Latest estimates for global causes of death and disease

STAR HEALTH DESK

The Global Burden of Disease study (GBD) published its latest global estimates for the state of the world's health in The Lancet. The GBD is the only annual, comprehensive, peer-reviewed assessment of global trends in health, providing global and national estimates on more than 330 diseases, causes of death, and injuries in 195 countries and territories worldwide.

Life expectancy

In 2016, the total number of live births was 128.8 million; the total number of deaths was 54.7 million (up from 42.8 million in 1970). Mortality rates have declined across all age groups, with the greatest progress made in under 5 mortality. Deaths among children under the age of 5 decreased to fewer than 5 million in 2016 for the first time, down from 16.4 million in 1970.

Now, the average global life expectancy for women is 75.3 years, and 69.8 years for men. Japan has the highest life expectancy (83.9 both sexes combined), and the Central African Republic has the lowest (50.2 years).

As life expectancy increases, so too do the years lived with ill health. The proportion of total life spent with ill health is higher for lower income countries, compared to higher income countries.

Several countries, including Ethiopia, the Maldives, Nepal, Niger, Portugal and Peru have seen large increases in life expectancy, far beyond what would be expected based on the country's level of develop-

HIGHLIGHTS

● Poor diet is associated with 1 in 5 deaths, and tobacco caused 7.1 million deaths

● In 2016, 1.1 billion people were living with mental health and substance use disorders, and major depressive disorders ranked in the top 10 causes of ill health in all but 4 countries worldwide

● Non-communicable diseases caused 72% of all deaths worldwide, with ischaemic heart disease the leading cause of premature mortality in most regions

● Deaths from firearms, conflict and terrorism have increased globally

● Several exemplar countries – including Ethiopia, the Maldives, Nepal, Niger, Portugal and Peru – had higher life expectancies than would be expected based on their levels of development alone

ment. These exemplar countries may provide information on successful policies that have helped accelerate progress on health.

Diseases, causes of death and disability

Non-communicable diseases accounted for 72.3% of all deaths (39.5 million) in 2016. Ischaemic heart disease was the leading cause of premature mortality in all regions, apart from in low income countries where the leading cause was lower respiratory infections. Globally, ischaemic heart disease caused a total of 9.48 million deaths in 2016 – an increase of 19% globally since 2006. Diabetes caused 1.43 million deaths globally in 2016, an increase of 31.1% since 2006.

In 2016, there were 1.1 billion people living with mental health and substance use disorders, and major depressive disorders ranked in the top ten causes of ill health in all but 4 countries worldwide.

Overall, deaths from infectious diseases have decreased. Exceptions included dengue which saw a significant increase, causing 37800 deaths in 2016 (81.8% increase since 2006), and extensively drug resistant tuberculosis which caused 10900 deaths in 2016 (67.6% increase since 2006).

While significant progress has been made since 2006, 1.03 million people died from HIV/AIDS (45.8% decrease since 2006), 719500 died from malaria (25.9% decrease), and 1.21 million died from tuberculosis (20.9% decrease) in 2016.

Despite an overall decrease in deaths from self-harm and interpersonal violence, there was a rise in the number of deaths from firearms – 67500 from self-harm and 161000 from assault (increase of 4.3% and 5.7% respectively since 2006). Since 2006, the number of deaths from conflict and terrorism has risen significantly, reaching 150500 in 2016 (143% increase since 2006), largely as a result of conflicts in North Africa and the Middle East.

Behavioural and environmental risk factors

Tobacco was responsible for more than 7.1 million deaths. Poor diets were associated with nearly 1 in 5 (18.8%) of all deaths. In particular, diets low in whole grains, fruit, nuts and seeds, fish oils and high in salt were the most common dietary risk factors. In addition, high blood glucose, high blood pressure, high body mass index (BMI), and high total cholesterol, were all in the top ten leading risk factors for death for men and women globally. Because of the strong interrelationship between these risks, the authors note that the true driver is likely to be diet and BMI, exacerbated by blood glucose levels and high blood pressure.

Finally, the authors noted that while a significant number of studies have been added to the GBD study, 27 countries worldwide (mostly in low income countries) do not have comprehensive data on causes of deaths, highlighting the need to improve data collection and data quality in many countries.

HEALTH *bulletin*

Salt intake is associated with a risk of developing type 2 diabetes

Sodium intake may be linked to an increased risk of developing both type 2 diabetes (T2D) and Latent Autoimmune Diabetes in Adults (LADA) says new research being presented at this year's annual meeting of the European Association for the Study of Diabetes (EASD) in Lisbon, Portugal.

The main source of sodium in the diet is through salt. Salt (sodium chloride) is 40% sodium, so that for every 2.5 g of salt consumed, 1 g is sodium. Previous research has suggested that excessive salt consumption may increase the risk of developing T2D, possibly through a direct effect on insulin resistance, and/or by promoting high blood pressure and weight gain.

The study found that sodium intake was associated with an average 65% increase in the risk of developing T2D for each extra gram consumed per day. The effect of sodium intake on the risk of developing LADA was even greater, with a 82% rise for each gram consumed per day. The authors suggest that "These findings may have important implications in the primary prevention of diabetes with adult onset".

Understanding Alzheimer's disease: Tackling it effectively

PROF DR ABU NASIR RIZVI

September is World Alzheimer's Month. A noticeable global rise in the number of sufferers from the disease, which does not yet have a cure – and comparatively very few people are aware of it – has given rise to the need for raising global awareness. 47 million people worldwide are suffering from Alzheimer's, with the number expected to reach 76 million by 2030 and 135.4 million by 2050.

Alzheimer's disease is a type of dementia that causes problems with memory, thinking and behaviour. The most common cause of dementia, 60-70% of all dementia sufferers are victims of Alzheimer's. Since the disease is primarily associated with ageing, and a majority of the sufferers of the disease are above 65, the symptoms of Alzheimer's are often overlooked and considered a part of the common process of ageing.

In fact, 59% of the people worldwide incorrectly believe that Alzheimer's disease is a typical part of ageing. The lack of awareness is concerning especially because every year, there are as many as 7.7 million new cases of the disease, which means that every four seconds, someone around the world is affected by Alzheimer's.

Alzheimer's is a progressive disease, where the dementia symptoms gradually worsen over a number of years. Alzheimer's sufferers live an average of 8 years after their symp-

toms become visible. However, survival can range from 4-20 years, depending on age and other health conditions. There is no effective cure yet for the disease, but current treatments can temporarily slow the worsening of dementia symptoms and improve quality of life for those with Alzheimer's and their caregivers.

Warning signs of the disease are: memory loss, difficulty performing familiar tasks, problems with language, poor or decreased judgment, misplacing things, withdrawal from work or social activities, trouble with images and spatial relationships, changes in mood and behaviour, problems keeping track of things and disorientation to time and place. The signs must be taken seriously because often, they go unnoticed, until the situation worsens and become regular in the sufferer.

The most effective means of tackling the threat of Alzheimer's are: improving quality of life by raising awareness, removing the

stigma surrounding Alzheimer's, and maintaining a healthy lifestyle.

Regular exercise and sleep, as well as maintaining a diet that consists of fresh fruits and vegetables, whole grains, olive oil, nuts, fish, moderate amounts of poultry, eggs, dairy, and red meat only sparingly would help lower the chances of getting Alzheimer's.

An estimated 460,000 people were suffering from dementia in Bangladesh in 2015, and the number is expected to rise to 834,000 in 2030 and 2,193,000 in 2050 respectively. It must be mentioned that the progress of digital healthcare services has made it easier than ever before to get help regarding awareness and healthcare. Only by working together, can we tackle the threat of Alzheimer's disease effectively.

The writer is a Professor of the Department of Neurology at Bangabandhu Sheikh Mujib Medical University (BSMMU).

Antidepressants should be continued for at least a year after treatment response

Patients with anxiety disorders who respond to antidepressants and then stop treatment face increased risk for relapse in the year after treatment discontinuation, finds a meta-analysis in The BMJ.

The analysis included 28 studies in which 5200 patients with anxiety disorders who responded to antidepressants were randomised to either continue treatment or switch to a placebo, after which they were assessed for relapse. Most of the studies had drug company involvement.

During up to 1 year of follow-up, relapse occurred significantly more often with placebo than with treatment continuation (36% vs. 16% of patients). The authors conclude, "On the basis of the evidence presented here, the advice is to continue antidepressants for at least a year [after treatment response]. After this period, no evidence based advice can be provided."

/StarHealthBD

Asthma, a respiratory condition marked by spasms in the bronchi of the lungs, causing difficulty in breathing

Symptoms of asthma

Frequent cough, especially at night

Losing your breath easily or shortness of breath

Feeling very tired or weak when exercising

Decreases or changes in lung function as measured on a peak flow meter

Signs of a cold or allergies (sneezing, runny nose, cough, nasal congestion, sore throat & headache)