

Avoidable mortality (preventable and treatable)

Indicators of avoidable mortality can provide a starting point to assess the effectiveness of public health and health care systems in reducing premature deaths from various diseases and injuries. However, further analysis is required to assess more precisely different causes of potentially avoidable deaths and interventions to reduce them.

In 2019, over 1 million premature deaths across EU countries could have been avoided through better prevention and health care interventions. This amounts to about two-thirds of deaths under age 75. Of these deaths, most (644 000 or 64% of the total) were considered preventable through effective primary prevention and other public health measures, while slightly more than one-third (371 000 or 36%) were considered treatable through more effective and timely health care interventions.

Lung cancer, ischaemic heart diseases (of which half are deemed to be preventable), alcohol-related deaths and transport and other accidents accounted for more than half of preventable mortality in the EU (Figure 6.1). Other major causes included chronic obstructive pulmonary diseases (COPD) often related to smoking, stroke (of which half are deemed to be preventable) and suicide.

The main treatable causes of mortality include ischaemic heart disease (of which half are deemed to be treatable), colorectal cancer, breast cancer and stroke (of which half are considered to be treatable). Together, these accounted for nearly 60% of all deaths that could be avoided through the provision of timely and effective treatment.

Preventable mortality rates in 2019 were about three times lower in Cyprus, Italy and Malta compared with Hungary, Latvia, Romania and Lithuania (Figure 6.2). Higher rates of premature death in these countries were mainly due to much higher mortality from ischaemic heart disease, accidents and alcohol-related deaths, as well as lung cancer in Hungary.

Mortality rates from treatable causes were also about three times lower in some Western and Northern European countries like Sweden, the Netherlands, France, Spain and Luxembourg than in Central and Eastern European countries such as Romania, Bulgaria, Latvia and Lithuania. The higher rates in the latter group of countries were mainly driven by higher mortality rates from ischaemic heart disease, stroke and some treatable cancers.

The COVID-19 pandemic will have a large impact on avoidable mortality in 2020 and 2021, particularly on preventable mortality as COVID-19 deaths were deemed to be preventable through public health interventions and vaccinations.

Definition and comparability

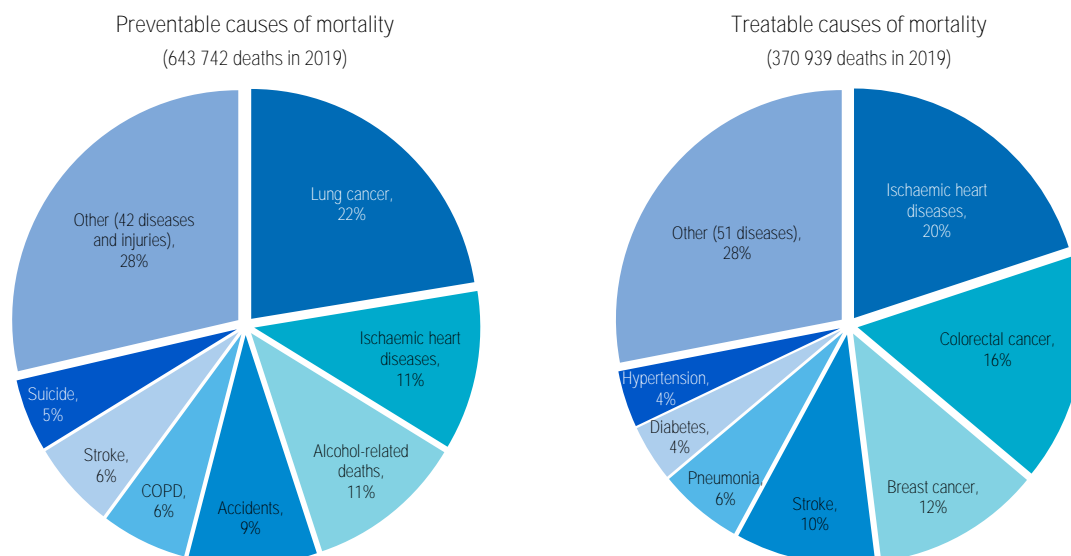
The data are based on the joint OECD and Eurostat lists of avoidable mortality, including a list of preventable and treatable causes of mortality. Preventable mortality is defined as causes of death that can be mainly avoided through effective public health and primary prevention interventions (i.e. before the onset of diseases/injuries, to reduce incidence). Treatable causes of mortality is defined as causes of death that can be mainly avoided through timely and effective health care interventions, including secondary prevention and treatment (i.e. after the onset of diseases, to reduce case-fatality).

The attribution of causes of death to the preventable or treatable mortality list was based on the criterion of whether it is predominantly prevention or health care interventions that can reduce death. Causes of death that can be both largely prevented and treated once they have occurred were attributed to the preventable category on the rationale that if these diseases are prevented, there would be no need for treatment. In cases when there was no strong evidence of predominance of preventability or treatability (e.g. ischaemic heart disease, stroke, diabetes, hypertension), the causes were allocated on a 50%-50% basis to the two categories to avoid double-counting the same cause of death. The age threshold of premature mortality is set at 74 years (inclusive) for all causes (OECD/Eurostat, 2022^[1]).

References

- OECD/Eurostat (2022), "Avoidable mortality: OECD/Eurostat lists of preventable and treatable causes of death", OECD, Paris/Eurostat, Brussels, <https://www.oecd.org/health/health-systems/Avoidable-mortality-2019-Joint-OECD-Eurostat-List-preventable-treatable-causes-of-death.pdf>. [1]

Figure 6.1. Main causes of avoidable mortality in the European Union, 2019

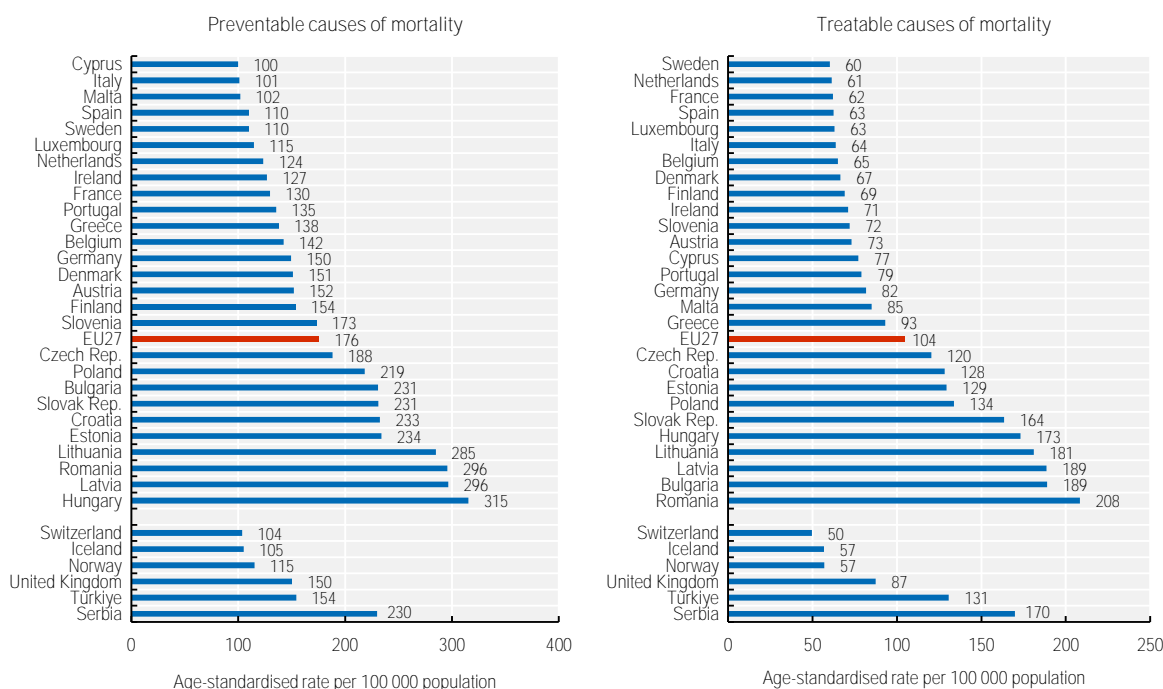


Note: Data are based on the OECD/Eurostat revised definitions and lists of preventable and treatable causes of mortality. The lists attribute half of all deaths for some diseases (e.g. ischaemic heart diseases, stroke, diabetes and hypertension) to the preventable mortality list and the other half to treatable causes, so there is no double-counting of the same death. COPD = chronic obstructive pulmonary diseases.

Source: Eurostat Database (data refer to 2019, except for France which refers to 2017).

StatLink  <https://stat.link/h2495x>

Figure 6.2. Mortality rates from avoidable causes, 2019



Note: The EU average is unweighted. 1. Data refer to 2017 for France and 2018 for the United Kingdom.

Source: Eurostat Database.

StatLink  <https://stat.link/djqt7>



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