## Summary of Revisions to Avoidable Mortality Indicators, 2022

**Enteritis and other diarrhoeal diseases:** Changed description to "intestinal infectious diseases" to align with ICD-10 code descriptions.

**Tuberculosis:** Changed allocation to 50% treatable and 50% preventable to align with the Organisation for Economic Co-operation and Development (OECD) definition, which states that the reduction in deaths from tuberculosis has been achieved about evenly through greater prevention (reduction in incidence) and earlier detection and more effective treatment (higher survival rates). Original allocation was 100% treatable.

**Malaria:** Changed allocation to preventable to align with the OECD definition, which states that this condition is preventable and will not require treatment if prevented. Original allocation was 100% treatable.

**Meningitis:** Revised code selection to add ICD-10 code G03 and ICD-9 code 322 *Meningitis due to other and unspecified causes.* 

**Non-melanoma skin cancer:** Removed condition and corresponding codes (ICD-10: C44; ICD-9: 173) to align with the OECD definition, which states that there is a lack of evidence of preventability and insufficient evidence of treatability.

**Cervical cancer:** Changed allocation to 50% treatable and 50% preventable to align with the OECD definition, which states that cervical cancer can be prevented through vaccination; screening can also find pre-cancerous abnormalities that can be treated to prevent cancer. 5-year survival after cancer detection is also relatively high and rising. Original allocation was 100% treatable.

**Bladder cancer:** Changed allocation to preventable to align with the OECD definition, which states that this condition can be largely prevented through preventive measures (e.g., reduction in smoking). Original allocation was 100% treatable.

**Leukemia:** Revised code selection to remove ICD-10 code C92.1 and ICD-9 code 205.1 *Chronic myeloid leukaemia* to align with the OECD definition, which states that there is a lack of evidence of preventability and insufficient evidence of treatability. Also removed age limit of <45.



**Rheumatic heart disease:** Revised code selection to add ICD-10 code I00 and ICD-9 code 390 *Rheumatic fever without mention of heart involvement.* Changed description to "rheumatic fever and rheumatic heart disease" to reflect revised codes. Changed allocation to treatable to align with the OECD definition, which states that case-fatality rates can be reduced through appropriate treatment. Original allocation was 100% preventable.

**Hypertensive disease:** Changed allocation to 50% treatable and 50% preventable to align with the OECD definition, which states that this condition is both preventable and treatable. Original allocation was 100% treatable.

**Aortic aneurysm:** Changed allocation to 50% treatable and 50% preventable to align with the OECD definition, which states that this condition is both preventable (through prevention of risk factors similar to those for ischemic heart diseases) and treatable. Original allocation was 100% preventable.

**Venous thromboembolism:** Changed allocation to 100% treatable with a footnote: "Some of these conditions (which are mainly acquired when people are hospitalized or in contact with health services) might also be considered to be preventable, in the sense that the incidence of these health care—associated infections or health problems might be reduced through greater prevention in health care facilities." Original allocation was 100% preventable.

Asthma and bronchiectasis: Revised code selection to add ICD-10 code J46 Status asthmaticus.

**Acute lower respiratory infections:** Revised code selection to add ICD-10 code J21 and ICD-9 code 466.1 Acute bronchiolitis.

**Other respiratory disorders:** Removed condition and corresponding codes (ICD-10: J98; ICD-9: 518.0, .1, .2, .8; 519.1, .3, .4, .8, .9) to align with the OECD definition, which states that there is insufficient evidence of treatability.

**Disorders resulting from impaired renal tubular function:** Revised code selection to add ICD-10 codes N26 and N27, and ICD-9 codes 587 Unspecified contracted kidney and 589 Small kidney of unknown cause.

**Obstetrical tetanus:** Added new condition to list (ICD-10: A34; ICD-9: 670). Allocated to 100% preventable.

**Complications of perinatal period:** Changed description to "certain conditions originating in the perinatal period" to align with ICD-10 code descriptions. Removed exception 779.4 from ICD-9 codes to better align with the ICD-10 code range.

Congenital malformations, deformations and chromosomal anomalies: Removed conditions and corresponding codes (ICD-10: Q00–Q99; ICD-9: 740–759) to align with the OECD definition, which states that there is insufficient evidence of preventability or treatability for this broad range of conditions. Added 2 new smaller groups of conditions instead.

Certain congenital malformations (neural tube defects): Added new condition to list (ICD-10: Q00, Q01, Q05; ICD-9: 740, 741, 742.0) to replace the broader group mentioned above. Allocated to 100% preventable.

Congenital malformations of the circulatory system (heart defects): Added new condition to list (ICD-10: Q20–Q28; ICD-9: 745, 746, 747) to replace the broader group mentioned above. Allocated to 100% treatable.

**Suicide and self-inflicted injuries:** Revised code selection to remove ICD-10 code Y87.0 and ICD-9 code E959 *Sequelae of intentional self-harm* to align with the OECD definition, which states that there is an insufficient number of deaths.

**Assault:** Revised code selection to remove ICD-10 code Y87.1 and ICD-9 code E969 *Sequelae* of assault to align with the OECD definition, which states that there is an insufficient number of deaths.

**Alcohol-related diseases, excluding external causes:** Revised code selection to add ICD-10 codes E24.4 *Alcohol-induced pseudo-Cushing's syndrome*, G72.1 *Alcoholic myopathy*, R78.0 *Finding of alcohol in blood* and Q86.0 *Fetal alcohol syndrome (dysmorphic)*. No change to ICD-9 codes.

**Adrenal disorders:** Revised code selection to remove ICD-10 code E24.4 *Alcohol-induced pseudo-Cushing's syndrome* with no corresponding change to ICD-9 codes. Also removed ICD-9 code 255.1 *Hyperaldosteronism* to better align with ICD-10 code range.

**Congenital metabolic disorders:** Removed condition and corresponding codes (ICD-10: E74.0, E74.2; ICD-9: 271.0, 271.1) to align with the OECD definition, which states that there is an insufficient number of deaths.

**Osteomyelitis:** Removed condition and corresponding codes (ICD-10: M86; ICD-9: 730.0, .1, .2, .3) to align with the OECD definition, which states that there is insufficient evidence of treatability.

Adverse effects of medical and surgical care: Reallocated all codes under this heading to 100% treatable, with the following footnote: "Some of these conditions (which are mainly acquired when people are hospitalized or in contact with health services) might also be considered to be preventable, in the sense that the incidence of these health care—associated infections or health problems might be reduced through greater prevention in health care facilities." Original allocation was 100% preventable.

**COVID-19:** Added new condition to list (ICD-10: U07.1, U07.2; ICD-9: no corresponding codes) to reflect the COVID-19 pandemic. Allocated to 100% preventable.