

101/2016 - 24 May 2016

Avoidable deaths in 2013

One death out of three in the EU could have been avoided in the light of current medical knowledge and technology

Heart diseases main category

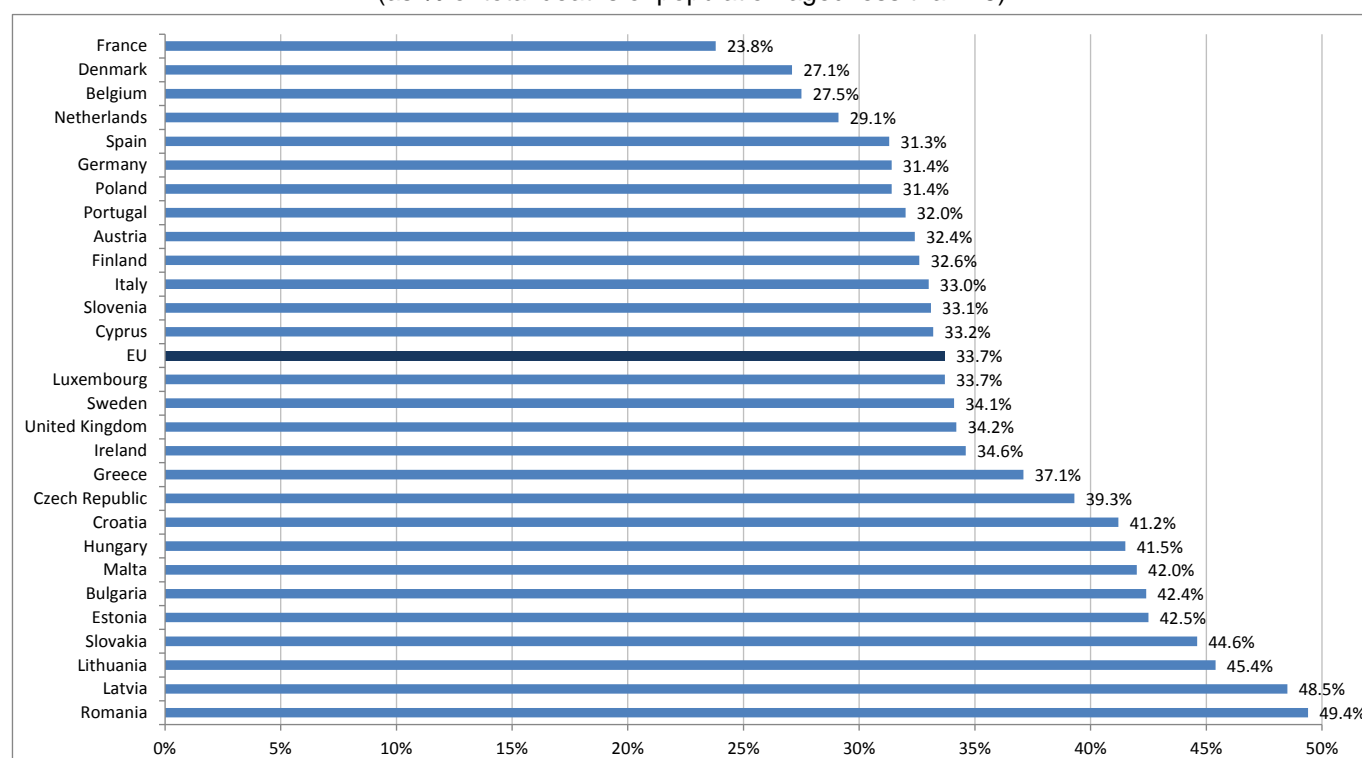
In the **European Union (EU)**, 1.7 million persons aged less than 75 died in 2013. Among them, around 577 500 deaths (or 33.7% of total deaths) could be considered as premature, as they could have been avoided in the light of medical knowledge and technology. Heart attacks (184 800 deaths) and strokes (almost 94 000 deaths) accounted together for almost half (48%) of these total avoidable causes of death of people aged less than 75.

This information on avoidable deaths through optimal health care (i.e. amenable deaths) comes from a report issued by **Eurostat, the statistical office of the European Union**. The concept of avoidable mortality is based on the idea that certain deaths (for specific age groups and from specific diseases) could be 'avoided' – meaning they would not have occurred at this stage – if there had been timely and effective health care in place.

This indicator on amenable mortality is aimed to be used in a global context of health system performance assessments. Assessing the performance of health care systems is of increasing importance in the EU. While the amenable mortality indicator is not meant to be a definite or unique measurement of the quality of health care in the Member States, it provides some indication of the quality and performance of healthcare policies in a country.

Share of avoidable deaths in the light of current medical knowledge and technology in the Member States, 2013

(as % of total deaths of population aged less than 75)



Largest shares of avoidable deaths in Romania and Latvia, lowest in France

The proportions of potentially avoidable deaths through optimal health care among all deaths of persons aged less than 75 in 2013 vary considerably between EU Member States.

The highest shares of avoidable deaths were registered in **Romania** (49.4%) and **Latvia** (48.5%), followed by **Lithuania** (45.4%) and **Slovakia** (44.6%). On the other hand, the share was below 30% in **France** (23.8%), ahead of **Denmark** (27.1%), **Belgium** (27.5%) and the **Netherlands** (29.1%).

Potentially avoidable deaths in the light of current medical knowledge and technology in the EU Member States, 2013

(as % of total deaths of population aged less than 75)

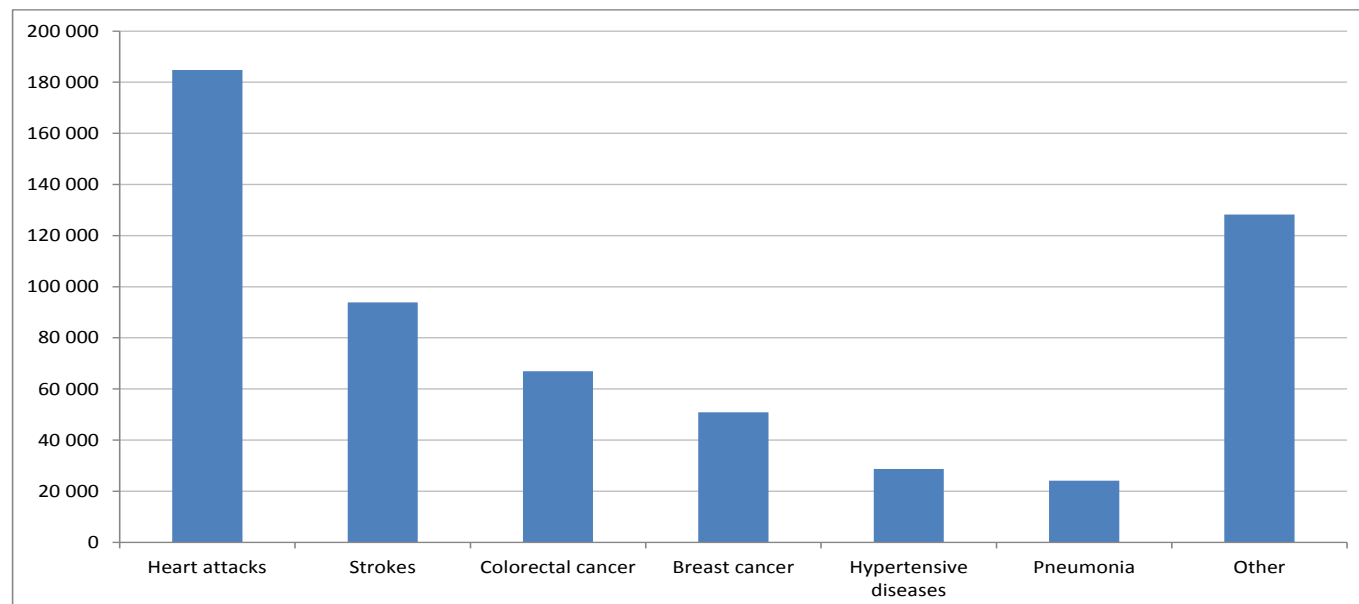
	Absolute number	Share in total deaths
EU	577 535	33.7%
Belgium	9 539	27.5%
Bulgaria	19 017	42.4%
Czech Republic	18 326	39.3%
Denmark	5 231	27.1%
Germany	91 867	31.4%
Estonia	2 770	42.5%
Ireland	3 826	34.6%
Greece	12 022	37.1%
Spain	34 533	31.3%
France	43 617	23.8%
Croatia	7 934	41.2%
Italy	52 098	33.0%
Cyprus	597	33.2%
Latvia	6 478	48.5%
Lithuania	8 441	45.4%
Luxembourg	461	33.7%
Hungary	24 092	41.5%
Malta	476	42.0%
Netherlands	14 039	29.1%
Austria	8 484	32.4%
Poland	56 672	31.4%
Portugal	10 616	32.0%
Romania	54 827	49.4%
Slovenia	2 346	33.1%
Slovakia	11 078	44.6%
Finland	5 934	32.6%
Sweden	8 772	34.1%
United Kingdom	63 442	34.2%
Liechtenstein	28	28.6%
Norway	3 875	31.3%
Switzerland	5 338	28.2%
Serbia	15 838	37.3%

The source dataset can be found [here](#).

A third of potentially avoidable deaths in the EU concerned heart diseases

In the EU in 2013, heart attacks (184 800 avoidable deaths or 32% of total avoidable deaths of persons aged less than 75) accounted by far for the largest share of potentially avoidable deaths. They were followed by strokes (93 900, or 16%), colorectal cancers (67 000 or 12%), breast cancers (50 800 or 9%), hypertensive diseases (28 700 or 5%) and pneumonia (24 100 or 4%).

Main categories of avoidable deaths in the light of current medical knowledge and technology in the EU, 2013



Methods and definitions

The data source is Eurostat statistics on causes of death, which provide information on mortality patterns and form a major element of public health information. Eurostat collects statistics on the causes of death according to a [list](#) of 86 different causes of death.

Data presented in this news release refer to deaths by residents, in or outside their home country.

A death is **amenable** if, in the light of medical knowledge and technology at the time of death, all or most deaths from that cause could be avoided through good quality healthcare. The amenable mortality indicator is aimed to be used in a global context of peer reviewed health system performance assessments. It is complemented with data on preventable deaths, which is another dimension of avoidable mortality.

The indicator provides a warning signal of potential shortcomings in health systems but is not intended to be a definitive or unique measure for monitoring health care across Member States.

The list of avoidable deaths was defined according to a list of ICD codes and specific age groups compiled by the Eurostat Task Force on Satellite Lists. The specific ICD codes and age ranges used to calculate avoidable deaths can be found [here](#). In this news release, heart attacks refer to ischaemic heart diseases (ICD code I20-I25) and strokes refer to cerebrovascular diseases (ICD code I60-I69).

Both the list of diseases and conditions, as well as the age limits reflect current health expectations, medical technology and knowledge, and developments in healthcare public policy, and hence might be subject to change in the future

For more information

Eurostat [website section](#) dedicated to health statistics.

Eurostat [database](#) on causes of death and public health themes.

Eurostat [Statistics Explained](#) article on amenable and preventable deaths statistics.

Eurostat [news release 91/2016](#) of 4 May 2016 on deaths due to heart attacks and strokes in the EU.

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