

ITALY – OCTOBER 2022

Status of Cardiovascular Disease (CVD) and Non-communicable diseases (NCD)

Country Demographics

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World Bank
Classification
High
income



71.35%

of population living in **urban** areas

Percentage of adults who are **overweight**

(body mass index (BMI) of 25 kg/m² or higher):

male: 65.3%
female: 51.5%



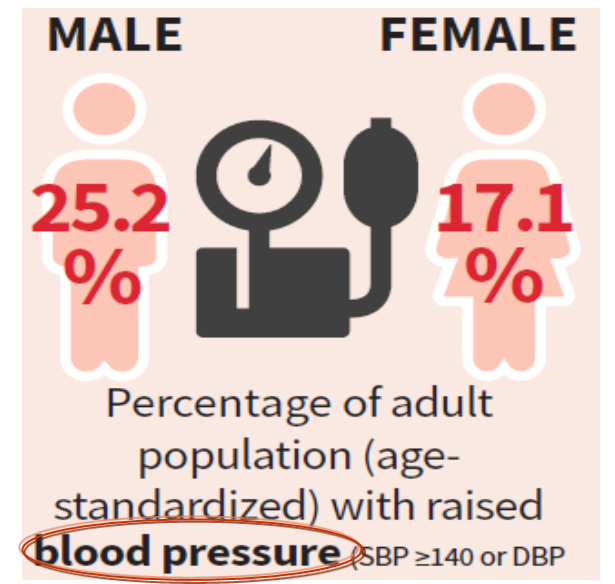
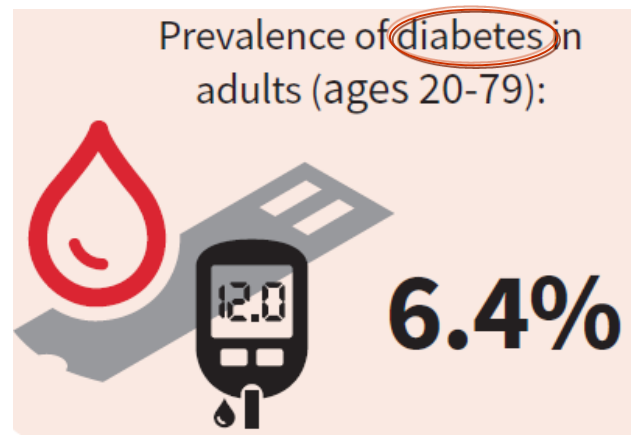
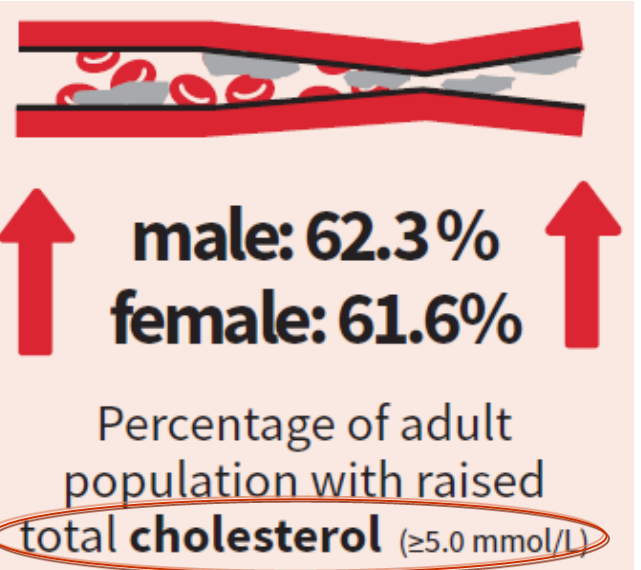
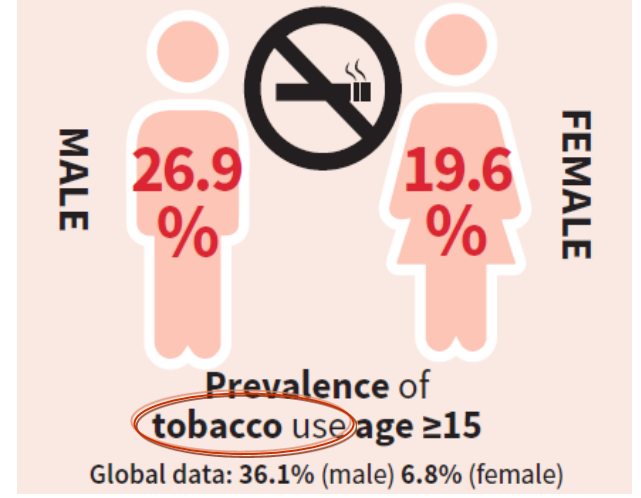
Percentage of adults (age-standardized estimate) who are **insufficiently active (less than 150 minutes)** of moderate intensity physical activity per week, or less than 75 minutes of vigorous-intensity physical activity per week):

male: 36.2%
female: 46.2%



Percentage of adolescents (ages 11-17) who are insufficiently active (**less than 60 minutes** of moderate- to vigorous intensity physical activity daily):

male: 85.9%
female: 91.5%



Total mortality due to CVD
(% of deaths):

male: 32.84%
female: 40.51%

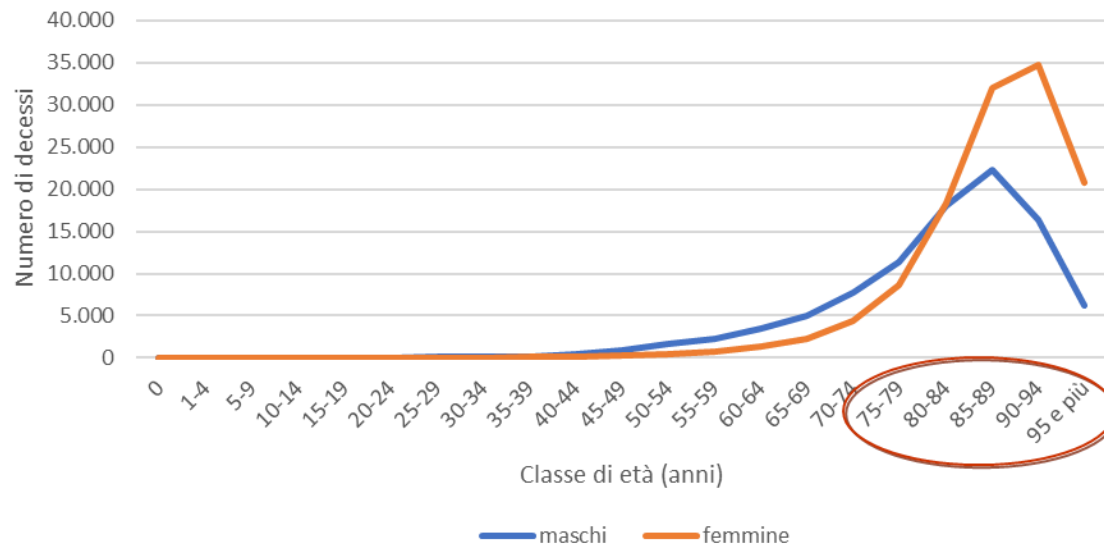
Premature mortality due to CVD (death during 30-70 years of age) (% of deaths):

3%

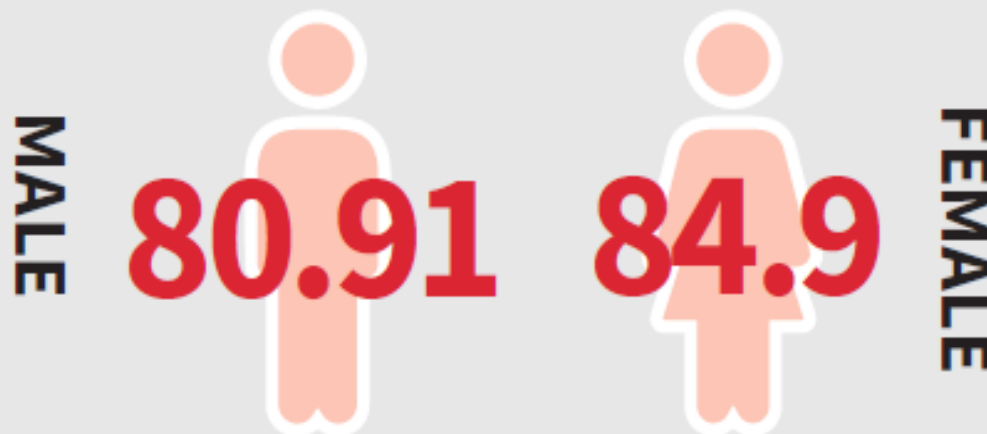
Premature CV mortality <70 years of age (ISTAT 2019)

	Males	Females
<65 years	9,308 (73.1%)	3,425 (26.9%)
<70 years	14,324(71.6%)	5,689 (28.4%)

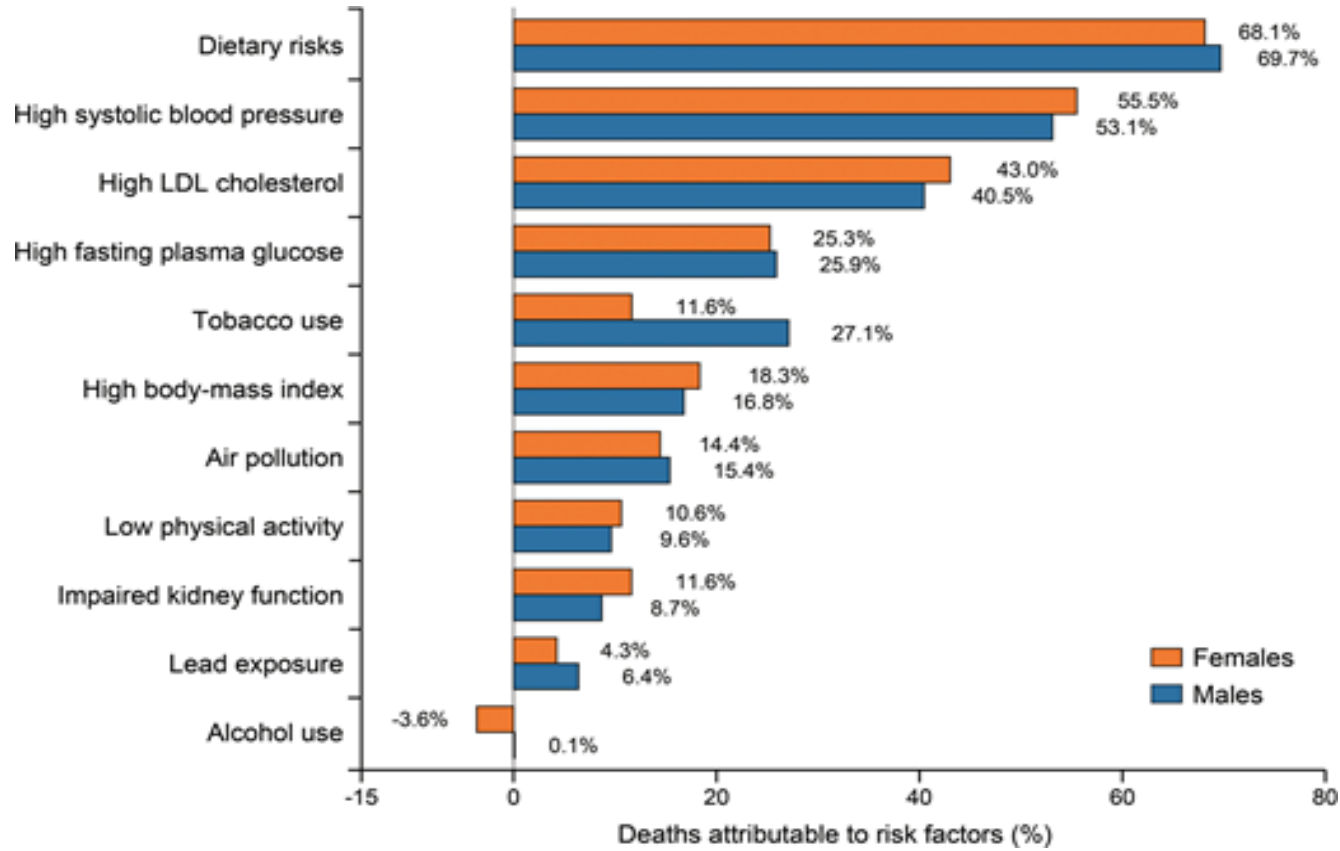
Deaths from CVD by gender and age group. Italy 2019, ISTAT



Life expectancy at birth (in years):



Percentage contributions of major risk factors to ischaemic heart disease age-standardized deaths by sex, 2017



GBD 2017 Diet Collaborators, Lancet, 2019

Modifiable risk factors!



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Cuore e vasi

TRIMESTRALE DI AGGIORNAMENTO ED INFORMAZIONE CARDIOVASCOLARE

CARDIOLOGIA
PER IL MEDICO
DI BASE

Iniziative ed alleanze per la prevenzione cardiovascolare

Roberto Volpe



Prof. Christiaan Barnard

50 ways to a Healthy Heart



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ITALY

**Health System
Capacity**



39.5

Number of physicians
(per 10,000 population)



66

Number of nurses
(per 10,000 population)







31.9

Number of hospital beds
(per 10,000 population)

CITIZEN/PATIENT CARE

Essential Medicines and Interventions

Following essential medicines generally available in primary care facilities in the public health sector:





ACE inhibitors:		Metformin:	
Aspirin:		Insulin:	
Beta blockers:		Warfarin:	
Statins:		Clopidogrel:	

NOTE 1

Additional «non-essential» medicines/interventions available

Clinical Practice and Guidelines

Locally-relevant (national or subnational level):

Clinical tool to assess CVD risk:	
CVD prevention (within the last 5 years):	
Treatment of tobacco dependence:	
Detection and management of Atrial Fibrillation:	

NOTE 2








Additional features are diffusion of defibrillators, etc.

KEY: No data  Not in place  In process/ partially implemented  In place 

CVD policies – governance - stakeholders

Cardiovascular Disease Governance

A National strategy or plan that addresses:

- CVDs and their risk factors specifically: 
- NCDs and their risk factors: 
- A national tobacco control plan: 
- A national multisectoral coordination mechanism for tobacco control: 
- A national surveillance system that includes CVDs and their risk factors: 
- Legislation that mandates essential CVD medicines at affordable prices: 
- Policies that ensure screening of individuals at high risk of CVDs: 

Stakeholder action

- NGO advocacy for CVD policies and programmes: 
- Active involvement of patients' organizations in advocacy for CVD prevention and management: 
- Involvement of civil society in the development and implementation of a national CVD prevention and control plan: 
- Specific activities by cardiology professional associations aimed at 25% reduction in premature CVD mortality by 2025: 
- Hypertension screening by businesses at workplaces: 

KEY:

No data



Not in place



In process/ partially implemented



In place



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TAKE HOME MESSAGES

- STILL HIGH PREVALENCE OF MODIFIABLE CVD RISK FACTORS → **INTERVENTION!**
- PREMATURE MORTALITY NOT SO ELEVATED (M >> F), BUT STILL EXISTENT → **INTERVENTION!**
- PERSISTENTLY HIGH IMPACT ON % OF TOTAL DEATH (F > M)
- EXCELLENT AVAILABILITY OF DIAGNOSTIC AND THERAPEUTIC TOOLS, BUT LOW ADHERENCE → **INTERVENTION!**
- EXCELLENT AVAILABILITY OF GUIDELINES AND POLICY DOCUMENTS FOR PREVENTION, BUT NOT COMPLETELY EFFECTIVE IMPLEMENTATION IN THE SOCIETY → **INTERVENTION!**