

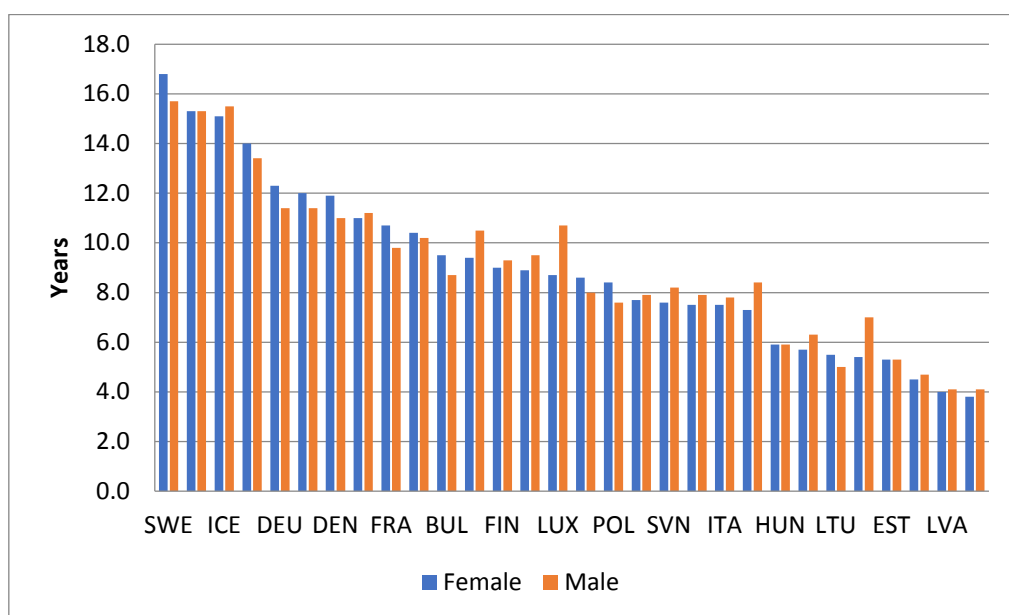
## Increased life expectancy and reduced premature mortality in the European Region

### Increased life expectancy

Europeans live, on average, more than one year longer than they did five years ago. Across the European Region, the average life expectancy at birth (both sexes) rose from 76.7 years to 77.9 years between 2010 and 2015, with an increase of approximately 1.3 years for males, and 1.0 year for females. However, average life expectancy in the country with the highest average life expectancy (83.1 years) differs from that with the lowest (71.6 years) by more than a decade. Thus, additional effort is required to narrow this gap.

Another important measure being tracked is healthy life years (HLY) at age 65. This is the number of years from the age of 65 that a person might be expected to live in good health; it is calculated separately for males and females.

**HLY at age 65, by sex, 2015, selected countries**



Source: Eurostat [database]. European Commission

(<http://ec.europa.eu/eurostat/web/main/home>, accessed 19 August 2018).

In the reported five years, the average HLY in European Union countries increased to 9.4 years for both females and males. However, HLY varies significantly from country to country. The latest statistics show that, at the high end of the range, HLY is 16.8 years for females and 15.7 years for males, while, at the low end, it is 3.8 years for females and 4.1 years for males. Such inequality is not acceptable.

## **Reduced premature mortality**

### **Mortality from all causes**

In the European Region, since the beginning of the millennium, good progress has been made in reducing deaths from all causes (at all ages). Based on data from half of the European countries, there was a decline in mortality of all causes of about 25% in 15 years.

### **Mortality from the four major noncommunicable diseases**

Overall, Europe is surpassing the Health 2020 target of reducing premature deaths from the four major noncommunicable diseases (cardiovascular diseases, cancer, diabetes and chronic respiratory diseases) by 1.5% annually until 2020, with the latest data indicating a 2% decline per year on average, based on data from 40 of the 53 countries in the European Region. In addition, a 2017 progress review established that the Region is likely to achieve Sustainable Development Goal Target 3.4<sup>1</sup> earlier than 2030 and will probably exceed it.

However, there is a need for continued vigilance concerning the impact of three major risk factors: tobacco smoking, alcohol consumption, and overweight and obesity (*see Factsheet: Lifestyle factors influencing premature death from noncommunicable diseases*). In addition, premature mortality rates vary widely between sexes and between countries: for example, men are over twice as likely to die from the four main noncommunicable diseases as women are, and people living in the countries of the Commonwealth of Independent States are three times more likely to die from these conditions than people in the Nordic countries. Such differences are even more pronounced between individual countries, ranging from a maximum of 656 deaths per 100 000 to a minimum of 183 deaths per 100 000.

### **Mortality from external causes**

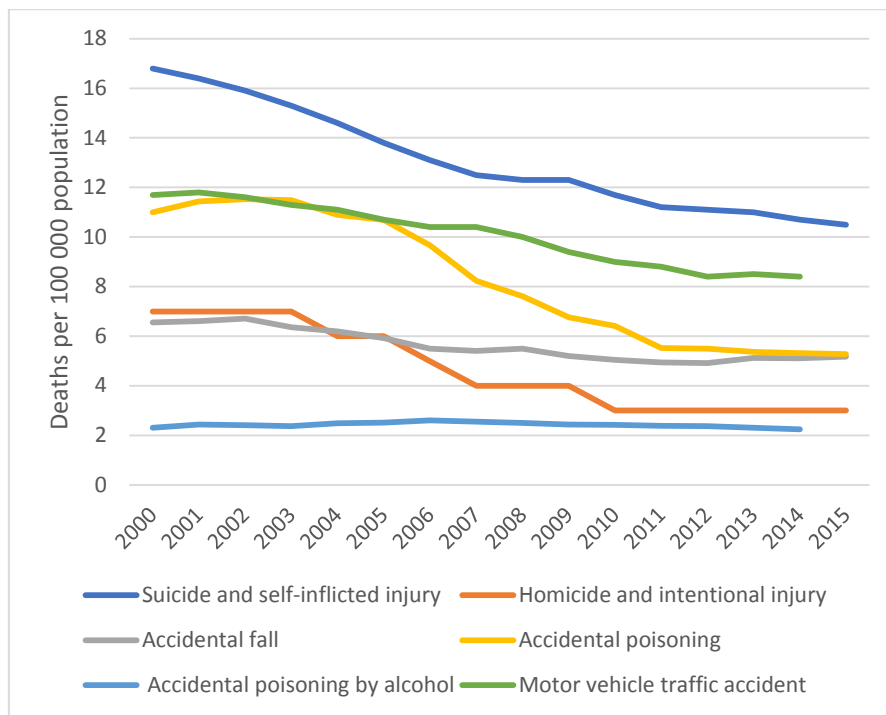
External causes of mortality include motor vehicle accidents; accidental falls; accidental poisoning; accidental poisoning by alcohol; suicide and intentional self-harm; and homicide and assault. In the European Region, deaths from external causes declined steadily by about 40% from 2010 to 2015 (from 82 deaths per 100 000 in 2010 to 50 in 2015). Nonetheless, external causes constitute the third leading cause of death in Europe, accounting for 7% of all deaths, after diseases of the circulatory system and malignant neoplasms.

Suicide and self-inflicted injury constitute the leading external causes of death (comprising 21% of all external causes of death and injury combined). Since 2005, motor vehicle traffic accidents have been the second highest external cause of death. However, as noted for other categories, these rates vary considerably between countries.

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<sup>1</sup> “By 2030, reduce by one third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being”

## Regional average standardized death rates from external causes



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