Mortality from cardiovascular diseases

Cardiovascular diseases (CVD) are the number one cause of death globally and were estimated to have caused over 2 million deaths in the WHO Region of the Americas in 2019, accounting for 28% of all deaths (WHO, 2022[1]). CVD covers a range of diseases related to the circulatory system, including ischaemic heart disease (IHD) and cerebrovascular disease. Ischemic heart disease is caused by the accumulation of an atherosclerotic plaque in the inner wall of a coronary artery, restricting blood flow to the heart. Cerebrovascular diseases refer to a group of diseases that relate to problems with the blood vessels that supply the brain.

The majority of CVD is caused by risk factors that can be controlled, treated, or modified, such as high blood pressure, high blood glucose, high blood cholesterol, obesity (see section "Overweight or obese adults" in Chapter 4), lack of physical activity, tobacco use (see section "Tobacco" in Chapter 4), and alcohol consumption.

CVD is the leading cause of death in the LAC region (see section on "Mortality from all causes"). Average mortality from CVD decreased both in LAC and OECD between 2000 and 2020, although the reduction was considerably smaller in LAC (-16% versus -36%) (Figure 3.16). Countries like Belize, Colombia, and Trinidad and Tobago have experienced the largest decreases in CVD mortality rates of over -35% in the period, with Belize being the only LAC country above the OECD average reduction. Notably, Dominican Republic, Honduras, Ecuador and Jamaica were the only countries that have increased CVD mortality in the period, especially the Dominican Republic which went from 228 to 311 deaths per 100 000 population.

Mortality from CVD exceeded 400 deaths per 100 000 population amongst men in Guyana and Haiti in 2019 (Figure 3.17). Peru, Panama, Chile, Colombia and Costa Rica were the only countries below the OECD average of 164 male deaths per 100 000 population. For women, the highest rates were observed in Haiti and Guyana, with 475 and 399 deaths per 100 000 population, respectively. In contrast, Peru had the lowest figures for women in the region, with 77 deaths per 100 000 population being alongside Panama, Costa Rica and Chile the only countries below the OECD average of 112.

Together, IHD and stroke comprise 78% of all CVD deaths in all LAC countries combined, very similar to the 77% in OECD countries, but deaths due to haemorrhagic stroke in LAC are proportionally 40% more than those in the OECD (14% versus 10%) (Figure 3.18). IHD deaths represent over 60% of all CVD deaths in El Salvador, Mexico, Nicaragua and Guatemala, while 35% or less in Saint Lucia, Jamaica, Dominica, and Saint Kitts and Nevis. In Jamaica, stroke deaths take 45% of all CVD deaths, while these represent less than 25% in Costa Rica, Mexico, El Salvador, Colombia and Nicaragua.

Success of reducing the mortality rates from CVD in OECD countries owes to a decline in smoking rates, expanded health system's capacity to control high cholesterol and blood pressure, and greater access to effective care in the event of an acute episode such as a stroke or heart attack (see indicator "In-hospital mortality following acute myocardial infarction and stroke" in Chapter 7) (OECD, 2015_[2]). As the proportion of older people increases in the LAC region (see section "Demographic trends" in Chapter 9), demand for healthcare will increase and the complexity and type of care that CVD patients require will change due to mounting multi-morbidity (OECD, 2022_[3])

Definition and comparability

See indicator "Mortality from all causes" in Chapter 3 for definition, source, and methodology underlying mortality rates.

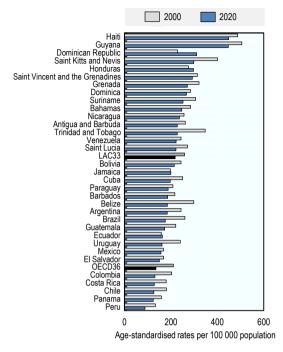
References

- OECD (2022), Primary Health Care for Resilient Health Systems in Latin America, OECD Health Policy Studies, OECD Publishing, Paris, https://doi.org/10.1787/743e6228-en.

 OECD (2015), Cardiovascular Disease and Diabetes: Policies for Better Health and Quality of Care, OECD Health Policy Studies, OECD Publishing, Paris, https://doi.org/10.1787/9789264233010-en.

 WHO (2022), Global health estimates: Leading causes of death,
 - $\underline{\text{https://www.who.int/data/gho/data/themes/mortality-and-global-health-estimates/ghe-leading-causes-of-death}.$

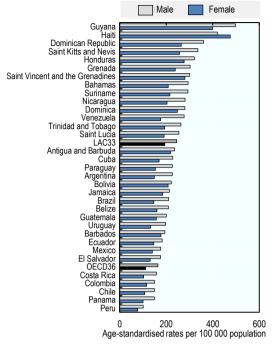
Figure 3.16. Cardiovascular disease, estimated mortality rates, 2000 and 2020 (or nearest year)



Source: Global Burden of Disease (2019), IHME.

StatLink https://stat.link/9lc730

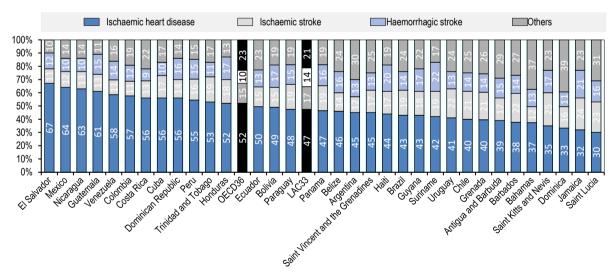
Figure 3.17. Cardiovascular disease, estimated mortality rates, by sex, 2020 (or nearest year)



Source: Global Burden of Disease (2019), IHME.

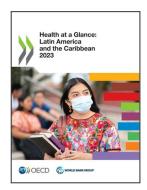
StatLink https://stat.link/plerh1

Figure 3.18. Proportions of deaths per type of cardiovascular disease, 2019 (or nearest year)



Source: Global Burden of Disease (2019), IHME.

StatLink https://stat.link/3exmpt



From:

Health at a Glance: Latin America and the Caribbean 2023

Access the complete publication at:

https://doi.org/10.1787/532b0e2d-en

Please cite this chapter as:

OECD/The World Bank (2023), "Mortality from cardiovascular diseases", in *Health at a Glance: Latin America and the Caribbean 2023*, OECD Publishing, Paris.

DOI: https://doi.org/10.1787/c038221a-en

This document, as well as any data and map included herein, are without prejudice to the status of or sovereignty over any territory, to the delimitation of international frontiers and boundaries and to the name of any territory, city or area. Extracts from publications may be subject to additional disclaimers, which are set out in the complete version of the publication, available at the link provided.

The use of this work, whether digital or print, is governed by the Terms and Conditions to be found at http://www.oecd.org/termsandconditions.

