



Smoking Attributable Deaths

Smoking harms nearly every organ of the body, causing many diseases and reducing quality of life and life expectancy¹. Smoking is one of the best preventable health risk behaviours.

The Smoking Attributable Mortality Indicator as developed by the Joint Action on European Community Health Indicator Monitoring (ECHIM)² takes into consideration the prevalence of smokers, ex-smokers and non smokers in the local population, sex-specific relative risk estimates for current and former smokers derived from the Cancer Prevention Study II (CPS-II)³ and available local mortality data from a number of conditions mainly related to certain tumours, cardiovascular diseases and respiratory diseases which are linked to cigarette smoking.

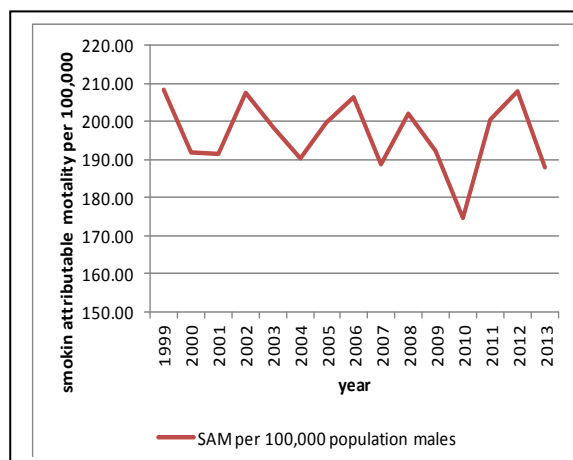
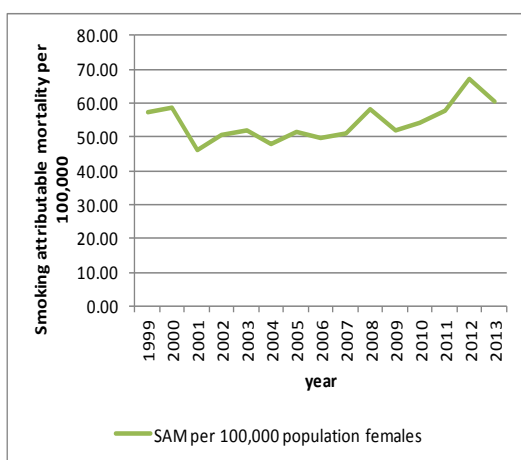
The Department of Health information and Research utilised rates of smokers, ex-smokers and non smokers in the population from the National Health Interview Surveys carried out in 2002 and 2008 and deaths from conditions related to cigarette smoking from the Malta National Mortality Registry.

The estimated annual smoking attributable deaths in males and females between 1999-2013 can be found in table 1 below. The average annual smoking attributable deaths during the period 1999-2013 was estimated to be 396 deaths in males and 111 deaths in females. Among adult males 42% of the male smoking attributable deaths was due to cancer, 40% due to cardiovascular disease and 18% due to respiratory diseases. Among adult females 37% of the female smoking attributable deaths were due to cancer, 47% due to cardiovascular disease and 16% due to respiratory diseases.

Year of death	Smoking attributable deaths in males	Smoking attributable deaths in females
1999	399	113
2000	370	116
2001	372	92
2002	407	101
2003	392	104
2004	379	97
2005	400	105
2006	416	102
2007	384	105
2008	415	121
2009	397	108
2010	361	113
2011	415	121
2012	434	141
2013	393	127

Table 1: Estimated annual smoking attributable deaths in males and females from 1999-2013

When analysing smoking attributable mortality rate for linear trend (see figures 1,2 below) , a significant average increase of 2 deaths per 100,000 population was observed in females. No similar significant trend was observed in males.



Figures 1, 2 : Smoking attributable mortality per 100,000 population in females and males respectively

References

1. CDC. The health consequences of smoking: a report of the Surgeon General. Atlanta, GA: US Department of Health and Human Services, CDC; 2004.
2. ECHI documentation sheets: Latest versions available at the end of the Joint Action for ECHIM June 30st 2012.
3. Shultz J, Novotny T, Rice D et al. Quantifying the Disease Impact of Cigarette Smoking with SAMMEC Software. Public Health Report 1991, 106; 326-33.