Pacific Health Review

Making Education Easy

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In this issue:

Abbreviations used in this issue
AF = atrial fibrillation
COVID-19 = coronavirus disease 2019
OR = odds ratio

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diabetes new zealand

Kia orana, Fakaalofa lahi atu, Talofa lava, Malo e lelei, Bula vinaka, Taloha ni, Kia ora, Greetings.

Welcome to the latest issue of Pacific Health Review.

This issue covers a range of topics of interest to Pacific people living in Aotearoa New Zealand and the Pacific Region, including the clinical features of Pacific patients hospitalised with COVID-19 in NZ, kidney transplant outcomes among Pacific people living in Australia, a telehealth model for hypertension management, the experiences of Pacific people with the ear and hearing health system in Counties Manukau, and oral health among Pacific people.

We hope you find this issue interesting, and welcome your feedback.

Kind regards,

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Variation in clinical presentation, complications and outcomes for Māori and Pacific peoples among hospitalised adults with COVID-19 in 2022, Aotearoa New Zealand

Authors: Maze MJ et al.

Summary: This retrospective cohort study evaluated the clinical features and outcomes of Pacific and Māori patients hospitalised with COVID-19 in NZ in 2022. A total of 2319 adults were hospitalised due to COVID-19 at 11 hospitals between Jan and Mar 2022; 39% of them were Pacific patients (median age 52 years) and 25% were Māori (median age 57 years). Vaccination coverage (≥2 doses) was 76.7% for Pacific patients, 73.4% for Māori, and 84.8% for non-Māori non-Pacific (NMNP) patients. Overall, 35.9% of patients had complications. Pacific patients were at greater risk for acute kidney injury (risk ratio [RR] 2.18; p<0.001) and pneumonia (RR 1.32; p=0.047) than NMNP patients but at a lower risk for thromboembolism (RR 0.35; p=0.004) and myocarditis/pericarditis (RR 0.23; p=0.003). Māori were at greater risk for acute kidney injury, cardiac arrhythmia, shock, myocardial infarction, cardiac arrest and acute respiratory distress syndrome than NMNP patients. Overall, 3.9%, 3.3% and 3.2% of Pacific, Māori and NMNP patients, respectively, died in hospital.

Comment: It is well established that Pacific and Māori people are disproportionately affected by COVID-19, with a much higher number of cases, hospitalisations and deaths than NMNP adults. This study has confirmed that 39% of all hospital admissions between Jan and Mar 2022 were Pacific people, which is well above their proportion of the population of Aotearoa New Zealand (approximately 8%). Pacific people were observed to have higher risk of acute kidney injury and pneumonia. The proportion of people who died in hospital was similar across ethnic groups. The study also showed that Pacific and Māori people had lower vaccination coverage than NMNP patients. COVID-19 vaccination has been shown to significantly reduce the risk of hospitalisation. In addition, underlying socioeconomic disadvantage and poor housing, high prevalence of comorbidities and delayed access to health care are also known to increase the risk of COVID-19 infection and hospitalisation.

Reference: Intern Med J. 2025;55(8):1339–49
Abstract

INDEPENDENT COMMENTARY BY

Sir Collin Tukuitonga KNZM

Sir Collin Tukuitonga is a medical graduate and Public Health Physician with extensive experience in health policy, research, management, and leadership in NZ and internationally. He is the inaugural Associate Dean Pacific and Associate Professor of Public Health at the University of Auckland. Prior to this role, he was the Director-General of the Pacific Community based in New Caledonia.

Kidney transplant outcomes of Māori and Pasifika people receiving transplantation in Australia: An Australia and New Zealand Dialysis and Transplant Registry study

Authors: De Souza L et al.

Summary: This registry study evaluated clinical outcomes in Māori and Pacific patients who received a kidney transplant in Australia. A total of 12,543 patients received a kidney transplant in 2002–2021 in Australia; 313 of them were Pacific people and 89 were Māori. Compared with other ethnicities, Māori and Pacific patients were more likely to have diabetic kidney disease or obesity at the time of transplantation, and be current or former smokers. Time to graft loss was shorter in Pacific (adjusted hazard ratio [aHR] 1.78, 95% CI 1.39–2.029) and Māori (aHR 2.06, 95% CI 1.36–3.11) individuals than in other ethnicities. Delayed graft function was reported in 30% of Māori patients, 28% of Pacific patients, and 22% of patients of other ethnicities (p<0.005), but patient survival was comparable.

Comment: In NZ, Māori and Pacific people have lower rates of kidney transplantation and poorer long-term graft survival outcomes compared to Europeans, despite experiencing higher rates of kidney failure, often due to factors like diabetes. The number of Māori and Pacific people living with kidney failure in Australia is rising. This study of 12,543 people who received a transplant over two decades in Australia showed that Pacific patients were more likely to have diabetic kidney disease and obesity and shorter time to graft loss than other ethnicities. The study findings concur with the experience in Aotearoa New Zealand.

Reference: Intern Med J. 2025;55(2):277–83
Abstract

Differences in systemic treatments for breast cancer between patients with and without diabetes

Authors: Lao C et al.

Summary: This NZ study investigated the impact of comorbid diabetes on breast cancer treatment. Patients diagnosed with invasive breast cancer in 2005–2020 were identified from the Breast Cancer Foundation National Register. Compared with patients without diabetes, those with diabetes were less likely to receive endocrine therapy (64.2% vs 60.4%; p<0.001), human epidermal growth factor receptor 2+ (HER2)-targeted therapy (65.6% vs 54.8%; p<0.001) and chemotherapy (32.1% vs 20.4%; p<0.001). However, the between-group differences in receipt of endocrine therapy and HER2-targeted therapy could be explained by the older age at diagnosis and more comorbidities in patients with diabetes. The between-group difference in usage of chemotherapy remained after adjustment for other factors, with a stronger difference in women with stage 2 breast cancer (OR 0.71, 95% CI 0.59–0.86) and in Pacific women (OR 0.70, 95% CI 0.51–0.94).

Comment: Pacific women are known to present with breast cancer in late stages compared with non-Māori, non-Pacific women. They are also less likely to have had mammography despite free breast screening for women aged 45–69 years in Aotearoa New Zealand. This study further elaborates on differences in treatment for women with diabetes who present with invasive breast cancer. The study findings showed that women with diabetes were less likely to receive endocrine therapy, chemotherapy and other treatments. Given the high prevalence of diabetes in Pacific women, it is reasonable to assume that they are less likely to receive systemic treatment compared with women without diabetes. Encouraging breast cancer screening remains an important priority for Pacific women with/without diabetes.

Reference: N Z Med J. 2025;138(1613):67–78
Abstract

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Manaaki Mamao – to care from a distance: Evaluating a telehealth service for Māori and Pacific peoples with hypertension

Authors: Neary T et al.

Summary: Manaaki Mamao is a 6-month telehealth-based programme delivered by Hato Hone St John that aims to reduce health inequities for Māori and Pacific peoples. It supports home-based hypertension monitoring and management. This retrospective study evaluated patient outcomes and engagement with Manaaki Mamao in the first 2 years of the programme. All patients referred to Manaaki Mamao between Dec 2021 and Dec 2023 were included; referral was open to Māori or Pacific peoples aged ≥18 years with uncontrolled hypertension who were taking antihypertensive medication. More than 80% of the 173 referrals to Manaaki Mamao were successfully onboarded in the first 2 years, and 69% completed 6 months of the programme. Blood pressure (BP) reduced significantly over this period, with the strong engagement group experiencing a 9.9mm Hg reduction in systolic BP and a 6.5mm Hg reduction in diastolic BP.

Comment: The health system in Aotearoa New Zealand is severely constrained and many people do not have timely access to health due to workforce shortages, chronic inequities and increasing demand. Manaaki Mamao is an interesting innovation provided by Hato Hone St John supporting home-based hypertension monitoring and treatment. Approximately half of all patients with hypertension do not have good control and it is an important risk factor for strokes. This retrospective study over a 2-year period showed a significant reduction in both systolic and diastolic pressures among those with strong engagement. The study demonstrates the potential for innovation such as the Hato Hone telehealth programme to contribute to improved health outcomes for those with appropriate conditions that are able to be managed remotely.

Reference: N Z Med J. 2025;138(1620):105–9
Abstract

Refining predictive risk models for stroke in atrial fibrillation: A scoping review and meta-analysis for Aotearoa New Zealand, Māori and Pacific peoples

Authors: Mahawish KM et al.

Summary: This systematic review and meta-analysis investigated the influence of ethnicity on stroke risk in patients with AF. A search of PubMed, Scopus and EMBASE identified 27 studies that were suitable for inclusion. Meta-analysis of data from predominantly retrospective observational cohort studies suggested that stroke risk in AF is modified by ethnicity/race. Stroke risk was higher in African Americans and Hispanics with AF compared with whites (OR 1.44, 95% CI 1.25–1.66 and OR 1.11, 95% CI 1.05–1.18, respectively). Māori and Pacific people with AF were at higher risk for stroke than NZ Europeans, but the differences were not significant. Stroke risk and CHA_2DS_2-VASc performance varied substantially across studies.

Comment: AF is a common condition in the community, with a lifetime risk of over 25% in those over 40 years, particularly Māori and Pacific people. The prevalence of AF is expected to double over the coming decades due to an ageing population. AF is an important risk factor for stroke. This systematic review and meta-analysis showed that stroke risk was higher among African Americans and Hispanics compared with white people in the US. Stroke risk is higher among Māori and Pacific people in Aotearoa compared with non-Māori, non-Pacific adults. Identification and management of people with AF is an important priority and those with increased stroke risk should be considered for anticoagulation therapy.

Reference: N Z Med J. 2025;138(1611):102–13
Abstract

Māori and Pasifika Whānau expertise and experiences in the ear and hearing health system in the Counties Manukau Region, Auckland

Authors: Taylor W et al.

Summary: This qualitative study explored the experiences of Pasifika and Māori whānau who used the ear and hearing health services in Counties Manukau. The research was guided by Kaupapa Māori and Pan-Pacific research principles. Six whānau interviews were conducted. Thematic analysis of the data identified three themes: 1) Whānau are experts; 2) Power and control; and 3) What makes a good ear and hearing health service. The families made suggestions for improvements in ear and hearing healthcare, which will be used in future ear and hearing health projects in NZ.

Comment: Addressing hearing loss and middle ear problems for children is vital for their development and lifelong wellbeing. This study provides another important example of persisting health inequalities and disparities and the impact that unmet need has on Pacific and Māori children and families. This co-designed research project provides important clinical and policy insights into improving healthcare services for families through early intervention and actions that healthcare providers can implement to better support families. Scaling up the research to include families from other health districts to compare findings would also be of benefit for future evidence-based policy development.

Reference: J R Soc N Z. 2024;55(3):704–20
Abstract

Pacific oral health: A scoping review

Authors: Hanif NZ et al.

Summary: This scoping review evaluated published literature on oral health in Pacific people. A search of various databases identified 95 articles (mostly published in 2000–2023 and NZ-based) that were suitable for inclusion. Analysis of the data revealed that a high proportion of Pacific people (including children) had poor oral health and experienced challenges in accessing dental care services. Oral health disparities were reported, with Pacific people having poorer oral health than other population groups. Data from Pacific Island nations showed a high prevalence of dental conditions, limited healthcare resources, and workforce shortages.

Comment: This is a useful scoping review as it includes analyses for both NZ and the Pacific region. Improving oral health care for Pacific peoples in NZ remains a persisting challenge. Although dental health care for under 18s is free, accessing and utilising these services remains a barrier particularly for children and families in low socioeconomic areas. For most Pacific adults the cost of dental health services remains unaffordable, leading to disproportionately high ambulatory sensitive hospitalisations (ASHs) for dental conditions. Addressing access barriers with further investment into targeted promotion of services will help improve oral health disparities for Pacific children and reduce ASH rates. The review has shown that workforce shortages are a common barrier in the region and NZ. The Pacific region faces additional economic and health system challenges which limit resources available for oral health services.

Reference: Front Oral Health 2025;6:1474623
Abstract

INDEPENDENT COMMENTARY BY
Dr Roannie Ng Shiu

Dr Roannie Ng Shiu is the Pasifika Medical Association (PMA) Senior Research Fellow with the University of Auckland Faulty and Medical and Health Sciences Office of the Associate-Dean Pacific. Her primary role is to deliver robust high-quality Pacific health equity research and to increase the Pacific health workforce in Aotearoa with the recruitment and retention of Pacific health students. She was previously with the Department of Pacific Affairs at the Australian National University. Roannie is Samoan and was raised in South Auckland and graduated from the University of Auckland with a PhD in Community Health.

Physical activity and glycaemic control among adults with type 2 diabetes in Suva, Fiji

Authors: Mundia E et al.

Summary: This cross-sectional pilot study investigated the relationship between physical activity and glycaemic control among patients with type 2 diabetes in Fiji. A total of 174 adults with type 2 diabetes who were assessed at the Samabula Health Center in Suva were included. Overall, 64% of them were physically inactive, with females being less active than males (OR 0.49, 95% CI 0.25–0.98). Three-quarters of the patients had poor glycaemic control, although adherence to lifestyle and pharmacological management plans were associated with good control (OR 2.37, 95% CI 1.05–5.37). Improvements in physical activity levels were not associated with meeting glycaemic control targets.

Comment: Global studies have demonstrated a positive correlation between physical activity and glycaemic control. The present study reports interesting findings among diabetic patients in Fiji and provides further data to warrant targeted physical activity programmes for Pacific women and further support for community-based diabetes-management initiatives. To help better understand and assess physical activity and glycaemic control with Pacific populations, future studies should consider a longitudinal approach to look into the sustained impact of physical activity and incorporating HbA1c testing similar to global studies.

Reference: J Prim Health Care 2025; published online Aug 22
Abstract

Improving National Bowel Screening participation through primary care engagement: A quality improvement report

Authors: McMenamin J et al.

Summary: Participation in NZ's National Bowel Screening Programme among Pacific and Māori people is lagging. In 2023–2024, primary care-led campaigns were introduced to support general practices to engage patients in screening discussions. Tailored materials and practice support tools were provided to a substantial number of practices (including Very Low-Cost Access Clinics). The volume of faecal immunochemical test (FIT) kit requests more than doubled over 2 years, although return rates remained modest. This highlights the need for additional follow-up strategies.

Comment: Early screening services for bowel cancer and other cancers are vital services for Pacific and Māori communities who experience earlier onset of cancers. Improving screening programmes by addressing cultural sensitivities to screening processes at an earlier age and additional follow up strategies as demonstrated in the paper will help to improve screening rates for Pacific peoples. Given the recent health policy changes for bowel screening for Māori and Pacific communities, further studies and research into bowel screening prevalence rates and participation in the national screening programme is critical.

Reference: J Prim Health Care 2025; published online Jul 24
Abstract

Factors influencing parents' food-purchasing decisions in the Pacific: A qualitative study in Tonga

Authors: Fusi SKF et al.

Summary: This qualitative study explored the factors influencing food-purchasing decisions among parents in Tonga. Semi-structured interviews were undertaken with 21 Tongan parents aged 27–51 years who were living in Tongatapu. They were asked about the factors that determine where they do their grocery shopping and what influences their food-purchasing decisions. Analysis of interview transcripts showed that the parents often struggled to prioritise healthy food when balancing financial and time constraints, as well as family and cultural expectations. Food availability in local retail outlets was important, and the cost of healthy food relative to unhealthy food was a key factor driving purchasing decisions.

Comment: Tonga has one of the highest obesity and diabetes rates in the world for both children and adults. There has been a steady shift to appreciate the importance of understanding complex social determinants on obesity and non-communicable diseases rather than solely focusing on individual lifestyle choices. This study provides useful insights into individual, family, community and societal factors that impact on food-purchasing decisions at a family level. As Pacific childhood obesity rates are rising, family analyses are crucial to better understand how family dynamics, resources and environment impact on the health of children. This study helps to identify important actionable steps in terms of public health policy on accessing healthy foods and involving local communities in improving food environments.

Reference: BMC Public Health 2025;25(1):2096
Abstract