

HEART, STROKE *and* VASCULAR *diseases*

AUSTRALIAN FACTS

NATIONAL CENTRE FOR
MONITORING CARDIOVASCULAR DISEASE

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PREFACE

Despite successes in the fight against heart, stroke and vascular diseases in Australia in recent decades, these diseases continue to have a considerable impact on the health of Australians and on the health care system. This has been recognised by Australian Health Ministers who made cardiovascular health one of five National Health Priority Areas. This focus has intensified the demand for up-to-date information on cardiovascular disease and its impact on the Australian population.

Heart, Stroke and Vascular Diseases, Australian Facts is the first of a biennial series which will provide an overview of the latest information on cardiovascular disease and its major components.

The report brings together information on a range of areas including risk factors, disease prevalence and incidence, treatment, management and health care costs.

Data on high-risk population groups such as the Indigenous population and people who are at a socioeconomic disadvantage are included, as are data on people living in rural and remote areas of Australia.

The report will be relevant to policy makers, health professionals and researchers, and will be particularly useful to the broader community and interest groups as a compendium of data on cardiovascular disease. Data are presented in a 'user-friendly' manner, and key sources of data and further information have been provided.

The report was prepared by the National Centre for Monitoring Cardiovascular Disease at the Australian Institute of Health and Welfare, with funding support from the Heart Foundation of Australia. It represents an important collaboration between Australia's national agency for health and welfare statistics and information, and Australia's lead agency in the continuing fight against cardiovascular disease.

The report replaces the popular series of *Heart & Stroke Facts* produced by the Heart Foundation of Australia up to 1996.

The report is available on the AIHW web site. Future editions of the report will provide updated data and new information.

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HIGHLIGHTS

- Cardiovascular disease refers to heart, stroke and vascular diseases. Much progress has been made in the fight against cardiovascular disease in Australia. Death rates have fallen dramatically, some risk factors have improved, and there have been major advances in treatment and care.
- Death rates from coronary heart disease peaked in 1968 and have fallen since by over 60%. The fall in death rates was initially due to lower heart attack rates but, more recently, improved survival after a heart attack has played an important part as well.
- Death rates from stroke were fairly steady during the 1950s and 1960s and have since fallen by about 68%. A decline in attack rates is likely to have been the main reason for the fall in national stroke death rates.
- Nevertheless, cardiovascular disease continues to place a heavy burden on Australians in terms of illness, disability and death, and its health care costs exceed those of any other disease. These issues are expected to become more acute over the next decades with the growing number of elderly Australians, among whom cardiovascular disease is most common.
- About 2.8 million Australians, 16% of the population, had cardiovascular conditions in 1995.
- For a 40-year-old, the risk of having coronary heart disease at some time in their future life is 1 in 2 for men and 1 in 3 for women.
- For a 45-year-old, the risk of having a stroke before age 85 is 1 in 4 for men and 1 in 5 for women.
- Cardiovascular disease is ahead of cancers and other groups of causes of death in Australia in 1997, accounting for 52,641 deaths, 41% of all deaths.
- Coronary heart disease is the largest single cause of death in Australia, claiming 29,051 lives in 1997. Every day, around 80 Australians die from coronary heart disease.
- Stroke is Australia's second greatest single killer after coronary heart disease, claiming 12,133 lives in 1997. It is the leading cause of long-term disability in adults.
- People in lower socioeconomic groups are more likely to die from cardiovascular disease than those in higher socioeconomic groups.
- Indigenous Australians die from cardiovascular disease at twice the rate of other Australians. The difference is even greater among those aged 25–64, where Indigenous death rates were 7 and 9 times those of other Australian men and women respectively in 1995–97.
- Prevalence of rheumatic heart disease among Indigenous Australians is one of the highest in the world.
- Indigenous Australians are more likely to smoke tobacco, not participate in leisure-time physical activity, be obese and have diabetes than other Australians. These are all risk factors for cardiovascular disease.
- Much of the death, disability and illness caused by cardiovascular disease is preventable.
- In 1995, over 10 million adult Australians (about 80% of the adult population) had at least one of the following cardiovascular risk factors: tobacco smoking, physical inactivity, high blood pressure, or overweight. Four in 5 men and 3 in 4 women had at least one of these risk factors.
- In a 1995 survey, over 4.5 million adult Australians (over one-third of the adult population) reported doing no leisure-time physical activity in the 2 weeks prior to interview. People who do not participate in regular physical activity are almost twice as likely to die from coronary heart disease as those who participate.
- Almost 3.2 million adult Australians (around 24% of the adult population) in 1995 were at risk of developing cardiovascular disease and cancers from smoking tobacco products.
- Around 2.2 million adult Australians (17% of the adult population) had high blood pressure and/or were on treatment for the condition in 1995. High blood pressure increases the risk of cardiovascular disease by 2 to 4 times.

- Around 7.4 million adult Australians (56% of the adult population) were overweight in 1995. Almost 2.5 million (19% of the adult population) of those were obese. On average, men in 1995 weighed 3.6 kg more than their counterparts in 1980, and women 4.8 kg more. People who are overweight or obese have a higher risk of coronary heart disease, stroke, heart failure and type 2 diabetes.
- Over 350,000 Australians (2% of the population) in 1995 reported having type 1 or type 2 diabetes. People with diabetes are at an increased risk of developing coronary heart disease, stroke and peripheral vascular disease.
- Cardiovascular disease is the most costly disease for the health system in Australia. In 1993–94, it accounted for \$3.7 billion, 12% of total direct health system costs.
- Cardiovascular diseases consuming most health system resources were coronary heart disease (\$894 million), high blood pressure (\$831 million) and stroke (\$630 million).
- In 1996–97, there were 421,516 hospitalisations for cardiovascular conditions (8% of all hospitalisations).
- Although men and women aged over 64 represent only 12% of the total population, they account for almost 60% of hospitalisations for cardiovascular conditions.
- The average length of stay in hospital for cardiovascular conditions fell from 7.6 days in 1993–94 to 5.9 days in 1996–97.
- During 1994 there were 19,409 heart surgery procedures. By far the most common heart operation was coronary artery bypass grafting (CABG) at 14,941 procedures.
- There were 11,348 coronary angioplasty procedures performed in 1995. Data indicates that stents were deployed in one-third of these patients.
- A total of 11,878 computerised tomography (CT) brain scans and 4,478 carotid endarterectomies were performed for stroke during 1996–97.
- 40.6 million drug prescriptions for cardiovascular drugs were dispensed in the community in 1997. This represents one-fifth of all prescriptions.
- The cost of cardiovascular drugs amounted to \$1,105 million, 34% of all costs for prescription drugs listed in the Pharmaceutical Benefits Scheme in 1997.
- Australian death rates from coronary heart disease rank towards the middle of the 17 countries compared (ranked tenth lowest for males and females). Coronary heart disease death rates tend to be low in Asian and Mediterranean countries and highest in the Russian Federation.
- Stroke death rates in Australia are among the lowest of the 17 countries compared (ranked fifth lowest for males and females). The Australian stroke death rates for males were still one-third higher than those recorded in the United States. Females in France and Switzerland have the lowest death rates for stroke. Australian females have 1.4 times their rate.