

Lifestyle factors influencing premature death from noncommunicable diseases

While the Europe Region is on track to significantly reduce premature mortality from the four major noncommunicable diseases by 2020, progress is being jeopardized by lifestyle-related risk factors, including tobacco smoking, alcohol consumption and behaviours leading to overweight or obesity.

Tobacco smoking

WHO estimates that, overall, one in three 15-year-olds in Europe is a tobacco smoker. This rate is the highest in the world. However, the rate varies according to gender: the prevalence of tobacco smoking among males is almost double that among females (38.5% and 20.7%, respectively). In addition, it varies greatly according to country: between the best- and worst-performing countries, there was a threefold difference among males (59.8% vs 18.6%) and almost a hundredfold difference among females (39.7% vs 0.4%). Moreover, the rate is also age dependent. For example, among 11-year-olds, only 1.6% of males and 0.7% of females reported that they smoked at least once per week. However, among 13-year-olds, the percentages increased to 4.2% of males and 3.7% of females (data obtained from WHO's 2016 Health Behaviour in School-aged Children (HBSC) study).

Alcohol consumption

While the level of alcohol consumption in the European Region is on the decline, it is still the highest in the world: in 2014 (the year for which the majority of Member States submitted data to WHO), the average per capita alcohol consumption among people aged 15 years and over in the Region was 8.6 litres of pure alcohol per year. This was only approximately 3% lower than the reported baseline regional average in 2010, indicating that little progress has been made in this area.

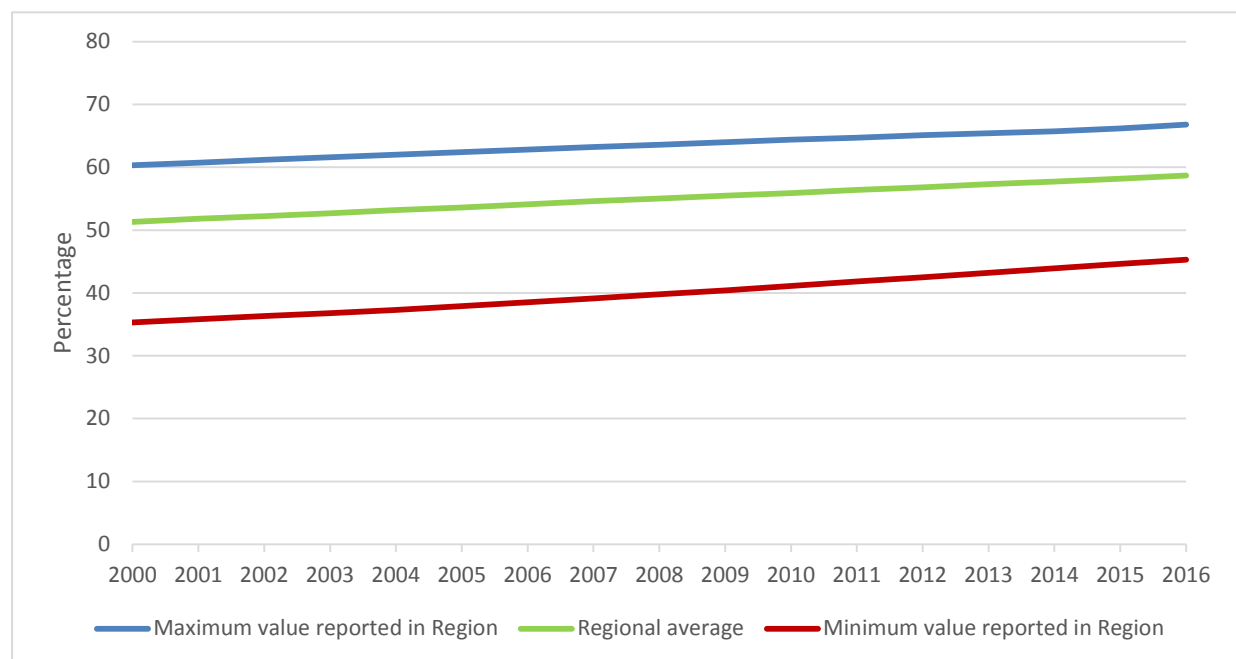
However, differences between Member States in the Region remain large, with the reported national values for annual alcohol consumption in 2014 ranging from 1.1 to 15.2 litres per capita. In addition, national rates of heavy episodic alcohol drinking (at least 60 g of pure alcohol on at least one occasion weekly) varied greatly, from as high as 38.5% to as low as 0.2%. In general, rates of heavy episodic drinking were higher among males than among females.

Overweight and obesity

In people aged 18 years and over, overweight is defined as a body mass index (BMI) ≥ 25 kg/m², and obesity is defined as a BMI ≥ 30 kg/m². According to these definitions, over half of the European population aged 18 years and over is overweight, and almost a quarter is

obese: in 2016, the rates for overweight and obesity were 63% and 21.9%, respectively, among men, and 54.3% and 24.5%, respectively, among women. In addition, the prevalence of overweight and obesity has been on the increase – from 55.9% in 2010 to 58.7% in 2016 for overweight and from 20.8% in 2010 to 23.3% in 2016 for obesity – and is continuing to rise. In most countries, overweight was more prevalent among men, while obesity was more prevalent among women.

Age-standardized prevalence of overweight (defined as BMI ≥ 25 kg/m²) in people aged 18 years and over, WHO estimates (%)



The prevalence of overweight and obesity among young people (aged 11, 13 and 15 years) is also high but varies between countries, genders and age groups: based on the HBSC study cited in the report, 12.4% of females and 21.6% of males were overweight at the age of 15 years, 15% of males and 23.4% of females were overweight at the age of 13 years, and 17.5% females and 26.8% of males were overweight at the age of 11 years. In all three age groups, the prevalence of overweight was higher in southern Europe than in northern Europe.

For further information, visit: <http://www.euro.who.int/en/ehr2018>