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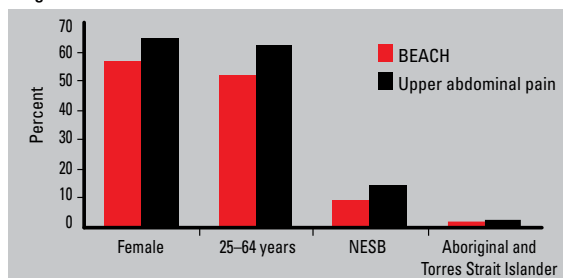
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Upper abdominal pain

The BEACH program (Bettering the Evaluation and Care of Health) shows that between April 2003 and March 2008 there were 2675 encounters where upper abdominal pain was a presenting symptom and a digestive problem was managed. We refer to these encounters here as upper abdominal pain encounters, and they occurred at a rate of 6 per 1000 total encounters.

Figure 1. Patient characteristics



■ Female patients were significantly more likely to present (8 per 1000 encounters) at upper abdominal encounters than were males (6 per 1000). Female patients were over represented (64.5%) compared with total BEACH (56.8%), as were patients of non-English speaking background and patients aged 25–64 years. Aboriginal and Torres Strait Islander patients were seen marginally more often than average at these encounters. Very young and elderly patients were under represented (*Figure 1*).

There were 2814 digestive diagnoses/problems managed at upper abdominal pain encounters. Oesophageal disease was the most common, recorded at a rate of 14.7 per 100 encounters, followed by localised abdominal pain (12.6), and stomach function disorder (7.7 per 100). Forty percent of the digestive problems managed were described as symptoms/complaints, ie. they did not have a definitive diagnosis (*Table 1*).

Management of these problems was associated with high levels of referrals and investigations. Specialist referrals were recorded at almost twice the 5 year BEACH average of 5.4 per 100 problems managed and patients were referred to hospital and accident and emergency departments five times more often than average (0.4). Pathology tests were ordered at twice the BEACH average of 26.6, with high rates of full blood count and liver function tests. Imaging tests were ordered at four times the average rate (5.9), with ultrasound of abdomen accounting for half of these. Prescribed medication rates (66.4) were average for BEACH, and proton pump inhibitors were the most commonly prescribed medication group (*Table 1*).

Conflict of interest: none declared.

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Table 1. Most common digestive problems and management at upper abdominal pain encounters

Digestive problems managed and treatments provided	Rate per 100 encounters (n=2675)
– oesophageal disease	14.7
– localised abdominal pain	12.6
– stomach function disorder	7.7
– epigastric pain	6.7
– cholecystitis/cholelithiasis	5.0
– gastroenteritis	4.9
Medications	Per 100 digestive problems (n=2814)
– proton pump inhibitors	22.8
– H2 receptor antagonists	3.9
Referrals and tests	
– specialist referrals	9.7
– A&E/hospital referrals	2.1
– pathology tests	56.7
– imaging tests	24.6