

Huge discrepancies on heart disease in Europe

August 20 2014, by Mariette Le Roux

Russians and Ukrainians aged 55 to 59 die from coronary heart disease at a higher rate than Frenchmen who are 20 years older, a study released Wednesday of Europe's cardiovascular health showed.

Drawing on data from the World Health Organization (WHO) and the Organization for Economic Cooperation and Development (OECD), the report covering 52 countries noted a generally positive trend, but with huge discrepancies across the region.

Cardiovascular disease (CVD), a collection heart and blood vessel conditions that can lead to heart attack and stroke, remained the single biggest killer, claiming over four million lives in Europe per year.

This represented nearly half of all deaths, said the study published in the *European Heart Journal*.

Taken as a whole, researchers found that deaths from heart disease and stroke in Europe were declining.

In some, predominantly high-income nations—Belgium, Denmark, France, Israel, Luxembourg, the Netherlands, Portugal, Slovenia, Spain and San Marino—heart disease was now claiming fewer lives than cancer in men, and in Denmark, for the first time in Europe, also in women.

This was because "fewer people develop [cardiovascular disease](#), and in

those who do, fewer die from it," said study co-author Nick Townsend of Oxford University—likely due to the adoption of healthier lifestyles and better medicine.

In other countries, notably in the former Soviet Union, however, there was no sign of a letup, "and a large proportion of the populations will lose their lives prematurely to [heart disease](#) and stroke", the authors wrote.

Lopsided trend

The CVD death rate for men and women of all ages in Russia, for example, was six times higher than in France.

In 2010, 915 Russian men and 517 women died of CVD per 100,000 of the population, compared to 150 and 87 per 100,000 in France—which is used as a reference since it has Europe's lowest mortality rate in the 75-79 age group.

"CVD mortality rates among 55-59-year-old men in Belarus, Kazakhstan, Kyrgyzstan, Russia and Ukraine were higher than equivalent rates in French men 20 years older," the study said.

In the UK, the rates for 2010 were 205 per 100,000 for men and 129 for women.

The study did not look at the reasons for the regional imbalance, but Townsend's colleague Mike Rayner said previous research had pointed to environmental rather than genetic factors.

"The differences between Western and Eastern Europe are mainly due to differences in lifestyles (smoking, alcohol intakes, diets) as well as, and to a lesser degree, the way people who have CVD, or are at high risk of

CVD, are treated by health care systems," he told AFP by email.

"Differences in lifestyle in turn are due to differences in the way cigarettes, alcohol, foods etc. are marketed in different countries, including the ways in which unhealthy products are labelled, advertised and taxed."

The research showed that CVD also differentiated between genders. Fifty-one percent of European women and 42 percent of [men](#) died of it.

The team had looked at data on deaths over a ten-year period up to the most recent year for which statistics were available, which was 2010, 2011 or 2012 for most countries.

Globally, CVD was estimated by a recent Global Burden of Disease study to cause nearly 30 percent of all deaths worldwide, or some 15.6 million in 2010.

Townsend said the declining trend in rich countries "may be in danger of reversing" given an increase in some risk factors, such as rising obesity levels.

The European study showed that while fewer people died of CVD in hospital, the number of people admitted for treatment increased.

"On balance, our findings are good news," said Rayner.

"But we still need to focus more on healthy life expectancy—where there are still huge gains to be made—rather than just life expectancy per se."

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