

Life Expectancy Gap in the European Union: Addressing Avoidable Mortality



In the European Union (EU), there are significant disparities in life expectancy between established member states (EMS) and new member states (NMS), with a particular gap in health outcomes related to avoidable mortality. Despite two decades of EU expansion, many NMS lag behind EMS in terms of healthcare access, quality, and preventive measures. As a result, citizens of NMS face higher rates of preventable and treatable deaths, particularly from circulatory diseases and injuries. The EU can significantly reduce the life expectancy gap by addressing avoidable mortality and improving regional health equity. This article explores the key findings from recent research on the impact of reducing preventable deaths in the EU and the necessary strategies to close the mortality gap.

The Role of Avoidable Mortality in the EU Life Expectancy Gap

Avoidable mortality refers to deaths that could be prevented either through effective health interventions or timely medical treatment. In the context of the EU, these deaths account for a significant portion of the mortality gap between EMS and NMS. A recent study conducted from 2005 to 2019 revealed that averting all avoidable deaths would reduce the average life expectancy gap between EMS and NMS from 5.8 to 2.4 years for men and from 3.3 to 2 years for women. Moreover, if NMS could achieve the same levels of avoidable mortality as EMS, the life expectancy gap would shrink even further, highlighting the critical role of healthcare systems in addressing this disparity.

Circulatory diseases and injuries, particularly in middle and older age groups, are the primary drivers of avoidable mortality in NMS. Many of these deaths occur due to inadequate access to preventive services, such as screenings for cardiovascular risk factors or suboptimal emergency care in the case of injuries. By improving both prevention and treatment capacities in NMS, the EU can make substantial progress in reducing unnecessary deaths and increasing life expectancy across the region.

The Impact of Health System Strengthening

Strengthening healthcare systems in NMS is essential to address the life expectancy gap. The disparity in healthcare spending between EMS and NMS is significant, with many NMS countries spending less than half per capita on healthcare compared to their EMS counterparts. This gap in funding translates to fewer resources for preventive health services, limited access to modern treatments, and poorer outcomes for treatable conditions. For instance, cardiovascular diseases, which are a leading cause of avoidable mortality in NMS, can be effectively prevented and managed with the proper healthcare infrastructure.

A critical aspect of strengthening health systems is improving the availability and quality of primary care services. In NMS, investments in primary care would enable earlier detection and treatment of preventable diseases, such as hypertension and diabetes, both of which are significant contributors to cardiovascular mortality. Additionally, implementing national health campaigns focused on smoking cessation, healthy diets, and physical activity can help reduce the incidence of preventable diseases, further decreasing the burden of avoidable mortality.

Prioritising Age-Specific Interventions for Greater Impact

One of the study's key findings was the importance of targeting specific age groups, mainly middle-aged and older populations, in reducing avoidable mortality. In NMS, preventable deaths in these age groups—primarily from circulatory diseases and injuries—have a disproportionate impact on life expectancy. By focusing on reducing mortality in these age categories, the EU can significantly narrow the life expectancy gap and improve overall health outcomes.

For middle-aged adults, addressing modifiable risk factors like smoking, alcohol consumption, and unhealthy diets is crucial. Many of these behaviours are more prevalent in NMS due to historical and socioeconomic factors, but they can be effectively mitigated through public health

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campaigns and community-based interventions. Ensuring access to timely and high-quality medical care is essential for older populations. This includes improving the availability of emergency services, particularly for injury-related incidents, and enhancing the capacity of hospitals and clinics to manage chronic conditions, such as heart disease and stroke.

Moreover, preventive cardiology and promoting healthier lifestyles can profoundly impact mortality in these age groups. Health education programs encouraging regular exercise, balanced diets, and routine medical check-ups can help individuals reduce their risk of developing chronic diseases, ultimately leading to longer and healthier lives.

Conclusion

Reducing avoidable mortality in the EU, particularly in NMS, offers a clear path to closing the life expectancy gap and addressing health inequalities across the region. By strengthening healthcare systems, investing in preventive services, and prioritising interventions for middle-aged and older populations, the EU can significantly reduce premature and unnecessary deaths. Achieving these goals will require political commitment, increased healthcare funding, and targeted public health initiatives. However, the potential benefits—improved life expectancy and better quality of life for millions of citizens—are well worth the effort. As the EU continues to pursue health equity across member states, addressing avoidable mortality must remain at the forefront of its agenda.

Source: The Lancet Regional Health Europe

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