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

Country Demographics

World Bank Classification
High income

Life expectancy at birth (in years):
MALE 81.2
FEMALE 85.3

86.2% of population living in urban areas

Prevalence of tobacco use age ≥15
Global data: 36.1% (male) 6.8% (female)
MALE 15.6%  FEMALE 11.5%

Percentage of adult population (age-standardized) with raised blood pressure (SBP ≥140 or DBP ≥90)
Global data: 24.1% (male) 20.1% (female)
MALE 25.4%  FEMALE 20.3%

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: 27%  female: 33.6%

Percentage of adolescents (ages 11-17) who are insufficiently active (less than 60 minutes of moderate- to vigorous intensity physical activity daily):
male: 86.8%  female: 91.4%

Prevalence of diabetes in adults (ages 20-79):
6.4% 2.8%

Global data: 24.1% (male) 20.1% (female)

Percentage of adult population with raised total cholesterol (≥5.0 mmol/L)
Global data: 38.9%
MALE 32.4%  FEMALE 33.2%

Prevalence of premature CVD mortality attributable to tobacco (%)
11%

Percentage of adolescents (ages 11-17) who are insufficiently active (less than 60 minutes of moderate-intensity physical activity daily):
male: 86.8%  female: 91.4%

Total mortality due to CVD (% of deaths):
male: 28.63%  female: 31.93%

Premature mortality due to CVD (death during 30-70 years of age) (% of deaths):
3%
### Cardiovascular Disease Governance

A National strategy or plan that addresses: CVDs and their risk factors specifically:  
A national tobacco control plan:  
A national multisectoral coordination mechanism for tobacco control:  
A national surveillance system that includes CVDs and their risk factors:  
Policies that ensure screening of individuals at high risk of CVDs:  

### Essential Medicines and Interventions

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

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

### 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:  

### 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:  
- Involvement of civil society in the national multisectoral coordination mechanism for NCDs/CVDs:  
- Specific activities by cardiology professional associations aimed at 25% reduction in premature CVD mortality by 2025:  
- Hypertension screening by businesses at workplaces:  

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For more information, please email info@worldheart.org

Source References: Global Health Data Exchange; WHO Global Health Observatory data repository; WHO NCD Document repository; Country specific publications.