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Trends in deaths from rheumatic heart disease versus congenital heart and cardiomyopathies in the eastern Mediterranean regionAzza M A M Abul-Fadl¹, Ahmed Reda Sanad¹ and Mohamed Khalaf²¹Benha University, Egypt²Ministry of Health and Population, Egypt

Introduction & Aim: The burden death from Congenital Heart Disease (CHD) versus Rheumatic Heart Disease (RHD) and other Cardiomyopathies (CEM) is a challenge for the Eastern Mediterranean Region (EMR) which is facing chronic emergencies and political instabilities. The study aims to present and compare changing trends in prevalence of deaths from RHD versus CHD in the EMR.

Method: We compiled data from the Global data WHO and World Bank for deaths from RHD, CHD and CEM for 22 countries of EMR. The data was analyzed by sex and age groups in 2000, 2005, 2010 and 2015. The ratio of RHD to CHD and RHD to CEM was estimated by age groups and sex over the periods.

Result: Trends in the ratio of deaths of RHD to CHD remained constant from the year 2000 to 2015 (0.5). RHD to CEM decreased from 0.89 in 2000 to 0.67 in 2015. The ratios were higher in females than males but the difference was insignificant. The latter reflects that RHD remains predominant in females. In the year 2000 the ratio of RHD to CHD was low and in the age groups 1-59 months (0.5) and 5-14 (0.32) and rose to 1.4 in the 15-29, 4.1 in the 30-49, 21.6 in the 50-59, 27.5 in the 60-69 and 22.4 in the 70+ age groups. The trends decreased mildly from 2000 to 2015 remaining higher in females. The ratio of RHD to CEM followed a different trend being below 1 in the under 29 years of age and >1 in the over 30 years of age in both sexes and over the age groups.

Conclusion: RHD predominates in adulthood. Early detection in early childhood can prevent rising burden of deaths in adulthood. CHD causes the main burden of death in childhood. CEM represents a high burden over the life course.

Biography

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