AUTISM, STATISTICAL OCCURRENCES

1063. Hon Jim Scott to the Parliamentary Secretary representing the Minister for Health

(1) What were the statistical occurrences of autism in the WA population for each year from 1990 to 2002?

(2) How many children contracted -

(a) measles;
(b) mumps; and
(c) rubella,

in each of the last five years?

(3) Of the children who contracted -

(a) measles;
(b) mumps; and
(c) rubella,

in each of the last five years, how many had received vaccinations for these diseases?

Hon SUE ELLERY replied:

Autism is one of several diagnoses (Pervasive Developmental Disorder, Not Otherwise Specified, Asperger's syndrome, Rett's syndrome and Childhood Disintegrative Disorder) that belong to a category of neurodevelopmental disorders called the Pervasive Developmental Disorders. The incidence of diagnosis of autism has risen manyfold over the last decade in most western countries. There is no biological "test" for autism, rather, the diagnosis requires an interpretation of an individual's developmental and behavioural profile. Recent statements from professional bodies in the USA and a Joint Committee report from the UK have recommended that the diagnostic process be undertaken by multidisciplinary teams, rather than individual clinicians. A similar consensus opinion has not been undertaken in Australia, and different standards of diagnosis are employed in different States in Australia. Therefore, incidence trends need to be interpreted carefully when comparing one State to another State. In Western Australia, the multidisciplinary guidelines for diagnosis are accepted, and the diagnostic process is undertaken in childhood by a paediatrician or psychiatrist, plus a psychologist and a speech pathologist.

It is not clear why there has been such an increase in diagnoses of autism in the last 15 years. Multiple reasons have been suggested in the scientific literature.

With regards to international experience for example, the prevalence of autism in Minnesota, USA was reviewed in a recent publication. The authors note that the prevalence among children aged 6 to 11 years increased from 3 per 10 000 in 1991-1992 to 52 per 10 000 in 2001-2002 (a 17 fold increase).

Data on the incidence of autism in Western Australia prior to 1999 are not necessarily accurate, but some information has been derived from local researchers. Since 1999, all new reported cases of autism have been included on the Western Australian Autism Spectrum Disorder Register. Clinicians are not required by law to notify the Register or Department of Health or any other institution of a new case, but it is believed that the Register is ascertaining at least 90% of new cases. Western Australian clinicians have cooperated impressively in this notification system. No other State in Australia has reached consensus in diagnostic standards nor consensus in case ascertainment.

Local researchers have estimated the number of new cases of autism diagnosed per year of birth as follows:

Year of Birth	New cases of autism
1990	50
1991	50
1992	61
1993	76
1994	71
1995	74

Alternatively, estimates may be expressed in terms of the number of new cases of autism diagnosed in WA by year of diagnosis. An analysis for the period 1990-1995 inclusive, conducted by a paediatrician analysing multiple data sources, provided the following estimates:

Year of Diagnosis	New cases of autism
1990	5
1991	10

1992	15
1993	22
1994	33
1995	50

The incidence of new diagnosis for 1996, 1997 and 1998 has not been identified. However, since 1999, the Western Australian Autism Spectrum Disorder Register contains the following data:

Year of Diagnosis	New cases of autism
1999	159
2000	173
2001	204
2002	Currently compiling

The prevalence of the disorder (expressed per unit of population at a point of time) has not been calculated. Therefore, it is not possible to comment accurately on the exact increase in prevalence of the disorder. However, it is clear that there has been an increase in new diagnosis in the last 15 years.

(2)-(3) The number of persons notified to the department with a diagnosis of measles, mumps, or rubella from 1998 to 2002, including their vaccination status, are listed in the following tables:

MEASLES	1998	1999	2000	2001	2002
Vaccinated	21	6	0	2	1
Unvaccinated	11	6	0	4	0
Unknown	18	7	11	3	3

MUMPS	1998	1999	2000	2001	2002
Vaccinated	0	0	0	8	7
Unvaccinated	0	0	0	2	2
Unknown	37	39	39	18	6

RUBELLA	1998	1999	2000	2001	2002
Vaccinated	0	0	0	1	0
Unvaccinated	0	0	0	1	2
Unknown	67	21	6	1	1

The above data cannot be used to infer that measles, mumps or rubella are more common in vaccinated than unvaccinated persons for a number of reasons.