



FACTSHEET

Contribution of chronic disease to the gap in adult mortality between Aboriginal and Torres Strait Islander and other Australians

Aboriginal and Torres Strait Islander people generally have significantly poorer health than other Australians and typically die at much younger ages.

Chronic diseases are major contributors to the mortality gap between Indigenous and other Australians. Most chronic diseases are rarely cured and do not usually resolve spontaneously. They persist over time, and can become immediately life threatening (for example, heart attacks associated with chronic circulatory diseases).

How is the gap measured?

In this analysis, the mortality gap is measured in terms of potential years of life lost (PYLL), which takes into account both the number of deaths and the age at which death occurs.

How much does chronic disease contribute to the mortality gap?

About 80% of the mortality gap for Indigenous Australian aged 35 to 74 years is due to chronic disease. The gap is caused by higher rates of chronic disease at younger ages as well as increased death rates associated with chronic disease.

Which chronic diseases contribute to the gap?

Most of the gap due to chronic disease can be attributed to twelve specific diseases (see Figure 1). The major contributors are:

- Heart diseases
- Diabetes
- Liver diseases
- Chronic lower respiratory disease
- Cerebrovascular diseases, such as stroke
- Cancer

Does this vary by age and sex?

The major contributors to the mortality gap are similar across all age and sex groups. However, other chronic diseases are also important for particular sex and age-groups.

- For men and women aged 35–54 years, alcoholic liver disease is another important contributor.
- For men and women aged 55–74 years, lung cancer and chronic obstructive pulmonary disease are also important.
- For women aged 35–74 years and men aged 55–74, chronic kidney disease is another important contributor.

How can the gap be reduced?

The observatory paper Contribution of chronic disease to the gap in adult mortality between Aboriginal and Torres Strait Islander and other Australian examines the contribution of chronic diseases to the mortality gap between Indigenous and other Australians, and explores the contribution of particular chronic diseases across age and sex groups.

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Figure 1: Main chronic diseases contributing to the mortality gap, people aged 35 to 74 years, 2006

Note: IHD = Ischaemic heart disease

