





Cardiovascular Disease Scorecards - Italy

ITALY - OCTOBER 2022

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

Country Demographics

World Bank Classification High income



Life expectancy at birth (in years):

§ 80.91





71.35%

of population living in urban areas

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

Total mortality due to CVD (% of deaths):

male: 32.84% female: 40.51%



Percentage of adult population with raised total cholesterol (≥5.0 mmol/L)

Global data: 38.9%

Proportion of premature CVD mortality attributable to tobacco (%)

Prevalence of

tobacco use age ≥15

Global data: **36.1%** (male) **6.8%** (female)

FEMALE MALE

Percentage of adult population (agestandardized) with raised blood pressure (SBP ≥140 or DBP

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

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%

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%







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



6.4%



Percentage of adults who are overweight

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

male: 65.3% female: **51.5**%







Cardiovascular Disease Scorecards – Italy



Health System Capacity

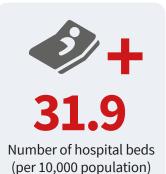


Number of physicians (per 10,000 population)



66

Number of nurses (per 10,000 population)



KEY:

No data



Not in place



In process/ partially implemented



In place



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:	Clopidrogrel:

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:

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: