

# Australasia





### **AUSTRALASIA**



The Australasia region is aging, with 15% of adults aged ≥65 years old (Table 1). Tobacco control has been very effective in Australasia, such that male tobacco smoking prevalence was 17% and female prevalence was 13% in 2016. Raised blood pressure prevalence is 18% in men and only 13% in females.

Table 1. Summary regional indicators for Australasia countries, 2016

Country Indicator	Regional d	average	Range (min, max)	
Percent of population age 65 years or older		14.8	(14.6, 15.0)	
Active smoking	males	16.7	(16.7, 16.7)	
	females	13.1	(13.1, 13.1)	
Raised blood pressure, age 18 years or older*	males	18.2	(18.0, 19.3)	
	females	12.5	(12.3, 13.3)	
Diabetes, age 18 years or older**	males	7.0	( 6.8, 7.9)	
	females	5.2	(5.0, 6.0)	

<sup>\*</sup>Raised blood pressure (SBP>=140 OR DBP>=90; age-standardized estimate)

Total CVD burden increased modestly in Australasia from 2000-2016 (Figure 1).

Figure 1. Number of DALYs due to CVD, Australasia, both sexes, 2000 and 2016

CVD cause	2000 rank (% of all)		CVD cause	2016 rank (% of all)
1. Ischemic heart disease	761,955 (56.6%)		1. Ischemic heart disease	952,983 (56.4%)
2. Stroke	346,009 (25.7%)		2. Stroke	425,199 (25.2%)
3. Other cardiovascular and circulatory diseases	75,169 (5.6%)		3. Other cardiovascular and circulatory diseases	101,381 (6.0%)
4. Cardiomyopathy and myocarditis	42,165 (3.1%)		4. Cardiomyopathy and myocarditis	55,374 (3.3%)
5. Hypertensive heart disease	41,068 (3.1%)		5. Hypertensive heart disease	48,640 (2.9%)
6. Atrial fibrillation and flutter	31,273 (2.3%)		6. Atrial fibrillation and flutter	44,108 (2.6%)
7. Aortic aneurysm	23,448 (1.7%)		7. Aortic aneurysm	32,102 (1.9%)
8. Rheumatic heart disease	12,097 (0.9%)		8. Rheumatic heart disease	13,499 (0.8%)
9. Endocarditis	6,389 (0.5%)	·	9. Peripheral artery disease	8,931 (0.5%)
10. Peripheral artery disease	6,061 (0.5%)		10. Endocarditis	7,702 (0.5%)
All CVD causes (total)	1,345,633 (100%)		All CVD causes (total)	1,689,918 (100%)

<sup>\*\*</sup>Raised fasting blood glucose (>=7.0 mmol/L or on medication; age-standardized estimate)

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0 .5M 1M 1.5M 2M 2.5M 3M High systolic blood pressure Dietary risks High total cholesterol High body-mass index Tobacco High fasting plasma glucose Low physical activity Alcohol and drug use 2000 Air pollution 2016 Other environmental risks Occupational risks Impaired kidney function

Figure 2. Number of DALYs due to CVD risk factors, Australasia, both sexes, 2000 and 2016\*

CVD burden due to high blood pressure and dietary risks increased over 2000-2016 (Figure 2). About 42% of total disease burden in males is attributable to non-communicable diseases, and 23% of total burden was attributable to CVD (Figure 3). Non-communicable disease burden comprises about 87% of total disease burden in women.

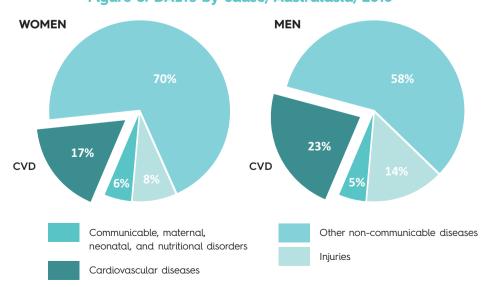


Figure 3. DALYs by cause, Australasia, 2016

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

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CVD burden rates in Australasia are among the lowest among the world's high income regions (3,500 DALYs per 100,000 or less; Figure 4). CVD burden rate decreased by 10% or more between 2000 and 2016 throughout the region (Figure 5).

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, Australasia

CVD DALYs per 100,000 persons, 2016

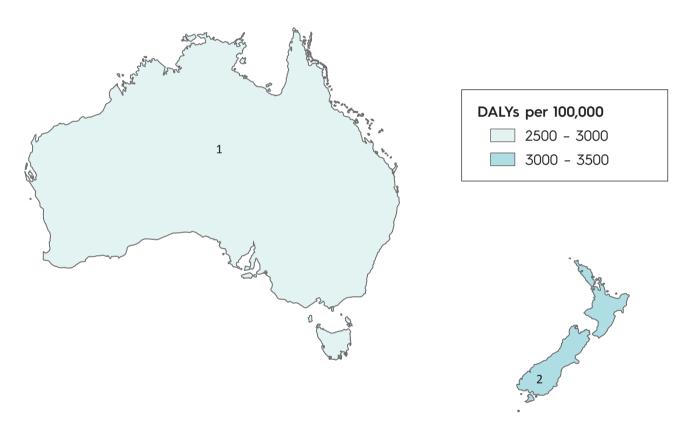




Figure 5. Change in CVD DALYs, 2000-2016, Australasia

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



- 1. Australia
- 2. New Zealand