

Central Europe



CENTRAL EUROPE



Life expectancy has risen to an average of 75 years in the countries of Central Europe. About 15% of the population is aged 65 years or older (Table 1). Less than 60% of people live in cities on average, but the proportion urban population varies among the countries of the region.

Table 1. Summary regional Indicators for Central Europe countries, 2010

Country Indicator	Median among countries	Range among countries
Life expectancy (years)	75.1	73.5 – 79.4
Population ≥65 years of age (%)	14.8	10.1 – 18.3
Urban population (%)	57.5	47.7 – 73.5
Physicians per 1,000 people	2.54	1.15 – 3.76
Nurses or midwives per 1,000	5.4	0.33 – 8.79

Ischaemic heart disease is the leading CVD cause of health loss in Central Europe (Figure 1). Among the top ten CVD causes, burden from CVDs related to infectious diseases (rheumatic heart disease and endocarditis) as well as aortic aneurysm declined in rank between 1990 and 2010. Chronic CVDs such as cardiomyopathies, atrial fibrillation, and peripheral vascular disease became more prominent.

Figure 1. Number of DALYs due to CVD, Central Europe, both sexes, 1990 and 2010

1. Ischaemic heart disease	5,836,500 (48.5%)	1. Ischaemic heart disease	5,117,750 (48.4%)
2. Stroke	4,246,480 (35.3%)	—2. Stroke	3,500,170 (33.1%)
3. Hypertensive heart disease	477,305 (3.9%)	—3. Hypertensive heart disease	577,386 (5.5%)
4. Rheumatic heart disease	287,090 (2.4%)	4. Cardiomyopathy	335,977 (3.1%)
5. Cardiomyopathy	264,362 (2.2%)	≥ 5. Rheumatic heart disease	139,438 (1.3%)
6. Aortic aneurysm	102,556 (0.8%)	6. Atrial fibrillation	131,519 (1.2%)
7. Atrial fibrillation	82,070 (0.6%)	¹≤₄7. Aortic aneurysm	104,015 (0.9%)
8. Endocarditis	26,716 (0.2%)	8. Peripheral vascular disease	34,893 (0.3%)
9. Peripheral vascular disease	23,185 (0.2%)	≥ 9. Endocarditis	20,771 (0.1%)
10. Other CV and circulatory diseases	85,573 (5.6%)	— 10. Other CV and circulatory diseases	609,299 (5.7%)

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5,000,000 10,000,000 15,000,000 20,000,000 25,000,000 Dietary risks High blood pressure High body mass index Tobacco smoking Alcohol use High total cholesterol Physical inactivity and low physical activity High fasting plasma glucose 1990 Ambient particulate matter air pollution 2010 Household air pollution from solid fuels Lead exposure

Figure 2. Number of DALYs due to CVD risk factors, Central Europe, both sexes, 1990 and 2010*

CVD attributed to active and second hand smoking, high blood pressure and dietary risks increased since 1990 (Figure 2). CVD burden due to air pollution decreased. Over a quarter of all disease burden is attributed to CVDs in Central Europe (Figure 3).

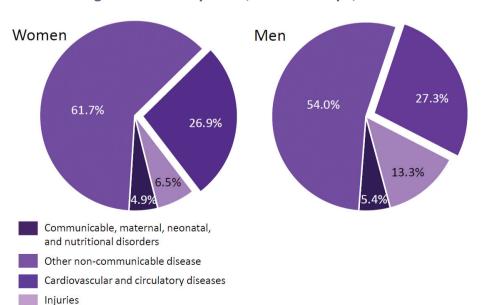


Figure 3. DALYs by cause, Central Europe, 2010

^{*}Note that DALYs attributed to risk factors overlap, that is, the sum of all individual CVD risk factors is greater than total CVD DALYs.

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Absolute CVD DALY rates varied by almost three-fold among the countries of Central Europe in 2010 (Figure 4). Age standardized CVD DALYs per 100,000 decreased 34% and absolute CVD DALYs per 100,000 decreased 10% between 1990 and 2010. Absolute DALY rates generally decreased in the northern portion of the region since 1990, but increased in the southern portion (Figure 5). The southernmost country in the region, Albania, observed an increase in absolute CVD burden but still had among the lowest CVD burden rates in the region.

The Atlas of CVD reports point estimates. Trends may not be statistically significant. Uncertainty intervals for all point estimates should be considered and are available at http://viz.healthmetricsandevaluation.org/gbd-compare/.

Figure 4. 2010 DALYs by country, Central Europe

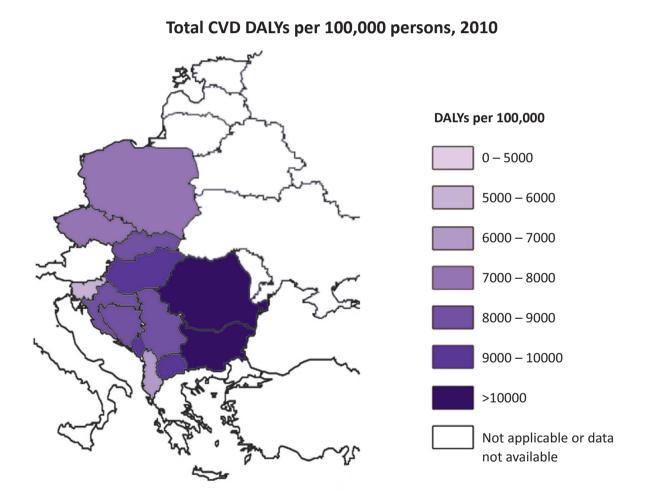
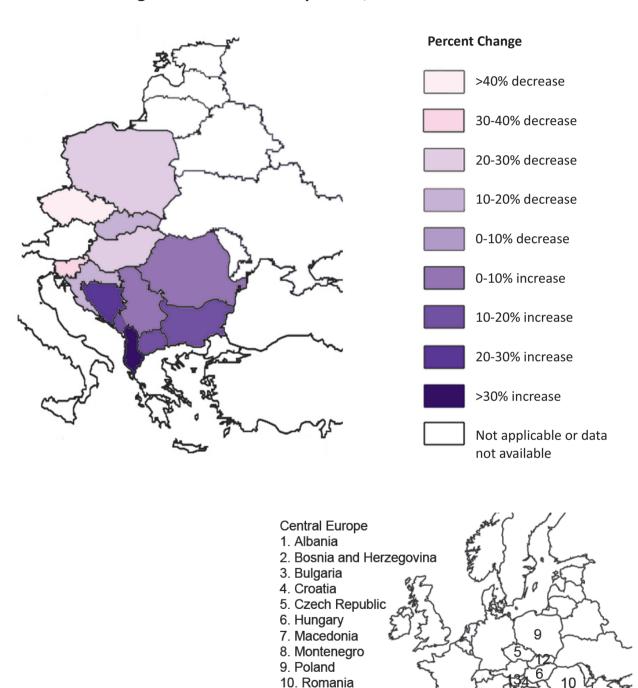




Figure 5. Change in CVD DALYs, 1990-2010, Central Europe

Percent change in total CVD DALYs per 100,000 between 1990 and 2010



11. Serbia12. Slovakia13. Slovenia