

Cardiovascular disease fact sheet: Prevalence of coronary heart disease in Western Australia

Coronary heart disease in Western Australia

Coronary heart disease (CHD), also known as ischaemic heart disease, is the largest single cause of death in Australia. It is the most common of all cardiovascular diseases, and is caused by blockages in the blood vessels that supply blood to the heart. There are 2 major clinical forms of CHD—heart attack (often known as acute myocardial infarction) and angina. Coronary heart disease is largely preventable, as many of its risk factors are modifiable (AIHW 2014b).

What is in this fact sheet?

This fact sheet presents the prevalence of CHD in Western Australia in 2010—that is, the number of people who had at least 1 hospital admission for CHD in the previous 10 years and were still alive on 30 June 2010.

Linked hospitalisation and mortality data from Western Australia were used to calculate the prevalence of coronary heart disease. Use of this linked data allows individuals to be followed over time, giving a more accurate estimate of prevalence, as individuals with multiple hospitalisations are only counted once and people who have died are excluded. This measure of prevalence has the advantage of being based on clinical diagnoses rather than self reported information, but it might miss less severe cases that do not result in hospitalisation.

While the data presented here for Western Australia only may not be nationally representative, it may inform how coronary heart disease could be monitored in other jurisdictions using linked data.

Who has coronary heart disease?

Between 2000 and 2010, an estimated 65,100 people had CHD in Western Australia and were still alive in 2010.

Mostly older people

The vast majority (64%) of prevalent CHD cases were aged 65 and over, including 12% aged 85 and over. Only 3.1% were aged less than 45.

Fast facts

65,100 people in Western Australia had CHD between 2000 and 2010 and were still alive in 2010 (2.8% of the population).

6 in 10 cases of CHD occurred in those aged **65 and over**.



65% of cases of CHD occurred in **males**.



The CHD prevalence rates were highest in people aged 85 and over (23%)—almost twice as high as for those aged 70–74 (14%), and over 3 times as high as for those aged 60–64 (7.1%) (Table 1).

Mostly men except in the very old

There were almost twice as many males (42,200) with CHD as females (22,900). But for those aged 85 and over, this was reversed, with 4,400 women living with CHD compared with 3,200 men, reflecting the longer life span of women.

Overall, prevalence rates were twice as high in males as females, with the greatest gap in the 60–64 age group (about 3 times as high), and the smallest in the 85 and over age group (1.4 times as high) (Figure 1).

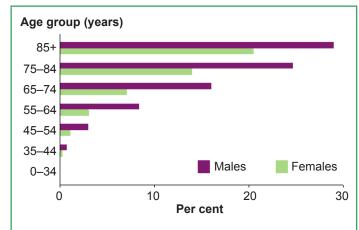


Figure 1: Prevalence of coronary heart disease, by age and sex, Western Australia, 30 June 2010

Table 1: Prevalence of coronary heart disease, by age and sex, Western Australia, 30 June 2010

Age group (years)	Men		Women		Persons	
	Number	Per cent	Number	Per cent	Number	Per cent
0–19	11	0.0	11	0.0	22	0.0
20–24	21	0.0	10	0.0	31	0.0
25–29	42	0.0	27	0.0	69	0.0
30–34	118	0.1	41	0.1	159	0.1
35–39	305	0.4	155	0.2	460	0.3
40–44	901	1.1	344	0.4	1,245	0.7
45–49	1,749	2.1	622	0.8	2,371	1.4
50–54	3,039	3.9	1,090	1.4	4,129	2.7
55–59	4,505	6.6	1,670	2.5	6,175	4.5
60–64	6,289	10.4	2,171	3.7	8,460	7.1
65–69	6,154	14.0	2,491	5.8	8,645	9.9
70–74	6,080	18.6	2,961	8.7	9,041	13.6
75–79	5,409	23.3	3,280	12.1	8,689	17.3
80–84	4,348	26.6	3,564	16.3	7,912	20.7
85+	3,258	29.0	4,439	20.5	7,697	23.4
Total	42,229		22,876		65,105	

Notes

- 1. Prevalence is defined as the number of people who had at least 1 hospital admission for CHD in the previous 10 years and were still alive on 30 June 2010.
- 2. Prevalence of CHD is estimated using linked hospitalisation and mortality data (International Classification of Diseases 10th Revision—ICD-10 and ICD-10-AM codes I20-I25) from Western Australia. Refer to AIHW 2014a for a detailed explanation on the method used to link the data.
- 3. This measure of prevalence might miss less severe cases of CHD that did not result in hospitalisation.

Source: AIHW analysis of Western Australia linked hospitalisation and deaths data sets.

References

AIHW 2014a. Acute coronary syndrome: validation of the method used to monitor incidence in Australia. Cat. no. CVD 68. Canberra: AIHW.

AIHW 2014b. Cardiovascular disease, diabetes and chronic kidney disease: Australian facts: prevalence and incidence. Cardiovascular, diabetes and chronic kidney disease series no. 2. Cat. no. CDK 2. Canberra: AIHW.

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Where can I find out more?

For more information, go to: <www.aihw.gov.au/cardiovascular-disease/>.

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