

Latin America & Caribbean



Tobacco smoking and high blood pressure prevalence are both >22% in men in Latin America & the Caribbean (Table 1). Adult diabetes prevalence is >10% in Mexico, Belize, El Salvador, Nicaragua, Surinam, Guyana, and Chile.

Table 1. Summary regional indicators for Latin America and Caribbean countries, 2016

Country Indicator	Regional average	Range (min, max)
Percent of population age 65 years or older	8.0	(3.8, 17.4)
Active smoking	males	22.1 (0.6, 52.7)
	females	10.1 (0.9, 36.0)
Raised blood pressure, age 18 years or older*	males	22.5 (16.1, 29.9)
	females	13.5 (11.2, 24.4)
Diabetes, age 18 years or older**	males	8.9 (7.0, 13.7)
	females	9.2 (8.1, 15.2)

*Raised blood pressure (SBP≥140 OR DBP≥90; age-standardized estimate)

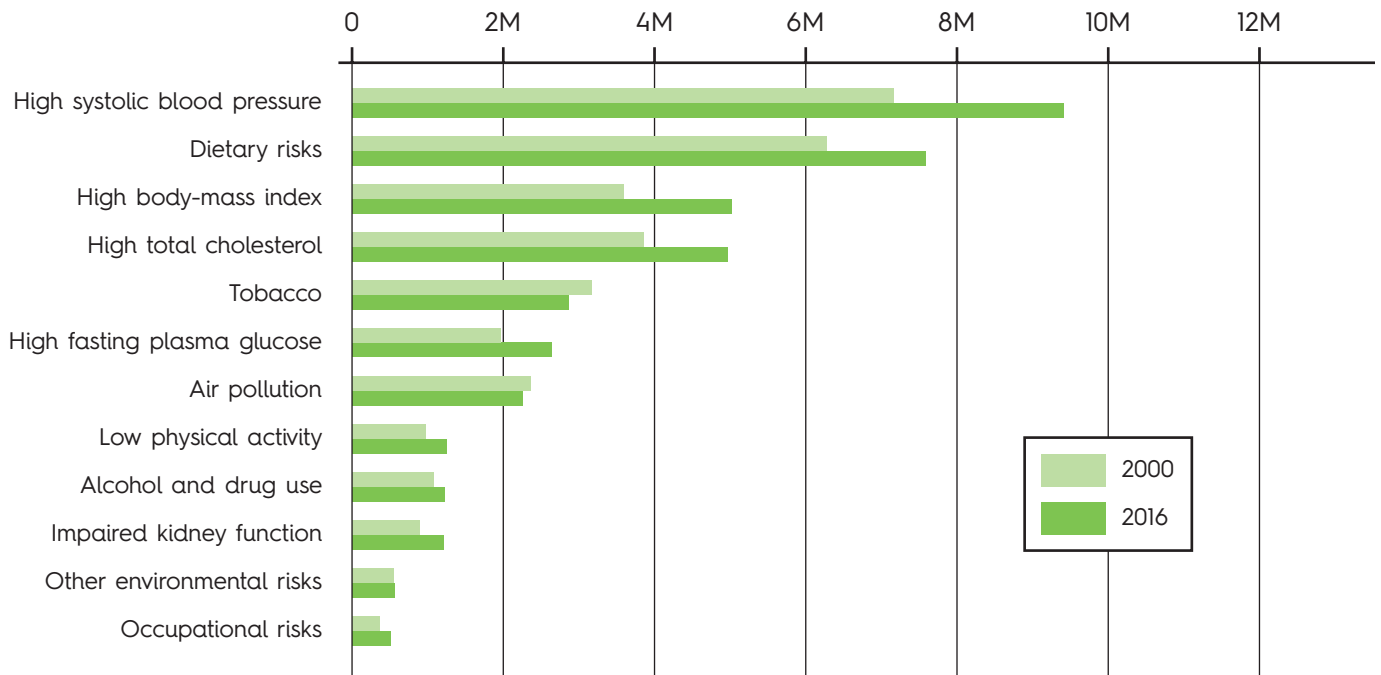
**Raised fasting blood glucose (≥7.0 mmol/L or on medication; age-standardized estimate)

Ischemic heart disease and stroke remain the leading causes of CVD burden in Latin American & the Caribbean (Figure 1). Burden of cardiomyopathy and myositis, a category that includes Chagas disease, increased over 2000-2016. At the same time, the burden of rheumatic heart disease diminished.

Figure 1. Number of DALYs due to CVD, Latin America and Caribbean, both sexes, 2000 and 2016

CVD cause	2000 rank (% of all)	CVD cause	2000 rank (% of all)
1. Ischemic heart disease	12,206,890 (51.9%)	1. Ischemic heart disease	16,482,371 (54.8%)
2. Stroke	7,809,972 (33.2%)	2. Stroke	9,012,561 (29.9%)
3. Hypertensive heart disease	1,062,731 (4.5%)	3. Other cardiovascular and circulatory diseases	1,204,366 (4.0%)
4. Other cardiovascular and circulatory diseases	774,263 (3.3%)	4. Hypertensive heart disease	1,190,332 (4.0%)
5. Rheumatic heart disease	566,216 (2.4%)	5. Cardiomyopathy myocarditis	764,826 (2.5%)
6. Cardiomyopathy myocarditis	508,804 (2.2%)	6. Rheumatic heart disease	467,196 (1.6%)
7. Atrial fibrillation and flutter	256,561 (1.1%)	7. Atrial fibrillation and flutter	439,593 (1.5%)
8. Aortic aneurysm	164,527 (0.7%)	8. Aortic aneurysm	307,143 (1.0%)
9. Endocarditis	129,333 (0.5%)	9. Endocarditis	156,632 (0.5%)
10. Peripheral artery disease	38,150 (0.2%)	10. Peripheral artery disease	70,922 (0.2%)
All CVD causes (total)	23,517,444 (100%)	All CVD causes (total)	30,095,940 (100%)

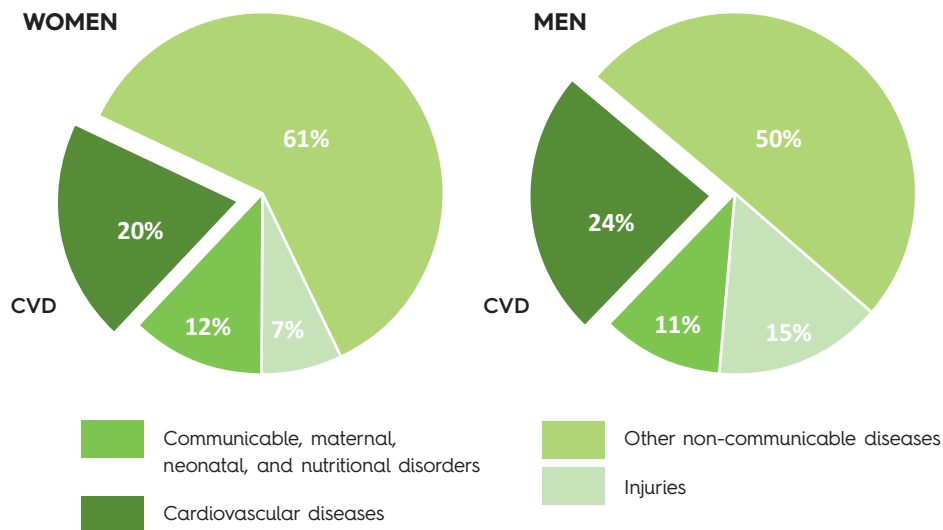
Figure 2. Number of DALYs due to CVD risk factors, Latin America and Caribbean, both sexes, 2000 and 2016*



*Note that DALYs attributed to risk factors overlap, that is, the sum for all CVD causes is greater than total CVD DALYs.

CVD burden attributable to high blood pressure, dietary risks, high body mass index, total cholesterol and low physical activity all increased from 2000-2016 (Figure 2). Over the same interval, CVD burden attributed to tobacco smoking was reduced. CVD accounts for about one quarter of total disease burden in men and one-fifth of total burden in women in Latin America & the Caribbean (Figure 3).

Figure 3. DALYs by cause, Latin America and Caribbean, 2016



Caribbean countries, Guyana, Surinam, and Uruguay had among the highest CVD disease burden per 100,000 people in Latin America & the Caribbean in 2016 (Figure 4). Paraguay and Guyana had marked increase in CVD burden rate during 2000-2016 ($\geq 20\%$ increase; Figure 5). Mexico, Nicaragua, the Dominican Republic, and Venezuela experienced more modest increases (10-20%).

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. 2016 DALYs by country, Latin America and Caribbean

CVD DALYs per 100,000 persons, 2016

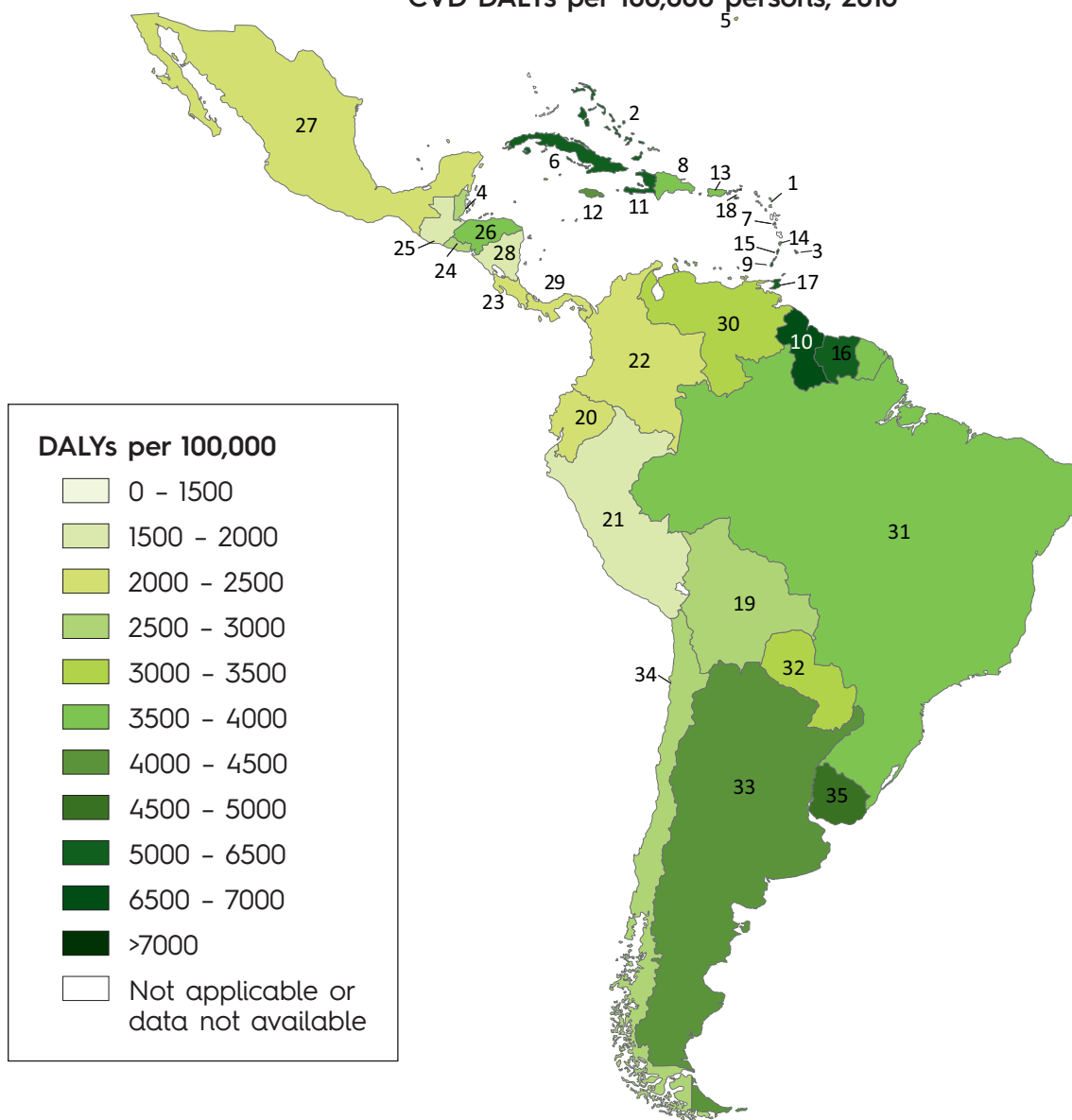


Figure 5. Change in CVD DALYs, 2000-2016, Latin America and Caribbean

Percent change in CVD DALYs per 100,000 between 2000 and 2016

