4	(76.3–86.5)	43.9	(34.2–53.5)
5941	South Vancouver Island	77.2	(72.9–81.6)	51.1	(42.8–59.3)
5942	Central Vancouver Island	77.1	(72.0–82.1)	62.5	(54.5–70.6)
5943	North Vancouver Island	81.7	(75.8–87.6)	35.9▼	(23.0▼–48.8▼)
5951	Northwest	80.5	(74.0–87.0)	36.9▼	(22.5▼–51.3▼)
5952	Northern Interior	73.0	(67.0–79.0)	43.2	(32.9–53.5)
Yukon Territory		**79.2**	**(72.5–86.0)**	**38.2**	**(26.1–50.4)**
Northwest Territories		**83.5**	**(79.1–87.9)**	**37.8▼**	**(24.9▼–50.6▼)**
Nunavut		**79.3**	**(74.1–84.5)**	*****	*** ***
Canada		**72.8**	**(72.2–73.4)**	**50.8**	**(49.7–52.0)**

Pap smear

Proportion of women aged 18 to 69 who reported having their Pap smear within the last three years. A Pap smear detects pre-malignant lesions before cancer of the cervix develops.
Source: Statistics Canada, Canadian Community Health Survey, 2005.

Screening mammography

Proportion of women aged 50 to 69 who reported undergoing a routine screening mammogram within the last two years. Screening mammography is an important strategy for early detection of breast cancer.
Source: Statistics Canada, Canadian Community Health Survey, 2005.

Map Code	Health Region	Caesarean Section 2004–2005 %	2004–2005 95% CI	2005–2006 %	2005–2006 95% CI
	Newfoundland and Labrador	**28.7**	**(27.4–30.0)**	**30.1**	**(28.8–31.5)**
1011	Eastern, N.L.	30.2	(28.5–32.0)	30.2	(28.5–32.0)
1012	Central, N.L.	28.8	(25.6–32.0)	34.0	(30.6–37.5)
1013	Western, N.L.	26.7	(23.3–30.1)	27.4	(23.7–31.0)
	Prince Edward Island	**33.5**	**(30.9–36.0)**	**29.8**	**(27.3–32.3)**
	Nova Scotia	**27.9**	**(26.9–28.8)**	**28.0**	**(27.0–29.0)**
1201	Zone 1, N.S.	27.5	(24.6–30.4)	27.4	(24.4–30.4)
1202	Zone 2, N.S.	23.9	(20.6–27.2)	26.1	(22.9–29.4)
1203	Zone 3, N.S.	30.9	(27.9–33.9)	29.5	(26.6–32.3)
1204	Zone 4, N.S.	29.8	(26.6–33.0)	27.0	(24.0–30.1)
1205	Zone 5, N.S.	28.3	(25.6–31.0)	29.0	(26.3–31.7)
1206	Zone 6, N.S.	27.5	(26.1–28.9)	28.1	(26.6–29.5)
	New Brunswick	**28.3**	**(27.2–29.4)**	**28.7**	**(27.6–29.7)**
1301	Region 1, N.B. (Moncton area)	26.3	(24.2–28.4)	25.9	(23.8–27.9)
1302	Region 2, N.B. (Saint John area)	26.4	(24.3–28.6)	25.3	(23.2–27.4)
1303	Region 3, N.B. (Fredericton area)	29.0	(26.9–31.1)	32.3	(30.1–34.4)
1306	Region 6, N.B. (Bathurst area)	*	* *	26.0	(22.2–29.8)
	Quebec	**22.3**	**(22.0–22.6)**	**22.9**	**(22.6–23.2)**
2401	Bas-Saint-Laurent	24.6	(22.4–26.7)	24.7	(22.7–26.8)
2402	Saguenay-Lac-Saint-Jean	22.2	(20.6–23.9)	21.3	(19.7–22.9)
2403	Capitale nationale	21.7	(20.6–22.8)	23.6	(22.5–24.6)
2404	Mauricie et Centre-du-Québec	21.9	(20.6–23.1)	22.6	(21.3–23.8)
2405	Estrie	16.1	(14.7–17.4)	19.5	(18.0–20.9)
2406	Montréal	23.2	(22.6–23.8)	23.1	(22.5–23.7)
2407	Outaouais	23.7	(22.2–25.1)	24.4	(23.0–25.9)
2408	Abitibi-Témiscamingue	22.7	(20.5–24.9)	23.9	(21.7–26.0)
2409	Côte-Nord	24.3	(21.6–27.0)	23.4	(20.8–26.1)
2411	Gaspésie-Îles-de-la-Madeleine	25.7	(22.5–29.0)	26.9	(23.6–30.3)
2412	Chaudière-Appalaches	23.7	(22.4–25.1)	25.8	(24.5–27.2)
2413	Laval	22.7	(21.3–24.1)	22.8	(21.5–24.1)
2414	Lanaudière	22.1	(20.8–23.4)	21.3	(20.0–22.6)
2415	Laurentides	20.6	(19.5–21.7)	21.3	(20.2–22.5)
2416	Montérégie	22.0	(21.3–22.7)	22.9	(22.2–23.6)
	Ontario	**26.7**	**(26.5–27.0)**	**27.7**	**(27.5–28.0)**
3501	Erie St. Clair	24.0	(23.0–25.0)	25.5	(24.5–26.5)
3502	South West	23.3	(22.4–24.2)	23.2	(22.4–24.1)
3503	Waterloo Wellington	26.1	(25.1–27.1)	27.7	(26.7–28.7)
3504	Hamilton Niagara Haldimand Brant	26.4	(25.7–27.2)	27.5	(26.8–28.3)
3505	Central West	28.5	(27.6–29.3)	27.9	(27.1–28.7)
3506	Mississauga Halton	24.6	(23.8–25.3)	25.2	(24.4–25.9)
3507	Toronto Central	27.4	(26.7–28.2)	30.0	(29.2–30.8)
3508	Central	26.2	(25.6–26.9)	28.4	(27.8–29.1)
3509	Central East	29.3	(28.5–30.0)	30.3	(29.5–31.0)
3510	South East	26.7	(25.3–28.0)	28.8	(27.4–30.1)
3511	Champlain	28.1	(27.3–28.9)	27.8	(27.0–28.6)
3512	North Simcoe Muskoka	29.7	(28.3–31.1)	30.0	(28.6–31.4)
3513	North East	28.6	(27.3–29.9)	29.0	(27.8–30.3)
3514	North West	22.7	(21.1–24.3)	22.8	(21.2–24.4)
	Manitoba	**20.7**	**(20.0–21.3)**	**21.3**	**(20.6–22.0)**
4610	Winnipeg	20.6	(19.7–21.6)	21.2	(20.3–22.2)
4630	Interlake	21.1	(18.3–24.0)	17.8	(15.2–20.4)
4640	Central	21.8	(19.6–24.0)	22.6	(20.4–24.8)

Map Code	Health Region	Caesarean Section 2004–2005 %	2004–2005 95% CI	2005–2006 %	2005–2006 95% CI
Saskatchewan		**20.2**	**(19.5–21.0)**	**21.1**	**(20.4–21.9)**
4704	Regina	18.4	(17.0–19.9)	20.0	(18.5–21.5)
4706	Saskatoon	20.7	(19.3–22.1)	23.2	(21.7–24.6)
4709	Prince Albert	14.5	(12.3–16.7)	18.5	(16.1–20.9)
Alberta		**25.4**	**(25.0–25.8)**	**26.3**	**(25.8–26.7)**
4820	Chinook	22.4	(20.6–24.3)	22.2	(20.4–24.0)
4821	Palliser	23.8	(21.5–26.2)	23.0	(20.6–25.4)
4822	Calgary	26.4	(25.6–27.1)	28.3	(27.5–29.0)
4823	David Thompson	27.6	(26.1–29.0)	26.9	(25.5–28.3)
4824	East Central	28.1	(25.6–30.6)	27.4	(24.9–29.8)
4825	Capital	25.1	(24.3–25.9)	25.5	(24.7–26.3)
4826	Aspen	23.4	(21.7–25.1)	25.0	(23.2–26.7)
4827	Peace Country	22.1	(20.3–23.9)	22.8	(21.0–24.6)
British Columbia		**30.0**	**(29.5–30.4)**	**30.4**	**(29.9–30.8)**
5911	East Kootenay	35.4	(31.8–39.1)	31.4	(27.8–34.9)
5912	Kootenay Boundary	24.0	(20.5–27.6)	23.3	(19.9–26.8)
5913	Okanagan	29.5	(27.7–31.3)	30.3	(28.5–32.1)
5914	Thompson/Cariboo/Shuswap	32.3	(30.2–34.4)	32.8	(30.7–35.0)
5921	Fraser East	28.9	(27.3–30.5)	28.0	(26.4–29.6)
5922	Fraser North	29.5	(28.3–30.7)	29.5	(28.3–30.7)
5923	Fraser South	30.5	(29.4–31.5)	31.3	(30.2–32.4)
5931	Richmond	29.7	(27.4–32.0)	32.7	(30.4–35.1)
5932	Vancouver	28.8	(27.6–30.0)	29.3	(28.1–30.4)
5933	North Shore	30.3	(28.4–32.2)	32.2	(30.3–34.2)
5941	South Vancouver Island	36.0	(34.1–37.8)	36.8	(34.9–38.6)
5942	Central Vancouver Island	27.3	(25.3–29.3)	29.1	(27.1–31.1)
5943	North Vancouver Island	31.9	(28.9–34.8)	26.5	(23.6–29.3)
5951	Northwest	27.3	(24.4–30.2)	26.8	(23.9–29.7)
5952	Northern Interior	28.4	(26.1–30.6)	28.3	(26.1–30.5)
Yukon Territory		**27.1**	**(22.3–31.8)**	**27.2**	**(22.4–32.0)**
Northwest Territories		**22.8**	**(19.6–26.0)**	**24.8**	**(21.7–28.0)**
Nunavut		**9.9**	**(7.7–12.0)**	**8.2**	**(6.2–10.3)**
Canada		**25.6**	**(25.4–25.7)**	**26.3**	**(26.2–26.5)**

Caesarean section

Proportion of women delivering babies in acute care hospitals by Caesarean section. Caesarean section rates provide information on the frequency of surgical birth delivery relative to all modes of birth delivery. Since unnecessary Caesarean section delivery increases maternal morbidity/mortality and is associated with higher costs, Caesarean section rates are often used to monitor clinical practices with an implicit assumption that lower rates indicate more appropriate, as well as more efficient, care.

Sources: Hospital Morbidity Database, CIHI; Discharge Abstract Database, CIHI; ministère de la Santé et des Services sociaux du Québec.

Map Code	Health Region	Ambulatory Care Sensitive Conditions 2004–2005 Age-Standardized Rate/100,000	95% CI	2005–2006 Age-Standardized Rate/100,000	95% CI
	Newfoundland and Labrador	***604**	**(583–626)**	***606**	**(585–628)**
1011	Eastern, N.L.	*519	(492–545)	*501	(476–527)
1012	Central, N.L.	*669	(620–719)	*713	(661–766)
1013	Western, N.L.	*641	(588–695)	*635	(582–688)
	Prince Edward Island	***724**	**(679–769)**	***655**	**(612–699)**
	Nova Scotia	***493**	**(479–507)**	***464**	**(450–478)**
1201	Zone 1, N.S.	*465	(428–502)	*443	(407–479)
1202	Zone 2, N.S.	*567	(517–617)	*461	(416–505)
1203	Zone 3, N.S.	*541	(498–585)	*512	(470–555)
1204	Zone 4, N.S.	*520	(474–566)	*537	(489–584)
1205	Zone 5, N.S.	*625	(584–666)	*582	(542–623)
1206	Zone 6, N.S.	391	(370–411)	*350	(331–370)
	New Brunswick	***662**	**(643–682)**	***666**	**(647–684)**
1301	Region 1, N.B. (Moncton area)	*505	(473–537)	*523	(491–556)
1302	Region 2, N.B. (Saint John area)	*604	(568–640)	*590	(554–627)
1303	Region 3, N.B. (Fredericton area)	*749	(707–791)	*714	(673–755)
1306	Region 6, N.B. (Bathurst area)	*	* *	*695	(638–753)
	Quebec	***365**	**(361–369)**	***377**	**(372–381)**
2401	Bas-Saint-Laurent	397	(370–423)	365	(339–391)
2402	Saguenay-Lac-Saint-Jean	*547	(519–576)	*499	(472–526)
2403	Capitale nationale	*288	(274–301)	*293	(279–306)
2404	Mauricie et Centre-du-Québec	*368	(351–385)	399	(381–417)
2405	Estrie	392	(370–414)	*418	(395–442)
2406	Montréal	*307	(299–315)	*324	(316–332)
2407	Outaouais	*350	(329–371)	384	(362–405)
2408	Abitibi-Témiscamingue	*588	(549–628)	*542	(504–579)
2409	Côte-Nord	*686	(633–738)	*608	(560–657)
2411	Gaspésie-Îles-de-la-Madeleine	*671	(620–722)	*728	(675–780)
2412	Chaudière-Appalaches	*289	(273–306)	*316	(298–333)
2413	Laval	*319	(301–338)	*303	(285–321)
2414	Lanaudière	395	(375–415)	*435	(415–456)
2415	Laurentides	*436	(418–455)	*438	(420–456)
2416	Montérégie	*362	(351–372)	384	(374–395)
	Ontario	***364**	**(360–367)**	***352**	**(349–355)**
3501	Erie St. Clair	*450	(434–467)	*425	(409–441)
3502	South West	*375	(363–388)	378	(366–391)
3503	Waterloo Wellington	*337	(323–352)	*341	(326–355)
3504	Hamilton Niagara Haldimand Brant	*451	(439–462)	*407	(396–418)
3505	Central West	*315	(301–329)	*327	(313–341)
3506	Mississauga Halton	*265	(254–275)	*267	(256–277)
3507	Toronto Central	*248	(239–257)	*242	(233–251)
3508	Central	*223	(215–231)	*215	(207–223)
3509	Central East	*327	(318–337)	*308	(298–317)
3510	South East	*429	(411–448)	*438	(419–456)
3511	Champlain	*326	(315–336)	*315	(305–326)
3512	North Simcoe Muskoka	*494	(473–515)	*482	(461–503)
3513	North East	*658	(638–679)	*619	(598–639)
3514	North West	*694	(661–727)	*665	(632–698)
	Manitoba	***451**	**(438–463)**	***454**	**(441–466)**
4610	Winnipeg	*324	(309–338)	*330	(315–344)
4630	Interlake	*605	(551–659)	*571	(518–624)
4640	Central	*551	(503–598)	*542	(495–589)

Map Code	Health Region	Ambulatory Care Sensitive Conditions 2004–2005 Age-Standardized Rate/100,000	95% CI	2005–2006 Age-Standardized Rate/100,000	95% CI
Saskatchewan		**†597**	**(582–612)**	**†622**	**(606–638)**
4704	Regina	†588	(557–620)	†637	(604–670)
4706	Saskatoon	384	(360–408)	397	(373–421)
4709	Prince Albert	†563	(510–617)	†574	(520–629)
Alberta		**†430**	**(423–438)**	**†426**	**(418–433)**
4820	Chinook	†551	(513–589)	†544	(507–582)
4821	Palliser	†619	(569–668)	*	* *
4822	Calgary	†306	(295–317)	†315	(304–326)
4823	David Thompson	†651	(620–681)	†628	(598–657)
4824	East Central	†645	(598–692)	†579	(535–623)
4825	Capital	†306	(294–317)	†313	(302–324)
4826	Aspen	†758	(716–800)	†729	(689–769)
4827	Peace Country	†904	(848–961)	†894	(839–949)
British Columbia		**†326**	**(321–332)**	**†320**	**(314–325)**
5911	East Kootenay	†512	(462–562)	†506	(458–555)
5912	Kootenay Boundary	†501	(450–552)	416	(369–462)
5913	Okanagan	414	(391–436)	375	(354–396)
5914	Thompson/Cariboo/Shuswap	†433	(406–460)	411	(385–438)
5921	Fraser East	†348	(325–371)	370	(346–394)
5922	Fraser North	†258	(244–272)	†222	(210–235)
5923	Fraser South	†287	(273–300)	†285	(272–299)
5931	Richmond	†206	(183–229)	†190	(169–211)
5932	Vancouver	†234	(221–247)	†239	(226–252)
5933	North Shore	†252	(233–272)	†267	(247–287)
5941	South Vancouver Island	†271	(252–291)	†281	(261–301)
5942	Central Vancouver Island	398	(373–423)	379	(355–402)
5943	North Vancouver Island	†468	(428–508)	†451	(413–489)
5951	Northwest	†571	(517–626)	†638	(580–696)
5952	Northern Interior	†551	(511–590)	†534	(496–572)
Yukon Territory		**†645**	**(545–745)**	**†645**	**(546–744)**
Northwest Territories		**†888**	**(769–1,007)**	**†697**	**(598–795)**
Nunavut		**†1,098**	**(898–1,299)**	**†1,104**	**(906–1,301)**
Canada		**392**	**(389–394)**	**389**	**(387–391)**

Ambulatory care sensitive conditions (ACSC)

Age-standardized inpatient acute care hospitalization rate for conditions where appropriate ambulatory care prevents or reduces the need for hospitalization, per 100,000 population under age 75 years. Hospitalizations for ambulatory care sensitive conditions are considered to be an indirect measure of access to appropriate medical care. While not all admissions for these conditions are avoidable, appropriate ambulatory care could potentially prevent the onset of this type of illness or condition, control an acute episodic illness or condition or manage a chronic disease or condition. A disproportionately high rate is presumed to reflect problems in obtaining access to primary care.

Sources: Hospital Morbidity Database, CIHI; Discharge Abstract Database, CIHI; ministère de la Santé et des Services sociaux du Québec.

Map Code	Health Region	Acute Myocardial Infarction Readmission 2004† Risk-Adjusted Rate (%)	95% CI	Asthma Readmission 2004† Risk-Adjusted Rate (%)	95% CI
	Newfoundland and Labrador	***7.5**	**(6.7–8.4)**	**4.3**	**(2.4–6.1)**
1011	Eastern, N.L.	*8.0	(6.8–9.3)	*	* *
1012	Central, N.L.	7.2	(5.5–9.0)	*	* *
1013	Western, N.L.	7.5	(5.3–9.7)	*	* *
	Prince Edward Island	***9.6**	**(7.7–11.4)**	**5.8**	**(3.4–8.2)**
	Nova Scotia	***8.5**	**(7.8–9.3)**	**5.7**	**(4.3–7.2)**
1201	Zone 1, N.S.	*9.0	(7.1–11.0)	*	* *
1202	Zone 2, N.S.	*10.3	(7.7–12.9)	*	* *
1203	Zone 3, N.S.	7.5	(5.5–9.6)	*	* *
1204	Zone 4, N.S.	*9.2	(7.0–11.3)	*	* *
1205	Zone 5, N.S.	7.7	(6.0–9.3)	*	* *
1206	Zone 6, N.S.	*8.6	(7.4–9.9)	*8.2	(6.2–10.2)
	New Brunswick	***7.8**	**(7.0–8.6)**	*****	*** ***
1301	Region 1, N.B. (Moncton area)	7.6	(6.0–9.3)	*	* *
1302	Region 2, N.B. (Saint John area)	5.5	(3.8–7.2)	*	* *
1303	Region 3, N.B. (Fredericton area)	*10.0	(8.3–11.8)	*	* *
1306	Region 6, N.B. (Bathurst area)	*9.0	(6.5–11.4)	*	* *
	Quebec	**..**	**.. ..**	**..**	**.. ..**
2401	Bas-Saint-Laurent	..	.. ..	..	.. ..
2402	Saguenay-Lac-Saint-Jean	..	.. ..	..	.. ..
2403	Capitale nationale	..	.. ..	..	.. ..
2404	Mauricie et Centre-du-Québec	..	.. ..	..	.. ..
2405	Estrie	..	.. ..	..	.. ..
2406	Montréal	..	.. ..	..	.. ..
2407	Outaouais	..	.. ..	..	.. ..
2408	Abitibi-Témiscamingue	..	.. ..	..	.. ..
2409	Côte-Nord	..	.. ..	..	.. ..
2411	Gaspésie-Îles-de-la-Madeleine	..	.. ..	..	.. ..
2412	Chaudière-Appalaches	..	.. ..	..	.. ..
2413	Laval	..	.. ..	..	.. ..
2414	Lanaudière	..	.. ..	..	.. ..
2415	Laurentides	..	.. ..	..	.. ..
2416	Montérégie	..	.. ..	..	.. ..
	Ontario	**6.1**	**(5.9–6.3)**	**4.9**	**(4.4–5.3)**
3501	Erie St. Clair	*7.2	(6.3–8.0)	3.7	(1.7–5.8)
3502	South West	6.7	(5.9–7.4)	4.7	(2.7–6.6)
3503	Waterloo Wellington	*4.6	(3.6–5.6)	4.5	(2.6–6.4)
3504	Hamilton Niagara Haldimand Brant	5.8	(5.2–6.4)	*3.3	(1.8–4.7)
3505	Central West	*5.0	(4.0–6.0)	5.4	(3.9–6.9)
3506	Mississauga Halton	*4.4	(3.6–5.3)	4.0	(1.9–6.0)
3507	Toronto Central	*4.7	(3.8–5.6)	6.1	(4.4–7.9)
3508	Central	*5.4	(4.6–6.2)	4.2	(2.6–5.8)
3509	Central East	6.0	(5.4–6.7)	5.7	(4.6–6.9)
3510	South East	6.1	(5.2–7.1)	*8.9	(7.1–10.7)
3511	Champlain	5.6	(4.9–6.4)	4.1	(2.5–5.7)
3512	North Simcoe Muskoka	*7.4	(6.4–8.5)	3.3	(1.3–5.2)
3513	North East	*8.5	(7.7–9.2)	4.2	(2.5–5.9)
3514	North West	*9.1	(7.8–10.4)	6.2	(3.6–8.9)
	Manitoba	**..**	**.. ..**	**..**	**.. ..**
4610	Winnipeg	..	.. ..	..	.. ..
4630	Interlake	..	.. ..	..	.. ..
4640	Central	..	.. ..	..	.. ..

Map Code	Health Region	Acute Myocardial Infarction Readmission 2004† Risk-Adjusted Rate (%)	95% CI	Asthma Readmission 2004† Risk-Adjusted Rate (%)	95% CI
Saskatchewan		**⁺7.0**	**(6.3–7.8)**	**4.9**	**(3.4–6.3)**
4704	Regina	⁺3.7	(2.1–5.4)	5.7	(3.2–8.3)
4706	Saskatoon	7.6	(6.2–9.1)	*	* *
4709	Prince Albert	⁺11.0	(8.3–13.7)	*	* *
Alberta		**⁺4.4**	**(3.9–4.9)**	**⁺4.0**	**(3.2–4.8)**
4820	Chinook	6.3	(4.1–8.5)	*	* *
4821	Palliser	6.8	(4.3–9.3)	*	* *
4822	Calgary	⁺4.2	(3.4–5.0)	4.9	(3.4–6.3)
4823	David Thompson	6.1	(4.6–7.7)	*	* *
4824	East Central	5.0	(2.5–7.4)	*	* *
4825	Capital	⁺3.0	(2.2–3.9)	4.5	(2.8–6.3)
4826	Aspen	4.7	(2.7–6.8)	5.1	(2.9–7.3)
4827	Peace Country	7.5	(5.2–9.8)	*	* *
British Columbia		**6.2**	**(5.7–6.6)**	**⁺5.8**	**(5.0–6.6)**
5911	East Kootenay	4.9	(2.4–7.3)	⁺8.1	(5.2–10.9)
5912	Kootenay Boundary	⁺11.4	(8.8–14.1)	*	* *
5913	Okanagan	6.7	(5.4–8.1)	⁺7.7	(5.7–9.8)
5914	Thompson/Cariboo/Shuswap	⁺7.9	(6.4–9.5)	⁺8.1	(5.3–11.0)
5921	Fraser East	5.9	(4.1–7.7)	5.1	(2.5–7.8)
5922	Fraser North	7.0	(5.6–8.3)	5.7	(3.1–8.3)
5923	Fraser South	5.9	(4.7–7.1)	5.2	(3.0–7.4)
5931	Richmond	*	* *	*	* *
5932	Vancouver	⁺3.8	(2.5–5.2)	*	* *
5933	North Shore	5.0	(3.3–6.6)	5.5	(2.2–8.8)
5941	South Vancouver Island	⁺3.0	(1.5–4.5)	⁺8.6	(5.7–11.4)
5942	Central Vancouver Island	⁺7.7	(6.3–9.1)	5.4	(2.2–8.5)
5943	North Vancouver Island	6.7	(4.4–9.0)	*	* *
5951	Northwest	7.8	(5.0–10.6)	*	* *
5952	Northern Interior	8.3	(6.0–10.6)	*	* *
Yukon Territory		*	* *	*	* *
Northwest Territories		*	* *	*	* *
Nunavut		*	* *	*	* *
Canada		**6.2**		**4.8**	

† Rates are based on three years of pooled data (2003–2004 to 2005–2006), and the reference year (2004) reflects the mid-point of the three-year period.

Acute myocardial infarction (AMI) readmission

The risk-adjusted rate of unplanned readmission following discharge for acute myocardial infarction.

Note: The Canada rate does not include Quebec and Manitoba. Beginning with 2004 rates, AMI case-selection criteria were revised; therefore, comparison of 2004 rates with those of previous years should be made with caution.

Sources: Discharge Abstract Database, CIHI; National Ambulatory Care Reporting System, CIHI; Alberta Ambulatory Care Database, Alberta Health and Wellness.

Asthma readmission

The risk-adjusted rate of unplanned readmission following discharge for asthma.

Note: The Canada rate does not include Quebec and Manitoba.

Sources: Discharge Abstract Database, CIHI; National Ambulatory Care Reporting System, CIHI, Alberta Ambulatory Care Database, Alberta Health and Wellness.

Map Code	Health Region	Prostatectomy Readmission 2004† Risk-Adjusted Rate (%)	Prostatectomy Readmission 2004† 95% CI	Hysterectomy Readmission 2004† Risk-Adjusted Rate (%)	Hysterectomy Readmission 2004† 95% CI
	Newfoundland and Labrador	**2.3**	**(1.1–3.6)**	**+0.7**	**(0.3–1.1)**
1011	Eastern, N.L.	*	* *	*	* *
1012	Central, N.L.	*	* *	*	* *
1013	Western, N.L.	*	* *	*	* *
	Prince Edward Island	*****	*** ***	**+1.9**	**(1.1–2.6)**
	Nova Scotia	**3.0**	**(2.3–3.7)**	**1.1**	**(0.8–1.4)**
1201	Zone 1, N.S.	*	* *	*	* *
1202	Zone 2, N.S.	*	* *	*	* *
1203	Zone 3, N.S.	*	* *	*	* *
1204	Zone 4, N.S.	+4.7	(3.1–6.4)	1.7	(0.8–2.5)
1205	Zone 5, N.S.	3.5	(1.7–5.3)	*	* *
1206	Zone 6, N.S.	2.9	(1.8–4.1)	1.4	(0.9–1.9)
	New Brunswick	**+3.4**	**(2.6–4.3)**	**0.8**	**(0.5–1.2)**
1301	Region 1, N.B. (Moncton area)	4.1	(2.3–5.9)	*	* *
1302	Region 2, N.B. (Saint John area)	2.8	(1.1–4.5)	*	* *
1303	Region 3, N.B. (Fredericton area)	+5.0	(2.9–7.0)	*	* *
1306	Region 6, N.B. (Bathurst area)	*	* *	*	* *
	Quebec	**..**	**.. ..**	**..**	**.. ..**
2401	Bas-Saint-Laurent	..	.. ..	..	.. ..
2402	Saguenay-Lac-Saint-Jean	..	.. ..	..	.. ..
2403	Capitale nationale	..	.. ..	..	.. ..
2404	Mauricie et Centre-du-Québec	..	.. ..	..	.. ..
2405	Estrie	..	.. ..	..	.. ..
2406	Montréal	..	.. ..	..	.. ..
2407	Outaouais	..	.. ..	..	.. ..
2408	Abitibi-Témiscamingue	..	.. ..	..	.. ..
2409	Côte-Nord	..	.. ..	..	.. ..
2411	Gaspésie-Îles-de-la-Madeleine	..	.. ..	..	.. ..
2412	Chaudière-Appalaches	..	.. ..	..	.. ..
2413	Laval	..	.. ..	..	.. ..
2414	Lanaudière	..	.. ..	..	.. ..
2415	Laurentides	..	.. ..	..	.. ..
2416	Montérégie	..	.. ..	..	.. ..
	Ontario	**2.6**	**(2.3–2.8)**	**1.1**	**(1.0–1.2)**
3501	Erie St. Clair	2.4	(1.5–3.2)	+0.7	(0.4–1.1)
3502	South West	2.7	(1.8–3.6)	1.4	(1.0–1.7)
3503	Waterloo Wellington	1.6	(0.6–2.6)	1.4	(1.0–1.8)
3504	Hamilton Niagara Haldimand Brant	2.3	(1.6–2.9)	1.0	(0.8–1.3)
3505	Central West	3.1	(2.0–4.2)	1.4	(0.9–1.9)
3506	Mississauga Halton	2.1	(1.2–3.0)	1.1	(0.6–1.6)
3507	Toronto Central	3.2	(2.3–4.0)	1.5	(1.0–2.1)
3508	Central	2.5	(1.8–3.1)	+0.7	(0.4–1.1)
3509	Central East	2.7	(2.1–3.4)	0.9	(0.6–1.2)
3510	South East	+3.6	(2.6–4.7)	1.2	(0.7–1.7)
3511	Champlain	+1.7	(0.9–2.5)	1.4	(1.1–1.7)
3512	North Simcoe Muskoka	2.8	(1.7–3.9)	1.1	(0.5–1.6)
3513	North East	3.0	(2.0–4.0)	0.8	(0.5–1.1)
3514	North West	+4.4	(3.0–5.8)	1.3	(0.6–2.0)
	Manitoba	**..**	**.. ..**	**..**	**.. ..**
4610	Winnipeg	..	.. ..	..	.. ..
4630	Interlake	..	.. ..	..	.. ..
4640	Central	..	.. ..	..	.. ..

Map Code	Health Region	Prostatectomy Readmission 2004† Risk-Adjusted Rate (%)	95% CI	Hysterectomy Readmission 2004† Risk-Adjusted Rate (%)	95% CI
Saskatchewan		**3.3**	**(2.4–4.2)**	**1.3**	**(1.0–1.7)**
4704	Regina	3.9	(1.7–6.0)	1.2	(0.5–1.9)
4706	Saskatoon	3.6	(2.0–5.2)	*2.0	(1.3–2.6)
4709	Prince Albert	*6.2	(2.8–9.6)	*	* *
Alberta		**2.0**	**(1.4–2.5)**	***1.5**	**(1.3–1.6)**
4820	Chinook	*	* *	1.3	(0.6–2.1)
4821	Palliser	*	* *	1.7	(0.7–2.6)
4822	Calgary	2.1	(1.2–3.0)	1.4	(1.1–1.7)
4823	David Thompson	*	* *	*2.0	(1.5–2.6)
4824	East Central	*	* *	*2.5	(1.6–3.4)
4825	Capital	*	* *	*0.8	(0.4–1.1)
4826	Aspen	*6.8	(3.8–9.8)	*3.1	(2.3–4.0)
4827	Peace Country	*	* *	1.6	(0.6–2.5)
British Columbia		**2.2**	**(1.9–2.5)**	**1.1**	**(0.9–1.2)**
5911	East Kootenay	*	* *	*4.5	(3.4–5.5)
5912	Kootenay Boundary	*	* *	*	* *
5913	Okanagan	2.5	(1.3–3.7)	1.0	(0.5–1.6)
5914	Thompson/Cariboo/Shuswap	3.1	(1.6–4.6)	1.0	(0.4–1.5)
5921	Fraser East	2.3	(1.0–3.5)	1.1	(0.5–1.7)
5922	Fraser North	1.7	(0.9–2.5)	0.9	(0.3–1.4)
5923	Fraser South	3.2	(2.3–4.1)	0.9	(0.5–1.4)
5931	Richmond	*	* *	*	* *
5932	Vancouver	2.1	(1.3–2.9)	*	* *
5933	North Shore	*	* *	*	* *
5941	South Vancouver Island	1.7	(0.7–2.7)	0.9	(0.3–1.5)
5942	Central Vancouver Island	2.4	(1.4–3.5)	*	* *
5943	North Vancouver Island	*	* *	*	* *
5951	Northwest	*	* *	*	* *
5952	Northern Interior	*	* *	*	* *
Yukon Territory		*	* *	*	* *
Northwest Territories		*	* *	*	* *
Nunavut		*	* *	*	* *
Canada		**2.5**		**1.1**	

† Rates are based on three years of pooled data (2003–2004 to 2005–2006), and the reference year (2004) reflects the mid-point of the three-year period.

Prostatectomy readmission

The risk-adjusted rate of unplanned readmission following discharge for prostatectomy.
Note: The Canada rate does not include Quebec and Manitoba.
Sources: Discharge Abstract Database, CIHI; National Ambulatory Care Reporting System, CIHI; Alberta Ambulatory Care Database, Alberta Health and Wellness.

Hysterectomy readmission

The risk-adjusted rate of unplanned readmission following discharge for hysterectomy.
Note: The Canada rate does not include Quebec and Manitoba.
Sources: Discharge Abstract Database, CIHI; National Ambulatory Care Reporting System, CIHI; Alberta Ambulatory Care Database, Alberta Health and Wellness.

Map Code	Health Region	30-Day Acute Myocardial Infarction In-Hospital Mortality 2004† Risk-Adjusted Rate (%)	95% CI	30-Day Stroke In-Hospital Mortality 2004† Risk-Adjusted Rate (%)	95% CI
	Newfoundland and Labrador	***13.5**	**(12.4–14.6)**	***23.6**	**(21.8–25.4)**
1011	Eastern, N.L.	*12.9	(11.4–14.4)	*23.3	(20.8–25.8)
1012	Central, N.L.	*13.8	(11.8–15.9)	*26.7	(22.8–30.5)
1013	Western, N.L.	*13.7	(10.9–16.5)	*23.7	(19.3–28.1)
	Prince Edward Island	***14.2**	**(11.9–16.5)**	**17.1**	**(13.7–20.6)**
	Nova Scotia	***12.5**	**(11.7–13.3)**	***25.6**	**(24.3–27.0)**
1201	Zone 1, N.S.	*13.6	(11.3–15.8)	*22.0	(18.6–25.5)
1202	Zone 2, N.S.	12.8	(9.9–15.8)	*22.9	(18.5–27.3)
1203	Zone 3, N.S.	11.9	(9.6–14.1)	*30.6	(26.8–34.5)
1204	Zone 4, N.S.	11.7	(9.3–14.0)	*28.2	(24.2–32.2)
1205	Zone 5, N.S.	12.2	(10.3–14.1)	*25.7	(22.4–29.0)
1206	Zone 6, N.S.	*12.3	(10.9–13.8)	*25.0	(22.4–27.6)
	New Brunswick	***11.4**	**(10.5–12.3)**	**16.9**	**(15.5–18.4)**
1301	Region 1, N.B. (Moncton area)	8.9	(7.0–10.8)	16.1	(13.2–19.0)
1302	Region 2, N.B. (Saint John area)	12.0	(10.2–13.9)	17.4	(14.3–20.5)
1303	Region 3, N.B. (Fredericton area)	11.7	(9.6–13.7)	18.0	(14.9–21.0)
1306	Region 6, N.B. (Bathurst area)	*14.2	(11.5–16.8)	*12.6	(8.0–17.1)
	Quebec	**..**	**.. ..**	**..**	**.. ..**
2401	Bas-Saint-Laurent	..	.. ..	..	.. ..
2402	Saguenay-Lac-Saint-Jean	..	.. ..	..	.. ..
2403	Capitale nationale	..	.. ..	..	.. ..
2404	Mauricie et Centre-du-Québec	..	.. ..	..	.. ..
2405	Estrie	..	.. ..	..	.. ..
2406	Montréal	..	.. ..	..	.. ..
2407	Outaouais	..	.. ..	..	.. ..
2408	Abitibi-Témiscamingue	..	.. ..	..	.. ..
2409	Côte-Nord	..	.. ..	..	.. ..
2411	Gaspésie-Îles-de-la-Madeleine	..	.. ..	..	.. ..
2412	Chaudière-Appalaches	..	.. ..	..	.. ..
2413	Laval	..	.. ..	..	.. ..
2414	Lanaudière	..	.. ..	..	.. ..
2415	Laurentides	..	.. ..	..	.. ..
2416	Montérégie	..	.. ..	..	.. ..
	Ontario	**10.2**	**(9.9–10.4)**	**17.9**	**(17.5–18.3)**
3501	Erie St. Clair	9.6	(8.7–10.5)	17.5	(16.0–19.0)
3502	South West	9.8	(8.9–10.6)	18.6	(17.2–20.0)
3503	Waterloo Wellington	9.9	(8.8–11.0)	19.7	(18.1–21.4)
3504	Hamilton Niagara Haldimand Brant	10.2	(9.6–10.8)	17.2	(16.2–18.3)
3505	Central West	*8.8	(7.6–9.9)	*15.1	(13.3–16.9)
3506	Mississauga Halton	9.7	(8.8–10.6)	17.3	(15.8–18.8)
3507	Toronto Central	10.7	(9.9–11.5)	*16.4	(15.2–17.6)
3508	Central	*11.3	(10.5–12.1)	18.5	(17.4–19.7)
3509	Central East	10.2	(9.6–10.9)	17.4	(16.3–18.5)
3510	South East	9.8	(8.8–10.9)	*21.3	(19.6–23.1)
3511	Champlain	*8.9	(8.2–9.7)	18.0	(16.7–19.3)
3512	North Simcoe Muskoka	10.7	(9.6–11.9)	16.9	(14.9–18.9)
3513	North East	11.1	(10.2–12.0)	18.5	(16.9–20.2)
3514	North West	10.9	(9.4–12.3)	18.5	(16.0–20.9)
	Manitoba	**9.6**	**(8.9–10.4)**	**19.0**	**(17.8–20.2)**
4610	Winnipeg	*9.0	(8.1–10.0)	17.5	(16.0–19.0)
4630	Interlake	*7.1	(3.9–10.2)	17.1	(12.5–21.7)
4640	Central	10.7	(8.1–13.4)	*23.8	(19.5–28.1)

Map Code	Health Region	30-Day Acute Myocardial Infarction In-Hospital Mortality 2004† Risk-Adjusted Rate (%)	95% CI	30-Day Stroke In-Hospital Mortality 2004† Risk-Adjusted Rate (%)	95% CI
Saskatchewan		**10.1**	**(9.2–10.9)**	**17.9**	**(16.7–19.2)**
4704	Regina	10.3	(8.6–12.0)	*13.8	(11.1–16.5)
4706	Saskatoon	9.5	(7.8–11.1)	19.4	(17.0–21.8)
4709	Prince Albert	9.7	(6.4–13.0)	20.4	(15.2–25.6)
Alberta		***8.2**	**(7.6–8.7)**	***16.6**	**(15.8–17.5)**
4820	Chinook	9.4	(7.1–11.8)	17.0	(13.5–20.5)
4821	Palliser	10.3	(7.8–12.9)	19.2	(14.8–23.6)
4822	Calgary	*6.4	(5.5–7.4)	*14.9	(13.3–16.4)
4823	David Thompson	10.6	(8.9–12.3)	20.5	(17.8–23.2)
4824	East Central	*13.7	(11.2–16.1)	18.6	(14.6–22.6)
4825	Capital	*7.2	(6.3–8.2)	*15.8	(14.3–17.2)
4826	Aspen	9.5	(7.1–12.0)	18.1	(14.3–22.0)
4827	Peace Country	9.7	(6.9–12.4)	19.6	(15.3–24.0)
British Columbia		**10.6**	**(10.1–11.1)**	**18.3**	**(17.7–19.0)**
5911	East Kootenay	7.6	(4.8–10.5)	20.2	(15.6–24.8)
5912	Kootenay Boundary	11.0	(8.0–14.0)	22.0	(17.6–26.4)
5913	Okanagan	10.8	(9.4–12.3)	19.4	(17.5–21.3)
5914	Thompson/Cariboo/Shuswap	11.3	(9.4–13.2)	17.8	(14.9–20.8)
5921	Fraser East	*12.6	(10.7–14.6)	20.5	(17.8–23.3)
5922	Fraser North	*13.0	(11.6–14.4)	*15.8	(13.8–17.8)
5923	Fraser South	10.5	(9.3–11.7)	18.4	(16.6–20.2)
5931	Richmond	12.7	(9.9–15.5)	19.0	(15.5–22.5)
5932	Vancouver	11.7	(10.3–13.0)	17.4	(15.6–19.2)
5933	North Shore	10.3	(8.6–12.0)	16.4	(14.0–18.8)
5941	South Vancouver Island	8.9	(7.4–10.4)	18.5	(16.5–20.6)
5942	Central Vancouver Island	*8.2	(6.6–9.8)	20.2	(17.8–22.5)
5943	North Vancouver Island	*6.6	(3.7–9.6)	21.2	(17.0–25.5)
5951	Northwest	11.6	(7.7–15.5)	14.2	(8.3–20.2)
5952	Northern Interior	7.7	(4.5–11.0)	17.4	(13.1–21.6)
Yukon Territory		*	* *	**25.4**	**(16.0–34.8)**
Northwest Territories		***18.6**	**(10.5–26.7)**	**18.5**	**(7.7–29.3)**
Nunavut		..	.. ..	..	.. ..
Canada		**10.3**		**18.3**	

† Rates are based on three years of pooled data (2003–2004 to 2005–2006), and the reference year (2004) reflects the mid-point of the three-year period.

30-day acute myocardial infarction (AMI) in-hospital mortality

The risk-adjusted rate of all-cause in-hospital death occurring within 30 days of first admission to an acute care hospital with a diagnosis of AMI.

Note: The Canada rate does not include Quebec and Nunavut. Beginning with 2004 rates, AMI case-selection criteria were revised; therefore, comparison of 2004 rates with those of previous years should be made with caution.

Sources: Hospital Morbidity Database, CIHI; Discharge Abstract Database, CIHI.

30-day stroke in-hospital mortality

The risk-adjusted rate of all-cause in-hospital death occurring within 30 days of first admission to an acute care hospital with a diagnosis of stroke.

Note: The Canada rate does not include Quebec and Nunavut. Beginning with 2004 rates, stroke case-selection criteria were revised; therefore, comparison of 2004 rates with those of previous years should be made with caution.

Sources: Hospital Morbidity Database, CIHI; Discharge Abstract Database, CIHI.

Map Code	Health Region	Hip Replacement 2005–2006 Age-Standardized Rate/100,000	Hip Replacement 2005–2006 95% CI	Knee Replacement 2005–2006 Age-Standardized Rate/100,000	Knee Replacement 2005–2006 95% CI
	Newfoundland and Labrador	***80.6**	**(72.3–89.0)**	***106.1**	**(96.6–115.6)**
1011	Eastern, N.L.	*76.5	(65.5–87.5)	*89.3	(77.5–101.0)
1012	Central, N.L.	*80.9	(63.2–98.6)	*105.9	(85.8–125.9)
1013	Western, N.L.	88.6	(67.1–110.1)	143.7	(117.1–170.2)
	Prince Edward Island	**111.5**	**(92.2–130.7)**	**165.3**	**(142.5–188.0)**
	Nova Scotia	***108.6**	**(101.6–115.7)**	**151.5**	**(143.2–159.7)**
1201	Zone 1, N.S.	95.1	(78.1–112.1)	134.4	(114.5–154.2)
1202	Zone 2, N.S.	100.4	(78.5–122.2)	129.5	(104.8–154.2)
1203	Zone 3, N.S.	118.1	(96.7–139.6)	168.2	(143.4–193.0)
1204	Zone 4, N.S.	106.7	(85.2–128.2)	146.8	(122.1–171.6)
1205	Zone 5, N.S.	94.3	(77.7–110.9)	*180.0	(156.8–203.2)
1206	Zone 6, N.S.	*115.5	(103.4–127.7)	148.5	(134.7–162.4)
	New Brunswick	**95.4**	**(87.9–102.8)**	**151.1**	**(141.9–160.4)**
1301	Region 1, N.B. (Moncton area)	113.3	(97.6–129.1)	*180.1	(160.2–200.0)
1302	Region 2, N.B. (Saint John area)	108.0	(91.3–124.7)	*192.4	(170.5–214.4)
1303	Region 3, N.B. (Fredericton area)	89.1	(73.4–104.8)	157.8	(137.0–178.6)
1306	Region 6, N.B. (Bathurst area)	*62.0	(44.6–79.4)	*73.7	(54.7–92.7)
	Quebec	***63.7**	**(61.8–65.6)**	***85.5**	**(83.3–87.7)**
2401	Bas-Saint-Laurent	*63.9	(53.2–74.6)	*94.5	(81.3–107.7)
2402	Saguenay-Lac-Saint-Jean	*64.5	(54.7–74.4)	143.2	(128.6–157.8)
2403	Capitale nationale	*59.9	(53.9–65.9)	*94.4	(86.8–101.9)
2404	Mauricie et Centre-du-Québec	*65.1	(57.7–72.4)	*91.6	(83.1–100.1)
2405	Estrie	*63.7	(54.3–73.1)	*66.7	(57.1–76.2)
2406	Montréal	*66.4	(62.6–70.3)	*75.3	(71.1–79.4)
2407	Outaouais	*60.7	(51.2–70.3)	*86.9	(75.4–98.4)
2408	Abitibi-Témiscamingue	*57.2	(43.6–70.8)	*80.5	(64.5–96.5)
2409	Côte-Nord	*58.0	(41.3–74.8)	*80.8	(60.6–101.0)
2411	Gaspésie-Îles-de-la-Madeleine	*54.7	(39.9–69.4)	*116.8	(96.2–137.3)
2412	Chaudière-Appalaches	*68.6	(60.0–77.3)	*97.9	(87.6–108.2)
2413	Laval	*56.2	(48.0–64.3)	*79.6	(69.9–89.2)
2414	Lanaudière	*55.4	(47.5–63.3)	*81.1	(71.5–90.7)
2415	Laurentides	*64.3	(56.5–72.1)	*81.1	(72.3–89.8)
2416	Montérégie	*67.5	(62.7–72.3)	*82.4	(77.1–87.7)
	Ontario	***114.1**	**(112.0–116.1)**	***181.9**	**(179.3–184.5)**
3501	Erie St. Clair	*112.5	(103.8–121.3)	*207.0	(195.0–219.0)
3502	South West	*139.5	(131.5–147.6)	*226.6	(216.5–236.8)
3503	Waterloo Wellington	*127.8	(118.1–137.4)	*181.6	(170.0–193.2)
3504	Hamilton Niagara Haldimand Brant	*130.1	(123.8–136.5)	*192.3	(184.5–200.0)
3505	Central West	*81.1	(73.1–89.1)	*181.6	(169.6–193.7)
3506	Mississauga Halton	*110.9	(103.2–118.6)	*166.8	(157.3–176.3)
3507	Toronto Central	*94.8	(88.6–101.0)	*122.3	(115.2–129.4)
3508	Central	*93.3	(87.8–98.8)	155.2	(148.0–162.4)
3509	Central East	102.8	(97.1–108.5)	*189.7	(181.9–197.5)
3510	South East	*134.2	(123.8–144.6)	*209.7	(196.8–222.7)
3511	Champlain	*119.4	(112.5–126.3)	*168.8	(160.6–177.1)
3512	North Simcoe Muskoka	*140.8	(128.9–152.7)	*200.2	(186.1–214.3)
3513	North East	106.7	(98.0–115.4)	*172.3	(161.5–183.1)
3514	North West	*137.1	(120.6–153.6)	*279.3	(256.4–302.2)
	Manitoba	***123.4**	**(116.4–130.4)**	***190.8**	**(182.1–199.6)**
4610	Winnipeg	*119.5	(110.3–128.7)	*199.9	(188.0–211.9)
4630	Interlake	126.3	(100.7–152.0)	*199.4	(167.5–231.4)
4640	Central	*131.9	(106.6–157.1)	172.4	(143.5–201.3)

Map Code	Health Region	Hip Replacement 2005–2006 Age-Standardized Rate/100,000	Hip Replacement 2005–2006 95% CI	Knee Replacement 2005–2006 Age-Standardized Rate/100,000	Knee Replacement 2005–2006 95% CI
Saskatchewan		**†119.0**	**(111.7–126.4)**	**†171.6**	**(162.8–180.5)**
4704	Regina	114.4	(99.2–129.5)	143.0	(126.5–159.6)
4706	Saskatoon	†132.4	(117.4–147.3)	†199.2	(180.8–217.7)
4709	Prince Albert	110.6	(85.0–136.2)	151.4	(121.7–181.1)
Alberta		**†130.5**	**(125.9–135.2)**	**†188.1**	**(182.4–193.7)**
4820	Chinook	†137.5	(116.8–158.1)	†230.2	(203.4–257.0)
4821	Palliser	*	* *	*	* *
4822	Calgary	†136.6	(128.5–144.8)	†185.9	(176.2–195.7)
4823	David Thompson	†151.9	(135.5–168.3)	†220.9	(201.0–240.8)
4824	East Central	119.3	(98.4–140.2)	†188.1	(161.7–214.6)
4825	Capital	†122.5	(114.5–130.4)	†180.5	(170.8–190.3)
4826	Aspen	†133.5	(113.8–153.3)	†227.4	(201.6–253.3)
4827	Peace Country	116.3	(92.3–140.2)	146.9	(119.9–174.0)
British Columbia		**†110.1**	**(106.7–113.4)**	**†141.5**	**(137.7–145.3)**
5911	East Kootenay	†131.2	(105.3–157.2)	†194.3	(162.6–226.0)
5912	Kootenay Boundary	†135.6	(110.2–160.9)	†202.7	(171.5–233.9)
5913	Okanagan	†142.0	(129.5–154.6)	†173.6	(160.1–187.2)
5914	Thompson/Cariboo/Shuswap	103.1	(89.2–117.0)	148.4	(132.0–164.9)
5921	Fraser East	110.1	(96.4–123.9)	152.9	(136.5–169.3)
5922	Fraser North	†80.2	(71.8–88.6)	†102.1	(92.5–111.8)
5923	Fraser South	99.4	(90.7–108.1)	151.6	(140.9–162.3)
5931	Richmond	†78.5	(64.5–92.6)	147.5	(128.1–166.9)
5932	Vancouver	†67.0	(59.8–74.3)	†64.7	(57.4–71.9)
5933	North Shore	†139.2	(124.7–153.7)	151.0	(135.7–166.3)
5941	South Vancouver Island	†128.4	(116.5–140.4)	152.3	(139.2–165.3)
5942	Central Vancouver Island	†136.7	(122.6–150.7)	†172.8	(157.3–188.3)
5943	North Vancouver Island	†134.0	(111.6–156.3)	†184.0	(158.4–209.6)
5951	Northwest	†177.9	(141.5–214.4)	159.3	(124.9–193.7)
5952	Northern Interior	121.7	(100.1–143.4)	169.6	(144.2–195.0)
Yukon Territory		**†57.1**	**(22.3–91.9)**	**103.0**	**(51.5–154.5)**
Northwest Territories		**133.3**	**(78.3–188.2)**	**156.2**	**(94.3–218.2)**
Nunavut		*	* *	**238.8**	**(137.0–340.7)**
Canada		**101.5**	**(100.3–102.7)**	**149.4**	**(147.9–150.8)**

Hip replacement

Age-standardized rate of unilateral or bilateral hip replacement surgery performed on inpatients in acute care hospitals, per 100,000 population aged 20 years and over. Hip replacement surgery has the potential to improve functional status and reduce pain, as well as contribute to other gains in health-related quality of life. Wide inter-regional variation in hip replacement rates may be attributable to numerous factors, including the availability of services, provider practice patterns and patient preferences.

Note: Beginning with 2005–2006 rates, this indicator is calculated for the population aged 20 years and over and therefore is not comparable with rates reported for previous years. Rates for the previous years, calculated using the new definition, are presented on pages 68 and 69.

Sources: Hospital Morbidity Database, CIHI; Discharge Abstract Database, CIHI; Alberta Acute Care Database, Alberta Health and Wellness; ministère de la Santé et des Services sociaux du Québec.

Knee replacement

Age-standardized rate of unilateral or bilateral knee replacement surgery performed on patients in acute care hospitals or same-day surgery facilities, per 100,000 population aged 20 years and over. Knee replacement surgery has the potential to improve functional status and reduce pain, as well as contribute to other gains in health-related quality of life. Wide inter-regional variation in knee replacement rates may be attributable to numerous factors, including the availability of services, provider practice patterns and patient preferences.

Note: Beginning with 2005–2006 rates, this indicator is calculated for the population aged 20 years and over and therefore is not comparable with rates reported for previous years. Rates for the previous years, calculated using the new definition, are presented on pages 70 and 71.

Sources: Hospital Morbidity Database, CIHI; Discharge Abstract Database, CIHI; National Ambulatory Care Reporting System, CIHI; Alberta Acute Care Database, Alberta Health and Wellness; Alberta Ambulatory Care Database, Alberta Health and Wellness; ministère de la Santé et des Services sociaux du Québec.

Map Code	Health Region	Hip Replacement 2001–2002 Age-Standardized Rate/100,000	2002–2003 Age-Standardized Rate/100,000	2003–2004 Age-Standardized Rate/100,000	2004–2005 Age-Standardized Rate/100,000
	Newfoundland and Labrador	**†53.4**	**†68.6**	**†76.9**	**†69.0**
1011	Eastern, N.L.	†50.5	73.6	87.4	†66.3
1012	Central, N.L.	†48.3	†57.0	†55.9	†66.0
1013	Western, N.L.	68.8	†55.8	76.1	†64.8
	Prince Edward Island	**88.0**	**98.6**	**†116.0**	**†119.5**
	Nova Scotia	**84.7**	**†95.2**	**†98.9**	**†104.7**
1201	Zone 1, N.S.	70.6	101.2	105.9	102.5
1202	Zone 2, N.S.	†109.0	†125.4	†123.8	102.5
1203	Zone 3, N.S.	89.9	†105.3	91.4	†115.3
1204	Zone 4, N.S.	83.8	81.0	110.7	99.4
1205	Zone 5, N.S.	85.9	76.3	105.7	100.5
1206	Zone 6, N.S.	77.4	92.8	81.7	†105.1
	New Brunswick	**82.0**	**86.3**	**†80.0**	**89.0**
1301	Region 1, N.B. (Moncton area)	73.3	97.8	77.4	90.5
1302	Region 2, N.B. (Saint John area)	†95.3	98.1	91.6	95.9
1303	Region 3, N.B. (Fredericton area)	†98.7	88.9	86.9	92.6
1306	Region 6, N.B. (Bathurst area)	†56.6	†60.0	†42.0	*
	Quebec	**†53.6**	**†57.6**	**†62.9**	**†60.9**
2401	Bas-Saint-Laurent	†63.1	†70.8	†74.6	†73.4
2402	Saguenay-Lac-Saint-Jean	†51.9	†63.4	†50.7	†59.9
2403	Capitale nationale	†47.6	†54.5	†63.0	†59.8
2404	Mauricie et Centre-du-Québec	†58.7	†58.2	†61.0	†55.5
2405	Estrie	†52.3	†58.9	†58.6	†59.9
2406	Montréal	†53.7	†54.7	†63.5	†61.7
2407	Outaouais	†52.5	†58.5	†62.6	†48.1
2408	Abitibi-Témiscamingue	73.0	†56.0	†67.5	†69.3
2409	Côte-Nord	†32.8	†56.4	†60.3	†59.8
2411	Gaspésie-Îles-de-la-Madeleine	†36.8	†57.6	†58.0	†66.5
2412	Chaudière-Appalaches	†60.3	†69.3	†78.6	†73.5
2413	Laval	†54.3	†53.7	†65.5	†66.0
2414	Lanaudière	†46.7	†51.8	†62.6	†57.7
2415	Laurentides	†55.4	†53.4	†66.4	†54.8
2416	Montérégie	†53.2	†62.0	†61.5	†63.0
	Ontario	**†87.8**	**†91.7**	**†96.3**	**†103.2**
3501	Erie St. Clair	†102.8	†105.0	†99.9	†109.4
3502	South West	†100.1	†100.2	†115.4	†133.2
3503	Waterloo Wellington	†92.8	†94.8	†100.3	100.1
3504	Hamilton Niagara Haldimand Brant	†98.0	†100.5	†111.4	†111.8
3505	Central West	72.1	†62.4	†67.7	†71.5
3506	Mississauga Halton	†87.1	†92.3	†101.5	†101.3
3507	Toronto Central	†69.7	†76.9	†77.5	†84.3
3508	Central	74.1	88.1	83.8	93.2
3509	Central East	83.7	87.7	92.7	96.0
3510	South East	†96.5	†106.2	†116.1	†133.5
3511	Champlain	†85.1	88.4	88.1	95.4
3512	North Simcoe Muskoka	†100.5	†102.5	†99.2	†112.9
3513	North East	74.5	81.6	94.1	†101.4
3514	North West	90.0	†117.2	†115.1	†119.9
	Manitoba	**†89.6**	**†92.2**	**†96.6**	**92.8**
4610	Winnipeg	†88.3	87.2	91.3	89.0
4630	Interlake	100.4	102.5	88.2	105.1
4640	Central	90.5	73.2	109.9	92.2

Map Code	Health Region	Hip Replacement 2001–2002 Age-Standardized Rate/100,000	2002–2003 Age-Standardized Rate/100,000	2003–2004 Age-Standardized Rate/100,000	2004–2005 Age-Standardized Rate/100,000
Saskatchewan		**†94.3**	**†110.6**	**†104.1**	**†111.1**
4704	Regina	88.0	79.0	78.4	106.1
4706	Saskatoon	†95.1	†143.8	†122.7	†125.5
4709	Prince Albert	82.6	†116.4	92.0	108.3
Alberta		**†98.7**	**†102.5**	**†109.8**	**†111.7**
4820	Chinook	†117.8	†112.1	103.5	†134.0
4821	Palliser	84.3	90.9	101.2	109.5
4822	Calgary	†93.4	†96.5	†107.0	†119.2
4823	David Thompson	†123.9	†131.6	†133.6	†138.4
4824	East Central	93.1	†113.5	101.4	100.0
4825	Capital	†89.8	†100.8	†111.4	97.7
4826	Aspen	88.0	†106.3	94.1	84.6
4827	Peace Country	†156.2	90.9	†137.4	†138.0
British Columbia		**79.5**	**†88.4**	**†94.7**	**†103.5**
5911	East Kootenay	†108.1	†112.4	†128.3	†144.0
5912	Kootenay Boundary	91.9	100.9	†136.4	†136.9
5913	Okanagan	†100.2	†96.9	†114.6	†124.6
5914	Thompson/Cariboo/Shuswap	†104.9	93.9	†117.2	†120.8
5921	Fraser East	82.2	†99.7	99.1	105.8
5922	Fraser North	†63.5	†74.9	†75.4	†82.7
5923	Fraser South	†65.6	84.8	87.5	99.7
5931	Richmond	†44.1	†57.6	†64.2	†64.4
5932	Vancouver	†49.0	†59.9	†56.3	†55.8
5933	North Shore	†91.3	†101.9	†101.5	†120.7
5941	South Vancouver Island	85.1	†99.2	†107.9	†119.9
5942	Central Vancouver Island	84.6	†103.0	†117.1	†121.8
5943	North Vancouver Island	†108.8	100.4	94.3	†147.0
5951	Northwest	†44.1	84.6	83.0	121.8
5952	Northern Interior	†103.1	101.3	†127.9	102.1
Yukon Territory		**82.7**	**78.7**	**97.1**	**81.6**
Northwest Territories		**76.1**	**62.6**	**131.8**	**133.6**
Nunavut		**70.1**	**49.0**	*****	**92.9**
Canada		**78.6**	**83.9**	**88.7**	**92.4**

Beginning with 2005–2006, **hip replacement** rates are calculated for the population aged 20 years and over. Rates for previous years, calculated using the new definition, are presented to enable comparisons over time.

Note: Rates were calculated using current regional boundaries and population estimates.

Sources: Hospital Morbidity Database, CIHI; Discharge Abstract Database, CIHI; Alberta Acute Care Database, Alberta Health and Wellness; ministère de la Santé et des Services sociaux du Québec.

Map Code	Health Region	Knee Replacement 2001–2002 Age-Standardized Rate/100,000	2002–2003 Age-Standardized Rate/100,000	2003–2004 Age-Standardized Rate/100,000	2004–2005 Age-Standardized Rate/100,000
	Newfoundland and Labrador	**†61.1**	**†66.5**	**†85.9**	**†91.6**
1011	Eastern, N.L.	†48.6	†58.5	†76.2	†65.6
1012	Central, N.L.	†74.0	†76.2	103.5	110.2
1013	Western, N.L.	79.5	†73.7	†85.7	142.6
	Prince Edward Island	**97.4**	**117.2**	**†137.5**	**146.3**
	Nova Scotia	**†113.4**	**†135.3**	**†136.3**	**†144.4**
1201	Zone 1, N.S.	95.5	†128.2	119.9	119.8
1202	Zone 2, N.S.	†129.5	†140.9	127.3	145.3
1203	Zone 3, N.S.	113.9	122.5	126.1	†153.0
1204	Zone 4, N.S.	81.3	†136.0	131.9	130.8
1205	Zone 5, N.S.	†151.2	†147.3	†167.2	†182.6
1206	Zone 6, N.S.	103.7	†134.5	†137.2	†140.0
	New Brunswick	**†110.6**	**†123.5**	**†128.2**	**†137.5**
1301	Region 1, N.B. (Moncton area)	100.8	115.9	125.2	123.7
1302	Region 2, N.B. (Saint John area)	115.5	†149.2	†170.6	†167.1
1303	Region 3, N.B. (Fredericton area)	†155.2	†162.8	†150.2	†153.6
1306	Region 6, N.B. (Bathurst area)	†52.4	†69.5	†64.7	*
	Quebec	**†57.3**	**†64.0**	**†85.2**	**†76.9**
2401	Bas-Saint-Laurent	†66.8	†68.8	104.4	†102.6
2402	Saguenay-Lac-Saint-Jean	95.6	101.8	†141.5	120.4
2403	Capitale nationale	†50.8	†63.1	†82.2	†81.5
2404	Mauricie et Centre-du-Québec	†73.1	†75.9	†103.1	†70.7
2405	Estrie	†57.3	†64.0	†69.4	†64.9
2406	Montréal	†41.4	†50.8	†71.6	†69.1
2407	Outaouais	†85.0	†76.5	104.5	†91.5
2408	Abitibi-Témiscamingue	†44.7	†54.4	106.9	†92.6
2409	Côte-Nord	†75.0	89.7	97.0	†77.8
2411	Gaspésie-Îles-de-la-Madeleine	†54.5	†70.6	118.2	†105.1
2412	Chaudière-Appalaches	†74.7	†81.9	†99.6	†99.2
2413	Laval	†57.5	†58.7	†78.2	†65.9
2414	Lanaudière	†54.6	†56.0	†76.7	†64.5
2415	Laurentides	†51.5	†57.9	†74.8	†60.5
2416	Montérégie	†59.6	†67.3	†81.2	†76.7
	Ontario	**†119.7**	**†123.4**	**†129.3**	**†147.4**
3501	Erie St. Clair	†125.7	†134.2	†135.6	†161.7
3502	South West	†122.3	†137.5	†150.0	†169.3
3503	Waterloo Wellington	†113.5	†117.3	†132.5	†140.3
3504	Hamilton Niagara Haldimand Brant	†134.5	†135.1	†144.6	†161.3
3505	Central West	†108.6	113.8	†129.9	†158.8
3506	Mississauga Halton	†115.2	†127.5	122.8	†143.7
3507	Toronto Central	†76.6	†78.7	†79.7	†90.5
3508	Central	104.0	†112.5	†108.5	125.6
3509	Central East	†123.9	†130.1	†126.8	†160.0
3510	South East	†138.8	†145.8	†168.5	†178.4
3511	Champlain	†117.4	†112.0	†124.6	†135.0
3512	North Simcoe Muskoka	†134.9	†143.5	†147.0	†159.9
3513	North East	†122.4	†121.2	†136.2	†154.4
3514	North West	†187.7	†183.2	†163.7	†193.6
	Manitoba	**†129.6**	**†134.4**	**†133.7**	**128.6**
4610	Winnipeg	†127.8	†125.2	†128.2	131.5
4630	Interlake	†155.8	†160.5	141.5	135.8
4640	Central	108.5	115.1	104.6	124.5

Map Code	Health Region	Knee Replacement 2001–2002 Age-Standardized Rate/100,000	2002–2003 Age-Standardized Rate/100,000	2003–2004 Age-Standardized Rate/100,000	2004–2005 Age-Standardized Rate/100,000
Saskatchewan		***115.9**	***122.8**	***149.8**	***166.7**
4704	Regina	110.6	99.3	118.0	128.8
4706	Saskatoon	*130.7	*159.4	*175.2	*214.2
4709	Prince Albert	88.1	90.1	129.0	119.8
Alberta		***119.5**	***128.2**	***131.4**	***144.9**
4820	Chinook	*163.2	*160.6	*191.5	*215.7
4821	Palliser	116.0	121.2	*142.4	*170.4
4822	Calgary	99.2	99.8	112.5	*138.9
4823	David Thompson	*145.2	*181.6	*175.3	*158.6
4824	East Central	110.4	*171.4	*148.8	139.7
4825	Capital	*119.8	*126.9	*126.7	130.1
4826	Aspen	*121.4	*152.6	124.8	*159.1
4827	Peace Country	*164.1	*136.1	*144.8	*176.8
British Columbia		***85.3**	***90.7**	***100.3**	***130.5**
5911	East Kootenay	*130.9	*151.4	120.8	*204.7
5912	Kootenay Boundary	*77.0	115.1	*146.0	*197.8
5913	Okanagan	*122.4	*120.3	*138.1	*170.6
5914	Thompson/Cariboo/Shuswap	*132.1	*123.9	*141.3	*164.7
5921	Fraser East	106.2	116.7	*137.7	*157.7
5922	Fraser North	*71.8	*67.6	*72.9	*100.7
5923	Fraser South	*80.4	*90.2	*96.6	*140.5
5931	Richmond	*52.3	*57.2	*62.4	*92.7
5932	Vancouver	*41.0	*47.9	*45.5	*67.0
5933	North Shore	*77.5	*89.8	106.2	*146.1
5941	South Vancouver Island	*56.6	*71.1	*80.7	*94.6
5942	Central Vancouver Island	*113.9	103.9	107.8	*141.3
5943	North Vancouver Island	107.4	113.9	*147.5	*197.6
5951	Northwest	*40.4	81.2	*75.7	*97.4
5952	Northern Interior	116.8	*135.2	*166.5	*160.8
Yukon Territory		**108.7**	**105.3**	**88.7**	***59.8**
Northwest Territories		**135.9**	**107.1**	**183.6**	**189.6**
Nunavut		**225.6**	**111.6**	**156.9**	***343.1**
Canada		**98.2**	**104.3**	**114.8**	**125.5**

Beginning with 2005–2006, **knee replacement** rates are calculated for the population aged 20 years and over. Rates for previous years, calculated using the new definition, are presented to enable comparisons over time.

Note: Rates were calculated using current regional boundaries and population estimates.

Sources: Hospital Morbidity Database, CIHI; Discharge Abstract Database, CIHI; National Ambulatory Care Reporting System, CIHI; Alberta Acute Care Database, Alberta Health and Wellness; Alberta Ambulatory Care Database, Alberta Health and Wellness; ministère de la Santé et des Services sociaux du Québec.

Map Code	Health Region	Hysterectomy 2004–2005 Age-Standardized Rate/100,000	95% CI	2005–2006 Age-Standardized Rate/100,000	95% CI
	Newfoundland and Labrador	***434**	**(406–463)**	***458**	**(428–488)**
1011	Eastern, N.L.	*431	(394–468)	*411	(374–447)
1012	Central, N.L.	400	(337–463)	*461	(391–532)
1013	Western, N.L.	*506	(428–583)	*528	(444–612)
	Prince Edward Island	***591**	**(524–658)**	***572**	**(504–640)**
	Nova Scotia	***490**	**(467–513)**	***466**	**(444–489)**
1201	Zone 1, N.S.	*496	(431–561)	*418	(357–479)
1202	Zone 2, N.S.	*679	(582–777)	*740	(635–846)
1203	Zone 3, N.S.	*716	(630–802)	*759	(669–849)
1204	Zone 4, N.S.	*618	(533–703)	*603	(518–687)
1205	Zone 5, N.S.	*456	(395–518)	*442	(380–505)
1206	Zone 6, N.S.	381	(351–411)	334	(305–362)
	New Brunswick	***493**	**(465–521)**	***514**	**(488–541)**
1301	Region 1, N.B. (Moncton area)	*551	(497–604)	*606	(549–662)
1302	Region 2, N.B. (Saint John area)	*425	(375–474)	*468	(416–519)
1303	Region 3, N.B. (Fredericton area)	*447	(394–499)	*404	(354–453)
1306	Region 6, N.B. (Bathurst area)	*	* *	*595	(506–684)
	Quebec	***341**	**(335–348)**	***325**	**(319–332)**
2401	Bas-Saint-Laurent	*530	(477–584)	*580	(524–637)
2402	Saguenay-Lac-Saint-Jean	*669	(618–720)	*639	(589–690)
2403	Capitale nationale	369	(346–392)	*292	(272–313)
2404	Mauricie et Centre-du-Québec	*402	(372–432)	368	(339–397)
2405	Estrie	*458	(418–499)	*488	(446–530)
2406	Montréal	*216	(206–226)	*210	(200–221)
2407	Outaouais	*253	(227–279)	*245	(219–270)
2408	Abitibi-Témiscamingue	*531	(467–594)	*498	(437–558)
2409	Côte-Nord	*507	(436–578)	405	(341–469)
2411	Gaspésie-Îles-de-la-Madeleine	*478	(409–548)	*522	(446–597)
2412	Chaudière-Appalaches	*470	(434–505)	*414	(380–447)
2413	Laval	*238	(214–262)	*295	(268–322)
2414	Lanaudière	*320	(293–347)	340	(312–367)
2415	Laurentides	*301	(277–325)	*303	(280–327)
2416	Montérégie	367	(351–383)	333	(318–349)
	Ontario	***338**	**(333–343)**	***327**	**(322–332)**
3501	Erie St. Clair	*494	(466–522)	*445	(418–471)
3502	South West	*455	(433–478)	*403	(382–424)
3503	Waterloo Wellington	*417	(393–442)	*390	(366–413)
3504	Hamilton Niagara Haldimand Brant	*391	(374–408)	*383	(366–399)
3505	Central West	*269	(250–288)	*246	(228–264)
3506	Mississauga Halton	*206	(193–220)	*212	(198–225)
3507	Toronto Central	*165	(154–177)	*165	(154–177)
3508	Central	*228	(217–240)	*225	(214–237)
3509	Central East	349	(334–365)	*363	(348–378)
3510	South East	347	(319–374)	371	(343–400)
3511	Champlain	362	(345–379)	354	(337–371)
3512	North Simcoe Muskoka	385	(354–415)	*391	(361–422)
3513	North East	*674	(638–710)	*620	(585–655)
3514	North West	*427	(383–471)	*424	(380–468)
	Manitoba	**343**	**(326–361)**	***314**	**(297–330)**
4610	Winnipeg	*308	(286–330)	*285	(264–306)
4630	Interlake	337	(272–402)	350	(282–418)
4640	Central	355	(293–417)	344	(283–406)

Map Code	Health Region	Hysterectomy 2004–2005 Age-Standardized Rate/100,000	95% CI	2005–2006 Age-Standardized Rate/100,000	95% CI
Saskatchewan		***402**	**(381–422)**	***405**	**(384–426)**
4704	Regina	326	(289–362)	381	(341–420)
4706	Saskatoon	*404	(365–442)	*394	(356–432)
4709	Prince Albert	296	(228–363)	*250	(189–312)
Alberta		***395**	**(384–406)**	***382**	**(371–393)**
4820	Chinook	*640	(570–710)	*561	(496–626)
4821	Palliser	*510	(435–586)	*	* *
4822	Calgary	342	(325–359)	347	(330–364)
4823	David Thompson	*471	(429–513)	*506	(463–549)
4824	East Central	*560	(485–635)	*593	(516–671)
4825	Capital	360	(341–379)	339	(321–358)
4826	Aspen	*411	(359–462)	379	(329–428)
4827	Peace Country	375	(319–432)	350	(295–405)
British Columbia		***337**	**(328–346)**	***337**	**(328–345)**
5911	East Kootenay	*457	(380–534)	349	(284–415)
5912	Kootenay Boundary	376	(303–450)	360	(294–426)
5913	Okanagan	*426	(389–464)	*435	(397–473)
5914	Thompson/Cariboo/Shuswap	*585	(530–639)	*609	(553–664)
5921	Fraser East	*581	(532–630)	*512	(466–558)
5922	Fraser North	*289	(267–311)	*245	(225–265)
5923	Fraser South	*298	(277–320)	*277	(257–297)
5931	Richmond	*194	(163–224)	*248	(213–283)
5932	Vancouver	*195	(178–212)	*192	(175–209)
5933	North Shore	*223	(196–249)	*254	(225–283)
5941	South Vancouver Island	*312	(283–342)	346	(315–376)
5942	Central Vancouver Island	*505	(457–553)	*498	(452–544)
5943	North Vancouver Island	*495	(429–562)	*470	(403–536)
5951	Northwest	*432	(357–506)	397	(326–468)
5952	Northern Interior	*451	(395–508)	*542	(480–604)
Yukon Territory		**310**	**(207–413)**	***249**	**(156–342)**
Northwest Territories		***206**	**(130–281)**	***251**	**(166–335)**
Nunavut		***231**	**(119–342)**	**274**	**(159–389)**
Canada		**357**	**(354–360)**	**346**	**(343–349)**

Hysterectomy

Age-standardized rate of hysterectomy provided to patients in acute care hospitals or same-day surgery facilities, per 100,000 women aged 20 and over. As with other types of surgical procedures, variations in hysterectomy rates can be attributed to numerous factors, including differences in population demographics and health status, physician practice patterns and availability of services.
Sources: Hospital Morbidity Database, CIHI; Discharge Abstract Database, CIHI; National Ambulatory Care Reporting System, CIHI; Alberta Ambulatory Care Database, Alberta Health and Wellness; ministère de la Santé et des Services sociaux du Québec.

Map Code	Health Region	Percutaneous Coronary Intervention 2004–2005 Age-Standardized Rate/100,000	2004–2005 95% CI	2005–2006 Age-Standardized Rate/100,000	2005–2006 95% CI
	Newfoundland and Labrador	***132.1**	**(121.6–142.6)**	***135.6**	**(125.1–146.2)**
1011	Eastern, N.L.	*154.5	(139.2–169.7)	*154.4	(139.2–169.6)
1012	Central, N.L.	*95.5	(76.2–114.8)	*117.8	(96.7–138.9)
1013	Western, N.L.	*92.9	(71.5–114.3)	*96.0	(73.8–118.2)
	Prince Edward Island	***153.3**	**(131.3–175.2)**	***137.4**	**(116.6–158.2)**
	Nova Scotia	***166.8**	**(158.1–175.6)**	**179.4**	**(170.5–188.4)**
1201	Zone 1, N.S.	*144.7	(123.1–166.3)	168.8	(145.8–191.8)
1202	Zone 2, N.S.	*125.4	(100.2–150.5)	*135.1	(110.3–160.0)
1203	Zone 3, N.S.	161.2	(136.6–185.9)	200.0	(172.8–227.3)
1204	Zone 4, N.S.	*127.8	(104.0–151.5)	174.7	(147.3–202.0)
1205	Zone 5, N.S.	*206.5	(181.2–231.7)	163.4	(141.5–185.2)
1206	Zone 6, N.S.	174.1	(159.5–188.7)	186.9	(171.7–202.0)
	New Brunswick	***224.0**	**(212.7–235.3)**	***236.3**	**(224.7–247.9)**
1301	Region 1, N.B. (Moncton area)	177.8	(158.1–197.4)	*210.8	(189.2–232.4)
1302	Region 2, N.B. (Saint John area)	*277.4	(251.2–303.7)	*277.5	(251.2–303.8)
1303	Region 3, N.B. (Fredericton area)	194.6	(171.6–217.6)	*237.7	(212.8–262.7)
1306	Region 6, N.B. (Bathurst area)	*217.6	(184.7–250.4)	170.8	(141.4–200.2)
	Quebec	***194.5**	**(191.2–197.9)**	**..**	**.. ..**
2401	Bas-Saint-Laurent	*197.5	(178.2–216.8)	..	.. ..
2402	Saguenay-Lac-Saint-Jean	168.6	(152.8–184.3)	..	.. ..
2403	Capitale nationale	*230.2	(218.3–242.1)	..	.. ..
2404	Mauricie et Centre-du-Québec	*217.4	(204.1–230.7)	..	.. ..
2405	Estrie	*247.0	(228.5–265.6)	..	.. ..
2406	Montréal	171.7	(165.4–178.0)	..	.. ..
2407	Outaouais	*106.3	(93.8–118.8)	..	.. ..
2408	Abitibi-Témiscamingue	174.6	(151.6–197.6)	..	.. ..
2409	Côte-Nord	*226.0	(193.5–258.4)	..	.. ..
2411	Gaspésie-Îles-de-la-Madeleine	*307.5	(272.9–342.1)	..	.. ..
2412	Chaudière-Appalaches	*191.9	(177.6–206.3)	..	.. ..
2413	Laval	180.0	(165.5–194.5)	..	.. ..
2414	Lanaudière	*231.0	(215.0–246.9)	..	.. ..
2415	Laurentides	185.0	(172.1–197.9)	..	.. ..
2416	Montérégie	*197.5	(189.5–205.6)	..	.. ..
	Ontario	***164.1**	**(161.6–166.6)**	***174.5**	**(171.9–177.0)**
3501	Erie St. Clair	*119.8	(110.6–128.9)	*121.5	(112.3–130.6)
3502	South West	*110.1	(102.9–117.4)	*112.9	(105.6–120.2)
3503	Waterloo Wellington	*125.7	(116.2–135.3)	*127.4	(117.9–136.9)
3504	Hamilton Niagara Haldimand Brant	172.7	(165.3–180.2)	*200.9	(192.9–208.8)
3505	Central West	*163.0	(151.7–174.2)	183.9	(172.1–195.6)
3506	Mississauga Halton	*157.3	(148.2–166.4)	*167.6	(158.4–176.9)
3507	Toronto Central	*139.5	(131.9–147.1)	*138.4	(130.9–146.0)
3508	Central	*155.0	(147.9–162.2)	*155.8	(148.7–162.8)
3509	Central East	*156.1	(149.0–163.1)	175.2	(167.8–182.6)
3510	South East	*242.4	(228.2–256.6)	*267.6	(252.8–282.3)
3511	Champlain	*191.9	(183.2–200.6)	*195.6	(186.8–204.3)
3512	North Simcoe Muskoka	174.0	(160.6–187.4)	*160.2	(147.6–172.9)
3513	North East	*240.0	(227.1–252.9)	*261.6	(248.1–275.0)
3514	North West	178.9	(160.6–197.1)	191.2	(172.3–210.2)
	Manitoba	***126.0**	**(118.8–133.1)**	***135.6**	**(128.3–143.0)**
4610	Winnipeg	*131.3	(121.6–141.1)	*141.5	(131.6–151.5)
4630	Interlake	*108.0	(83.9–132.2)	*123.0	(97.9–148.1)
4640	Central	*105.5	(82.9–128.0)	*114.8	(91.1–138.5)

Map Code	Health Region	Percutaneous Coronary Intervention 2004–2005 Age-Standardized Rate/100,000	95% CI	2005–2006 Age-Standardized Rate/100,000	95% CI
Saskatchewan		**179.1**	**(170.0–188.1)**	***202.5**	**(192.9–212.2)**
4704	Regina	172.1	(153.9–190.3)	193.6	(174.5–212.8)
4706	Saskatoon	*198.1	(179.6–216.6)	*221.7	(202.1–241.3)
4709	Prince Albert	193.9	(159.1–228.7)	*245.8	(207.0–284.5)
Alberta		***193.6**	**(188.0–199.3)**	***183.2**	**(177.7–188.6)**
4820	Chinook	*136.5	(115.7–157.4)	159.7	(137.1–182.3)
4821	Palliser	165.0	(136.8–193.2)	156.6	(129.5–183.7)
4822	Calgary	*192.0	(182.2–201.7)	*168.1	(159.2–177.1)
4823	David Thompson	183.7	(165.6–201.8)	195.3	(176.7–213.9)
4824	East Central	176.9	(150.9–202.9)	173.9	(148.5–199.4)
4825	Capital	*198.8	(188.7–208.9)	182.0	(172.4–191.5)
4826	Aspen	*224.7	(199.1–250.3)	*215.1	(190.4–239.9)
4827	Peace Country	*239.8	(205.7–273.8)	*275.5	(239.5–311.5)
British Columbia		**180.2**	**(175.9–184.5)**	***185.6**	**(181.3–190.0)**
5911	East Kootenay	169.0	(139.8–198.1)	179.2	(149.4–209.0)
5912	Kootenay Boundary	150.0	(122.9–177.2)	*139.7	(114.2–165.3)
5913	Okanagan	*131.3	(119.0–143.6)	*145.8	(132.9–158.7)
5914	Thompson/Cariboo/Shuswap	*122.8	(107.7–137.9)	*149.0	(132.3–165.7)
5921	Fraser East	*241.0	(220.2–261.9)	*229.8	(209.9–249.8)
5922	Fraser North	*209.1	(195.4–222.8)	*205.2	(191.9–218.5)
5923	Fraser South	*211.7	(199.5–223.9)	*226.8	(213.9–239.8)
5931	Richmond	*115.6	(97.9–133.4)	*121.8	(104.4–139.3)
5932	Vancouver	*134.8	(124.2–145.4)	*134.6	(124.2–145.0)
5933	North Shore	*149.8	(134.6–164.9)	*152.8	(137.6–168.0)
5941	South Vancouver Island	*196.7	(181.7–211.8)	*216.5	(200.9–232.2)
5942	Central Vancouver Island	*227.7	(209.2–246.2)	*226.7	(208.5–244.8)
5943	North Vancouver Island	*243.4	(213.3–273.5)	*245.9	(216.4–275.4)
5951	Northwest	193.4	(156.2–230.5)	191.4	(154.3–228.5)
5952	Northern Interior	183.8	(157.8–209.8)	163.4	(139.2–187.5)
Yukon Territory		**233.7**	**(160.1–307.4)**	**203.4**	**(134.5–272.3)**
Northwest Territories		**200.2**	**(134.0–266.4)**	**156.8**	**(100.5–213.2)**
Nunavut		**120.2**	**(42.0–198.5)**	***85.8**	**(37.9–133.7)**
Canada		**176.7**	**(175.1–178.3)**	**177.9**	**(176.1–179.8)**

Percutaneous coronary intervention

Age-standardized rate of percutaneous coronary intervention (PCI) performed on patients in acute care hospitals, same-day surgery facilities or catheterization laboratories, per 100,000 population aged 20 years and over. In many cases, PCI serves as a non-surgical alternative to coronary artery bypass graft (CABG) surgery and is undertaken for the purpose of opening obstructed coronary arteries. The choice of revascularization mode (that is, PCI or CABG) depends on numerous factors, including physician preferences, availability of services, referral patterns and differences in population health and socio-economic status.

Note: The Canada rate for 2005–2006 does not include Quebec.

Sources: Hospital Morbidity Database, CIHI; Discharge Abstract Database, CIHI; National Ambulatory Care Reporting System, CIHI; Alberta Health and Wellness, Alberta Ambulatory Care Database; ministère de la Santé et des Services sociaux du Québec.

Map Code	Health Region	Coronary Artery Bypass Graft Surgery 2004–2005 Age-Standardized Rate/100,000	2004–2005 95% CI	2005–2006 Age-Standardized Rate/100,000	2005–2006 95% CI
Newfoundland and Labrador		***133.9**	**(123.2–144.6)**	***125.9**	**(115.7–136.1)**
1011	Eastern, N.L.	*143.8	(128.9–158.7)	*112.9	(99.9–125.9)
1012	Central, N.L.	*134.2	(111.4–157.1)	*148.8	(124.8–172.8)
1013	Western, N.L.	94.7	(73.1–116.2)	*117.3	(93.7–140.9)
Prince Edward Island		**78.0**	**(62.2–93.8)**	**81.5**	**(65.6–97.5)**
Nova Scotia		**93.5**	**(86.9–100.2)**	**83.5**	**(77.4–89.7)**
1201	Zone 1, N.S.	92.7	(75.8–109.7)	91.0	(74.5–107.5)
1202	Zone 2, N.S.	82.8	(62.9–102.8)	66.4	(48.2–84.6)
1203	Zone 3, N.S.	104.8	(84.6–125.0)	*58.4	(44.0–72.8)
1204	Zone 4, N.S.	91.2	(71.5–110.9)	81.8	(63.1–100.6)
1205	Zone 5, N.S.	98.7	(81.0–116.3)	101.1	(83.4–118.9)
1206	Zone 6, N.S.	89.8	(79.0–100.6)	84.9	(74.5–95.2)
New Brunswick		**92.2**	**(84.9–99.5)**	***92.0**	**(84.8–99.3)**
1301	Region 1, N.B. (Moncton area)	86.5	(72.4–100.5)	78.6	(65.3–91.9)
1302	Region 2, N.B. (Saint John area)	94.0	(78.6–109.4)	*101.5	(85.4–117.6)
1303	Region 3, N.B. (Fredericton area)	91.1	(75.2–107.0)	93.6	(77.7–109.5)
1306	Region 6, N.B. (Bathurst area)	70.1	(51.4–88.7)	79.4	(59.7–99.2)
Quebec		***91.5**	**(89.2–93.7)**	***81.9**	**(79.8–84.0)**
2401	Bas-Saint-Laurent	96.4	(82.9–110.0)	81.8	(69.7–94.0)
2402	Saguenay-Lac-Saint-Jean	*70.7	(60.4–81.0)	75.5	(65.0–85.9)
2403	Capitale nationale	*99.3	(91.5–107.1)	87.0	(79.8–94.2)
2404	Mauricie et Centre-du-Québec	*97.9	(89.0–106.8)	*72.0	(64.5–79.5)
2405	Estrie	*73.6	(63.4–83.8)	*67.6	(58.0–77.2)
2406	Montréal	*80.6	(76.3–84.9)	*75.5	(71.3–79.7)
2407	Outaouais	*68.3	(58.2–78.4)	*58.9	(49.7–68.2)
2408	Abitibi-Témiscamingue	102.8	(84.7–120.8)	92.6	(75.6–109.5)
2409	Côte-Nord	94.7	(73.3–116.1)	80.6	(61.3–99.8)
2411	Gaspésie-Îles-de-la-Madeleine	*109.2	(89.0–129.4)	*117.2	(96.6–137.8)
2412	Chaudière-Appalaches	91.1	(81.1–101.1)	74.9	(66.0–83.9)
2413	Laval	85.9	(75.9–95.9)	75.9	(66.6–85.3)
2414	Lanaudière	*101.7	(91.0–112.4)	88.6	(78.9–98.4)
2415	Laurentides	91.7	(82.5–100.8)	89.9	(80.9–98.8)
2416	Montérégie	*109.4	(103.3–115.5)	*99.3	(93.5–105.0)
Ontario		***90.8**	**(89.0–92.7)**	***88.0**	**(86.2–89.8)**
3501	Erie St. Clair	82.0	(74.4–89.6)	*101.5	(93.1–110.0)
3502	South West	84.5	(78.1–90.8)	*90.4	(83.9–96.9)
3503	Waterloo Wellington	82.9	(75.0–90.8)	*98.1	(89.6–106.6)
3504	Hamilton Niagara Haldimand Brant	*106.1	(100.3–111.9)	*99.9	(94.3–105.5)
3505	Central West	*108.9	(99.4–118.3)	*92.7	(84.2–101.2)
3506	Mississauga Halton	*107.0	(99.4–114.7)	*93.6	(86.6–100.6)
3507	Toronto Central	*66.7	(61.5–72.0)	*61.6	(56.5–66.7)
3508	Central	83.4	(78.1–88.7)	80.0	(74.9–85.1)
3509	Central East	87.7	(82.4–93.1)	86.4	(81.1–91.6)
3510	South East	*115.4	(105.6–125.2)	*115.0	(105.3–124.7)
3511	Champlain	*71.1	(65.7–76.5)	*65.8	(60.7–71.0)
3512	North Simcoe Muskoka	*105.1	(94.7–115.6)	93.0	(83.3–102.7)
3513	North East	83.4	(75.8–91.0)	*68.4	(61.6–75.2)
3514	North West	*144.3	(127.7–160.9)	*141.4	(125.0–157.8)
Manitoba		**86.5**	**(80.5–92.4)**	**87.7**	**(81.7–93.6)**
4610	Winnipeg	87.8	(79.8–95.9)	82.3	(74.5–90.1)
4630	Interlake	89.9	(68.1–111.7)	69.7	(50.5–88.9)
4640	Central	86.1	(65.4–106.8)	99.3	(77.0–121.6)

Map Code	Health Region	Coronary Artery Bypass Graft Surgery 2004–2005 Age-Standardized Rate/100,000	95% CI	2005–2006 Age-Standardized Rate/100,000	95% CI
Saskatchewan		**†111.0**	**(103.8–118.1)**	**†110.9**	**(103.7–118.1)**
4704	Regina	†125.6	(109.8–141.4)	†115.3	(100.4–130.3)
4706	Saskatoon	97.2	(84.1–110.3)	92.2	(79.5–105.0)
4709	Prince Albert	80.5	(58.0–103.0)	†120.3	(93.4–147.2)
Alberta		**†72.1**	**(68.5–75.6)**	**†71.7**	**(68.3–75.2)**
4820	Chinook	†66.2	(51.4–81.1)	†65.9	(51.3–80.6)
4821	Palliser	†44.8	(30.0–59.6)	78.9	(59.6–98.1)
4822	Calgary	†61.3	(55.7–66.9)	†59.2	(53.7–64.6)
4823	David Thompson	†76.2	(64.2–88.1)	78.2	(66.3–90.1)
4824	East Central	†64.6	(48.7–80.5)	75.2	(58.4–92.1)
4825	Capital	82.2	(75.6–88.8)	81.6	(75.1–88.2)
4826	Aspen	96.8	(79.9–113.8)	81.4	(65.9–96.8)
4827	Peace Country	76.2	(56.6–95.8)	75.6	(56.0–95.2)
British Columbia		**†73.3**	**(70.5–76.1)**	**†69.6**	**(66.9–72.3)**
5911	East Kootenay	76.4	(56.6–96.2)	†58.5	(41.3–75.7)
5912	Kootenay Boundary	83.1	(63.2–103.0)	†65.8	(48.3–83.4)
5913	Okanagan	†64.4	(55.9–73.0)	†72.2	(63.4–81.0)
5914	Thompson/Cariboo/Shuswap	†68.5	(57.1–80.0)	†70.6	(59.2–82.1)
5921	Fraser East	79.2	(67.2–91.2)	†68.0	(56.9–79.0)
5922	Fraser North	†76.8	(68.3–85.3)	†74.7	(66.5–82.9)
5923	Fraser South	81.0	(73.4–88.6)	87.1	(79.0–95.2)
5931	Richmond	†60.2	(47.0–73.3)	†56.4	(44.4–68.5)
5932	Vancouver	†54.9	(48.0–61.8)	†50.9	(44.4–57.5)
5933	North Shore	84.0	(72.5–95.5)	74.5	(63.8–85.1)
5941	South Vancouver Island	†70.9	(61.7–80.0)	†61.9	(53.6–70.3)
5942	Central Vancouver Island	†77.1	(66.5–87.8)	†70.7	(60.5–80.9)
5943	North Vancouver Island	83.4	(65.8–101.0)	†62.2	(47.1–77.3)
5951	Northwest	107.7	(79.0–136.4)	101.6	(73.7–129.4)
5952	Northern Interior	†71.7	(55.0–88.3)	†62.2	(46.9–77.5)
Yukon Territory		**100.4**	**(52.1–148.7)**	**55.1**	**(22.7–87.5)**
Northwest Territories		**94.9**	**(45.1–144.8)**	**†49.8**	**(17.9–81.8)**
Nunavut		**†30.4**	**(3.6–57.2)**	*****	*** ***
Canada		**88.4**	**(87.3–89.5)**	**83.8**	**(82.7–84.8)**

Coronary artery bypass graft surgery

Age-standardized rate of coronary artery bypass graft surgery (CABG) performed on inpatients in acute care hospitals, per 100,000 population aged 20 and over. As with other types of surgical procedures, variations in CABG surgery rates can be attributed to numerous factors, including differences in population demographics and health status, physician practice patterns and availability of services. In some cases, percutaneous coronary intervention (an alternative intervention to improve blood flow to the heart muscle) may be used. Variations in the extent to which this procedure is utilized may result in variations in bypass surgery.

Sources: Hospital Morbidity Database, CIHI; Discharge Abstract Database, CIHI; ministère de la Santé et des Services sociaux du Québec.

Map Code	Health Region	Inflow/Outflow Ratio, 2005–2006 Overall	Hip Replacement	Knee Replacement	Hysterectomy	Percutaneous Coronary Intervention	Bypass Surgery
	Newfoundland and Labrador	..	..	..	..	..	..
1011	Eastern, N.L.	1.14	1.13	1.08	1.14	1.55	1.97
1012	Central, N.L.	0.87	0.98	0.95	0.80	0.00	0.00
1013	Western, N.L.	0.93	0.93	1.13	1.01	0.00	0.00
	Prince Edward Island	**0.94**	**0.91**	**0.99**	**0.96**	**0.00**	**0.00**
	Nova Scotia	..	..	..	..	..	..
1201	Zone 1, N.S.	0.72	0.00	0.00	0.81	0.00	0.00
1202	Zone 2, N.S.	1.02	2.51	2.32	1.19	0.00	0.00
1203	Zone 3, N.S.	0.64	0.00	0.00	0.81	0.00	0.00
1204	Zone 4, N.S.	0.84	0.91	1.04	0.96	0.00	0.00
1205	Zone 5, N.S.	0.94	1.11	1.04	0.76	0.00	0.00
1206	Zone 6, N.S.	1.46	1.35	1.37	1.27	2.89	3.15
	New Brunswick	..	..	..	..	..	..
1301	Region 1, N.B. (Moncton area)	1.10	1.24	1.22	1.13	0.00	0.00
1302	Region 2, N.B. (Saint John area)	1.15	0.99	0.99	0.98	3.39	3.52
1303	Region 3, N.B. (Fredericton area)	0.94	1.06	1.08	0.97	0.00	0.00
1306	Region 6, N.B. (Bathurst area)	0.97	1.00	0.86	0.99	0.00	0.00
	Quebec	..	..	..	..	..	..
2401	Bas-Saint-Laurent	0.92	0.91	0.93	1.02	..	0.00
2402	Saguenay-Lac-Saint-Jean	1.01	0.99	1.02	1.03	..	1.00
2403	Capitale nationale	1.34	1.23	1.24	1.20	..	2.32
2404	Mauricie et Centre-du-Québec	0.87	1.07	1.06	0.92	..	0.00
2405	Estrie	1.07	0.62	0.58	0.99	..	1.53
2406	Montréal	1.39	1.65	1.56	1.57	..	2.98
2407	Outaouais	0.81	0.78	0.89	0.48	..	0.00
2408	Abitibi-Témiscamingue	0.97	1.04	1.02	1.03	..	0.00
2409	Côte-Nord	0.78	0.50	0.60	0.84	..	0.00
2411	Gaspésie-Îles-de-la-Madeleine	0.75	0.67	0.72	0.69	..	0.00
2412	Chaudière-Appalaches	0.75	0.91	0.91	0.92	..	0.00
2413	Laval	0.78	0.44	0.69	0.73	..	0.00
2414	Lanaudière	0.73	0.56	0.56	0.70	..	0.00
2415	Laurentides	0.81	0.61	0.57	0.64	..	0.00
2416	Montérégie	0.78	0.60	0.66	0.78	..	0.00
	Ontario	..	..	..	..	..	..
3501	Erie St. Clair	0.88	0.91	0.94	0.90	0.00	0.00
3502	South West	1.09	0.93	0.90	1.10	1.35	1.47
3503	Waterloo Wellington	0.94	1.08	1.15	0.94	1.50	1.14
3504	Hamilton Niagara Haldimand Brant	1.00	0.97	0.96	1.02	0.93	0.92
3505	Central West	0.74	0.76	0.71	0.75	0.00	0.00
3506	Mississauga Halton	0.94	0.90	0.97	0.76	1.27	1.37
3507	Toronto Central	1.80	2.23	2.21	2.34	3.85	5.05
3508	Central	0.94	0.97	0.99	0.92	0.75	0.82
3509	Central East	0.87	0.76	0.89	0.86	0.37	0.00
3510	South East	0.95	1.03	1.00	0.95	0.95	0.94
3511	Champlain	1.10	0.99	1.00	1.16	1.17	1.46
3512	North Simcoe Muskoka	0.90	0.75	0.74	0.95	0.00	0.00
3513	North East	0.95	0.65	0.74	0.94	0.96	0.88
3514	North West	0.92	0.88	0.93	0.86	0.00	0.00
	Manitoba	..	..	..	..	..	..
4610	Winnipeg	1.37	1.63	1.55	1.55	1.77	2.01
4630	Interlake	0.61	0.00	0.00	0.21	0.00	0.00
4640	Central	0.79	0.73	0.39	0.24	0.00	0.00

Map Code	Health Region	Inflow/Outflow Ratio, 2005–2006 Overall	Hip Replacement	Knee Replacement	Hysterectomy	Percutaneous Coronary Intervention	Bypass Surgery
Saskatchewan		..	..	..	..	..	..
4704	Regina	1.20	1.48	1.54	1.27	1.92	2.40
4706	Saskatoon	1.41	1.93	2.00	1.46	1.86	1.70
4709	Prince Albert	0.89	0.64	0.52	0.53	0.00	0.00
Alberta		..	..	..	..	..	..
4820	Chinook	0.94	0.99	1.21	1.13	0.00	0.00
4821	Palliser	*	*	*	*	0.00	0.00
4822	Calgary	1.09	1.09	1.06	1.06	1.60	1.70
4823	David Thompson	0.87	0.72	0.70	0.66	0.00	0.00
4824	East Central	0.67	0.50	0.69	0.59	0.00	0.00
4825	Capital	1.26	1.32	1.30	1.34	1.79	1.64
4826	Aspen	0.75	0.29	0.38	0.21	0.00	0.00
4827	Peace Country	0.89	0.75	0.71	0.88	0.00	0.00
British Columbia		..	..	..	..	..	..
5911	East Kootenay	0.82	0.61	0.65	0.74	0.00	0.00
5912	Kootenay Boundary	0.86	0.81	0.94	0.70	0.00	0.00
5913	Okanagan	1.02	0.98	1.09	1.04	0.00	0.00
5914	Thompson/Cariboo/Shuswap	0.91	0.73	0.61	1.01	0.00	0.00
5921	Fraser East	0.87	0.81	0.89	0.89	0.00	0.00
5922	Fraser North	1.03	0.90	1.04	0.87	2.29	1.79
5923	Fraser South	0.79	0.67	0.74	0.74	0.00	0.00
5931	Richmond	0.92	1.69	2.10	1.01	0.00	0.00
5932	Vancouver	1.67	2.39	1.38	2.04	4.63	5.96
5933	North Shore	0.85	1.08	1.20	0.84	0.00	0.00
5941	South Vancouver Island	1.18	0.94	0.95	1.07	2.30	2.58
5942	Central Vancouver Island	0.84	0.75	0.84	0.88	0.00	0.00
5943	North Vancouver Island	0.89	1.20	1.26	1.03	0.00	0.00
5951	Northwest	0.83	0.45	0.44	0.94	0.00	0.00
5952	Northern Interior	0.95	0.85	0.90	0.81	0.00	0.00
Yukon Territory		**0.89**	**0.00**	**0.44**	**1.00**	**0.00**	**0.00**
Northwest Territories		**0.99**	**0.96**	**1.29**	**1.03**	**0.00**	**0.00**
Nunavut		**0.43**	**0.00**	**0.00**	**0.52**	**0.00**	**0.00**
Canada		..	..	..	..	..	..

Inflow/outflow ratio

A ratio of the number of discharges from relevant facilities (acute care/same-day surgery) within a given region divided by the number of discharges generated by residents of that region. An overall ratio is calculated for discharges associated with any diagnosis or procedure for acute care discharges only, and separately for hip replacement, knee replacement, hysterectomy, percutaneous coronary intervention and coronary artery bypass surgery procedures from all relevant facilities. A ratio of less than one indicates that health care utilization by residents of a region exceeded care provided within that region, suggesting an outflow effect. A ratio greater than one indicates that care provided by a region exceeded the utilization by its residents, suggesting an inflow effect. A ratio of one indicates that care provided by a region is equivalent to the utilization by its residents, suggesting that inflow and outflow activity, if it exists at all, is balanced. A ratio of zero is an indication that none of the institutions in the region provided the service and residents received care outside of their region.

Sources: Discharge Abstract Database, CIHI; National Ambulatory Care Reporting System, CIHI; Alberta Acute Care Database, Alberta Health and Wellness; Alberta Ambulatory Care Database, Alberta Health and Wellness; ministère de la Santé et des Services sociaux du Québec.

Map Code	Health Region	General/Family Physicians 2005 Rate/100,000	General/Family Physicians 2005 95% CI	Specialist Physicians 2005 Rate/100,000	Specialist Physicians 2005 95% CI
	Newfoundland and Labrador	**98**	**(90–107)**	**94**	**(86–103)**
1011	Eastern, N.L.	102	(91–114)	123	(110–135)
1012	Central, N.L.	96	(77–116)	59	(44–75)
1013	Western, N.L.	89	(69–110)	57	(41–74)
	Prince Edward Island	**89**	**(73–105)**	**55**	**(43–67)**
	Nova Scotia	**117**	**(111–124)**	**100**	**(94–106)**
1201	Zone 1, N.S.	99	(82–117)	36	(25–46)
1202	Zone 2, N.S.	93	(72–114)	74	(55–92)
1203	Zone 3, N.S.	94	(75–112)	37	(25–48)
1204	Zone 4, N.S.	99	(79–119)	49	(35–63)
1205	Zone 5, N.S.	115	(97–133)	59	(46–72)
1206	Zone 6, N.S.	140	(128–151)	167	(155–180)
	New Brunswick	**102**	**(95–109)**	**70**	**(64–76)**
1301	Region 1, N.B. (Moncton area)	105	(91–120)	94	(80–107)
1302	Region 2, N.B. (Saint John area)	95	(81–110)	91	(77–105)
1303	Region 3, N.B. (Fredericton area)	94	(79–108)	56	(45–67)
1306	Region 6, N.B. (Bathurst area)	97	(76–119)	49	(34–64)
	Quebec	**109**	**(107–112)**	**106**	**(104–108)**
2401	Bas-Saint-Laurent	123	(108–139)	84	(72–97)
2402	Saguenay-Lac-Saint-Jean	104	(92–116)	73	(63–83)
2403	Capitale nationale	149	(140–158)	170	(160–180)
2404	Mauricie et Centre-du-Québec	88	(80–96)	68	(60–75)
2405	Estrie	138	(125–151)	118	(106–130)
2406	Montréal	124	(119–129)	200	(193–206)
2407	Outaouais	90	(80–100)	51	(43–58)
2408	Abitibi-Témiscamingue	116	(98–133)	69	(55–82)
2409	Côte-Nord	134	(111–157)	51	(37–65)
2411	Gaspésie-Îles-de-la-Madeleine	166	(140–192)	60	(45–76)
2412	Chaudière-Appalaches	98	(88–108)	62	(54–69)
2413	Laval	87	(77–96)	67	(59–76)
2414	Lanaudière	82	(73–91)	50	(43–56)
2415	Laurentides	94	(85–102)	45	(39–50)
2416	Montérégie	90	(85–95)	59	(55–63)
	Ontario	**85**	**(83–87)**	**92**	**(91–94)**
3501	Erie St. Clair	61	(55–67)	53	(48–59)
3502	South West	81	(75–87)	100	(93–106)
3503	Waterloo Wellington	76	(69–82)	55	(49–60)
3504	Hamilton Niagara Haldimand Brant	74	(70–79)	91	(86–96)
3505	Central West	58	(53–64)	43	(38–48)
3506	Mississauga Halton	71	(66–76)	55	(51–60)
3507	Toronto Central	145	(138–152)	279	(269–288)
3508	Central	80	(75–84)	66	(62–70)
3509	Central East	67	(63–71)	55	(51–59)
3510	South East	99	(90–108)	105	(96–114)
3511	Champlain	108	(102–114)	130	(124–137)
3512	North Simcoe Muskoka	85	(76–93)	48	(42–55)
3513	North East	90	(83–98)	58	(52–65)
3514	North West	96	(84–109)	54	(44–63)
	Manitoba	**94**	**(88–99)**	**86**	**(80–91)**
4610	Winnipeg	99	(92–107)	138	(129–147)
4630	Interlake	75	(56–94)	18	(8–27)
4640	Central	88	(69–106)	15	(7–22)

Map Code	Health Region	General/Family Physicians 2005 Rate/100,000	General/Family Physicians 2005 95% CI	Specialist Physicians 2005 Rate/100,000	Specialist Physicians 2005 95% CI
Saskatchewan		**88**	**(83–94)**	**67**	**(62–72)**
4704	Regina	103	(90–116)	80	(69–91)
4706	Saskatoon	101	(90–113)	135	(122–149)
4709	Prince Albert	83	(62–103)	40	(26–54)
Alberta		**103**	**(100–107)**	**88**	**(84–91)**
4820	Chinook	92	(77–107)	52	(40–63)
4821	Palliser	88	(70–107)	42	(29–54)
4822	Calgary	109	(103–115)	110	(104–115)
4823	David Thompson	91	(81–102)	33	(26–39)
4824	East Central	75	(59–91)	11	(5–17)
4825	Capital	114	(107–120)	124	(117–131)
4826	Aspen	88	(74–102)	4	(1–7)
4827	Peace Country	84	(68–99)	26	(17–35)
British Columbia		**111**	**(108–114)**	**89**	**(86–91)**
5911	East Kootenay	131	(106–155)	23	(13–33)
5912	Kootenay Boundary	134	(109–160)	45	(30–59)
5913	Okanagan	107	(96–119)	81	(72–91)
5914	Thompson/Cariboo/Shuswap	95	(82–108)	47	(38–56)
5921	Fraser East	87	(76–98)	39	(32–47)
5922	Fraser North	84	(76–91)	72	(65–79)
5923	Fraser South	76	(69–82)	45	(40–51)
5931	Richmond	82	(68–95)	63	(52–75)
5932	Vancouver	167	(157–177)	257	(244–270)
5933	North Shore	121	(108–134)	62	(53–71)
5941	South Vancouver Island	152	(139–165)	123	(111–135)
5942	Central Vancouver Island	111	(98–124)	58	(49–68)
5943	North Vancouver Island	127	(107–147)	56	(43–70)
5951	Northwest	123	(100–147)	23	(12–33)
5952	Northern Interior	110	(93–126)	43	(33–53)
Yukon Territory		**184**	**(136–232)**	**23**	**(6–39)**
Northwest Territories		**70**	**(45–95)**	**33**	**(16–50)**
Nunavut		**43**	**(20–67)**	*	* *
Canada		**98**	**(97–99)**	**93**	**(92–94)**

Physicians

Physician counts include all active general/family practitioners and specialist physicians as of December 31 of the reference year. Physicians in clinical and non-clinical practice are included. Residents and unlicensed physicians who have requested that their information not be published are excluded. For all jurisdictions and data years, specialist physicians include certificants of the Royal College of Physicians and Surgeons of Canada (RCPSC) and/or the College des médecins du Québec (CMQ). As of 2004, specialists in Saskatchewan and Newfoundland and Labrador also include physicians who are licensed as specialists, but who are not certified by the RCPSC or the CMQ (that is, non-certified specialists). For all other jurisdictions, and for Saskatchewan and Newfoundland and Labrador prior to 2004, non-certified specialists are counted as general practitioners. With the exception of the criteria just noted, all other physicians are counted as family practitioners, including certificants of the College of Family Physicians of Canada. For further methodological information, please see *Supply, Distribution and Migration of Canadian Physicians and Certified and Non-Certified Specialists: Understanding the Numbers* (www.cihi.ca). Physician-to-population rates are published by a variety of agencies to support health human resource planning. They are useful indicators of physician numbers relative to the population. However, results may vary across publication sources due to differing methodologies, and readers are cautioned to avoid inferences regarding the adequacy of provider resources based on supply ratios alone.
Source: Scott's Medical Database, CIHI.

Selected Health Professionals,† 2005

	RNs	LPNs	Pharmacists	Dentists	Dental Hygienists	Dietitians	Occupational Therapists	Physio–therapists	Chiro-practors	Optome–trists	Psycho–logists
N.L.	1,068	524	114	32	18	28	25	38	10	8	38
P.E.I.	1,044	439	116	45	42	46	24	35	6	13	20
N.S.	932	334	114	53	55	47	33	56	10	9	44
N.B.	999	351	83	40	38	42	33	57	8	13	35
Que.	837	214	89	53	54	30	43	48	15	16	99
Ont.	710	194	83	63	66	21	32	42	28	11	24
Man.	956	220	98	49	51	29	39	52	23	8	14
Sask.	863	221	119	37	35	25	22	54	19	12	42
Alta.	797	161	106	55	56	23	38	58	26	12	51
B.C.	650	114	92	67	52	21	34	59	22	10	22
Y.T.	970	180	106	122	51	26	42	..	26	13	..
N.W.T.	1,315 }	238	59	125	33	26	24	..	..	..	209
Nun.		..	53	33	..	7	..	..	..	..	..
Canada	**776**	**200**	**91**	**58**	**57**	**25**	**35**	**49**	**22**	**12**	**45**

† Rates per 100,000 population.

Self-Reported Contacts With Health Professionals, 2005

	Contact With Medical Doctors		Contact With Dental Professionals		Contact With Alternative Health Care Providers	
	%	95% CI	%	95% CI	%	95% CI
N.L.	83.8	(82.2–85.4)	48.3	(46.2–50.5)	5.8	(4.8–6.8)
P.E.I.	84.0	(82.1–85.9)	61.4	(58.8–63.9)	7.8	(6.2–9.4)
N.S.	85.5	(84.2–86.7)	60.0	(58.3–61.8)	9.5	(8.3–10.8)
N.B.	81.9	(80.5–83.3)	55.4	(53.6–57.1)	8.4	(7.4–9.4)
Que.	75.4	(74.6–76.1)	57.3	(56.5–58.1)	14.7	(14.1–15.4)
Ont.	81.5	(80.9–82.0)	69.7	(69.0–70.3)	12.0	(11.5–12.5)
Man.	80.2	(78.6–81.8)	60.7	(59.1–62.4)	14.0	(12.8–15.2)
Sask.	82.3	(81.1–83.6)	58.0	(56.5–59.4)	18.5	(17.2–19.8)
Alta.	80.7	(79.7–81.7)	61.8	(60.5–63.1)	17.4	(16.3–18.4)
B.C.	82.7	(81.9–83.6)	65.3	(64.2–66.3)	15.8	(15.0–16.7)
Y.T.	78.0	(74.2–81.7)	53.5	(48.8–58.2)	20.2	(16.6–23.8)
N.W.T.	74.8	(70.0–79.7)	66.9	(63.2–70.7)	15.1	(11.5–18.7)
Nun.	57.5	(50.9–64.2)	56.4	(50.8–61.9)	*	* *
Canada	**80.2**	**(79.9–80.6)**	**63.7**	**(63.3–64.1)**	**13.7**	**(13.4–14.0)**

Total Health Expenditure

	Current Dollars ($' 000,000)			% GDP	% Public Sector	By Use of Funds (Percentage Distribution of $' 000,000), 2004				
	Actual 2004	Forecast 2005	Forecast 2006	2004	2004	Institutional Services	Professional Services	Drugs	Public Health	Capital and Other Health
N.L.	2,124	2,192	2,268	10.9	76.8	50.5	19.2	16.1	4.5	9.6
P.E.I.	536	562	586	13.3	70.4	47.1	20.2	16.9	6.1	9.8
N.S.	3,726	4,009	4,304	12.5	69.6	46.2	22.4	17.5	2.1	11.8
N.B.	2,984	3,144	3,330	13.0	71.1	46.2	20.7	17.4	3.3	12.4
Que.	27,592	29,051	30,381	10.4	71.7	43.1	21.2	19.7	2.8	13.3
Ont.	53,298	56,740	60,360	10.3	67.0	37.2	24.8	17.0	6.6	14.4
Man.	5,226	5,509	5,798	13.1	74.6	43.0	21.6	13.5	6.7	15.3
Sask.	4,121	4,378	4,693	10.3	75.4	39.8	21.7	15.0	8.8	14.7
Alta.	13,832	15,225	16,225	7.4	72.0	37.5	24.1	14.1	8.1	16.2
B.C.	17,165	18,205	19,232	10.9	71.5	38.9	28.3	14.0	4.6	14.2
Y.T.	169	201	207	11.9	79.0	37.0	18.9	11.2	16.3	16.6
N.W.T.	299	308	318	7.2	89.9	47.2	17.3	6.9	7.9	20.7
Nun.	309	312	311	29.3	95.5	35.4	13.5	4.5	8.2	38.4
Canada	**131,380**	**139,836**	**148,014**	**10.2**	**70.1**	**39.7**	**23.9**	**16.6**	**5.5**	**14.3**

Health professionals

Number of health professionals (selected professions) per 100,000 population. **Nursing professionals (RNs, LPNs)**: Rates reflect nurses registered with active-practising status and who are employed in registered/practical nursing. Rates will differ from data published by provincial/territorial regulatory authorities due to the CIHI collection, processing and reporting methodology. **Registered nurses (RNs)**: Data from the territories include secondary registrations. Please consult *Workforce Trends of Registered Nurses in Canada, 2005* for more detailed methodological notes and data quality issues. **Other health professional** data reflect personnel regardless of employment status and include the number of licensed pharmacists, licensed dentists, registered dental hygienists, registered dietitians, active registered occupational therapists, active registered physiotherapists, registered chiropractors, active registered optometrists and active registered psychologists. Personnel-per-population ratios are revised annually using the most recent Statistics Canada population estimates and therefore may differ slightly from previously published figures. Please consult *Health Personnel Trends in Canada, 1995 to 2004* for more detailed methodological notes, data quality issues and profession-specific information.
Sources: Health Personnel Database, CIHI; Registered Nurses Database, CIHI; Licensed Practical Nurses Database, CIHI.

Contact with medical doctors

Proportion of household population aged 12 and over reporting that they have consulted with a medical doctor in the past 12 months. Medical doctor includes family or general practitioners, as well as specialists such as surgeons, allergists, orthopedists, gynecologists or psychiatrists. For population aged 12 to 17, includes pediatricians.
Source: Statistics Canada, Canadian Community Health Survey, 2005.

Contact with dental professionals

Proportion of household population aged 12 and over reporting that they have consulted with a dental professional in the past 12 months. Dental professionals include dentists or orthodontists.
Source: Statistics Canada, Canadian Community Health Survey, 2005.

Contact with alternative health care providers

Proportion of household population aged 12 and over reporting that they have consulted with alternative health care providers in the past 12 months. Alternative health care providers include massage therapists, acupuncturists, homeopaths or naturopaths, Feldenkrais or Alexander teachers, relaxation therapists, biofeedback teachers, rolfers, herbalists, reflexologists, spiritual healers, religious healers, etc.
Source: Statistics Canada, Canadian Community Health Survey, 2005.

Total health expenditure

Total health expenditure includes any type of expenditure for which the primary objective is to improve, or prevent the deterioration of, health status. Presented in current dollars and as a proportion of gross domestic product (GDP). This definition allows economic activities to be measured according to primary purpose and secondary effects. Activities that are undertaken with the direct purpose of providing or maintaining health are included. Other activities are not included, even though they may impact health. For example, funds aligning with housing and income support policies that have social welfare goals as their primary purpose are not considered to be health expenditure, yet they are recognized as powerful factors in determining population health.
Source: National Health Expenditure Database, CIHI.

Proportion of public sector

Public-sector health expenditure presented as a proportion of total health expenditure. Public sector includes health care spending by governments and government agencies.
Source: National Health Expenditure Database, CIHI.

Total health expenditure by use of funds

Percentage distribution of total health expenditure by health-spending category. **Institutional services** include hospitals and residential care types of facilities that are approved, funded or operated by provincial and territorial governments. **Professional services** include expenditures on primary professional fees paid to physicians in private service, as well as for the services of privately practising dentists, denturists, chiropractors and other health professionals. This category does not include the remuneration of health professionals on the payrolls of hospitals or public-sector health agencies and generally represents amounts that flow through provincial medical care plans. **Drugs** include expenditures on prescribed drugs and non-prescribed products purchased in retail stores. This category does not include drugs dispensed in hospitals and other institutions. **Public health** is that provided by governments and governmental agencies and includes expenditures for items such as food and drug safety, health inspections, health promotion, community mental health programs, public health nursing, measures to prevent the spread of communicable diseases and other related activities. **Capital and other health** includes expenditure on construction, machinery, equipment and some software of hospitals, clinics, first-aid stations and residential care facilities (capital); cost of providing health insurance programs by the government and private health insurance companies and all costs for the infrastructure to operate health departments (administration expenditures); other health includes, at the aggregate level, expenditures on home care, medical transportation (ambulances), hearing aids, other appliances and prostheses, health research and miscellaneous health care.
Source: National Health Expenditure Database, CIHI.

General Notes

- The methodology used for these indicators was designed to maximize inter-regional, interprovincial and inter-territorial comparability given the characteristics of available national data sets. For this reason, there may be differences between definitions, data sources and extraction procedures used in some local, regional, provincial or territorial reports when compared to those described here. In addition, discrepancies may exist due to ongoing updates to the databases. Data presented here include the latest updates available at the time of publication.
- Health regions are defined by provincial governments as areas of responsibility for regional health boards (that is, legislated) or as regions of interest to health care authorities. Data from regions with a population of at least 75,000 are reported. This threshold ensures greater stability in rates and reduces the risk of suppression stemming from privacy and confidentiality issues. Boundaries are those that were in effect as of June 2005—with the exception of Ontario regions, which are current as of August 2005, and New Brunswick regions, which are current as of February 2006.
- Data are based on a patient's region of residence, which may not be the same as the region of hospitalization.
- Hospitalizations include discharges and deaths for inpatients in acute care hospitals for the reference period. Same-day surgery (out-patient) cases and patients admitted to non–acute care hospitals (for example, chronic care, psychiatric or rehabilitation facilities) are not included in the totals unless otherwise specified.
- For procedure-derived indicators (for example, hip and knee replacement, percutaneous coronary intervention and coronary artery bypass), rates are based on the total number of discharges rather than the total number of interventions. For example, a bilateral knee replacement provided at the same admission is counted as one event. Procedure-derived indicators include discharges from acute care hospitals as well as same-day surgery facilities, where applicable.
- The ICD-10-CA (International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Canada) and CCI (Canadian Classification of Health Interventions) came into effect in 2001; by April 1, 2004, they had been adopted by all provinces and territories with the exception of Quebec. Indicator cases that were originally coded in ICD-10-CA or CCI were extracted on the relevant codes and not the ICD-9 or CCP translations. New and revised coding standards introduced with the ICD-10-CA/CCI classification systems may affect the comparability of rates with those appearing in previous releases for some of the indicators.
- The 30-day in-hospital mortality, in-hospital hip fracture and readmission indicator rates are based on a three-year average. Due to differences in the way data are collected, these indicators are not available for all provinces and territories. Therefore, the average (Canada) rate does not include all jurisdictions.
- Hospitalization data for 2004–2005 for Region 6 in New Brunswick were incomplete, and several indicators—including hip and knee replacement, hip fracture, injury hospitalization, ambulatory care sensitive conditions (ACSC), Caesarean section and hysterectomy—could not be calculated for this region. For these indicators, 2004–2005 New Brunswick provincial rates exclude Region 6 cases, and therefore may not be comparable with the rates of other years.
- Hospitalization data for 2005–2006 for Palliser Health Region in Alberta were incomplete, and several indicators—including hip and knee replacement, hip fracture, injury hospitalization, ambulatory care sensitive conditions (ACSC), hysterectomy, as well as inflow/outflow indicator for hip and knee replacement, hysterectomy and overall—could not be calculated for this region.
- Standardized rates are adjusted by age (collapsed to five-year groupings) using a direct method of standardization based on the July 1, 1991, Canadian population.
- See the *Health Indicators* e-publication (www.cihi.ca/indicators or www.statcan.ca) for diagnosis and procedure codes used to extract the indicator data, detailed definitions and technical notes. Indicator rates for years prior to those appearing in this publication are also available in the e-publication.

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