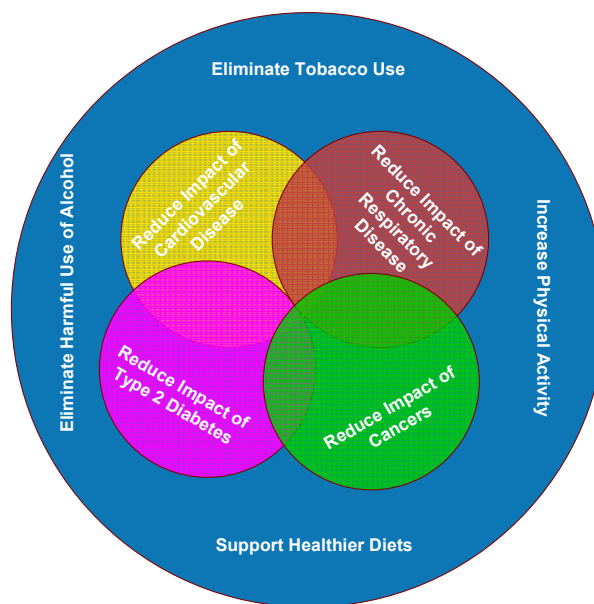


The Facts: Diabetes, Cardiovascular Disease, Smoking-related Respiratory Disease and Cancer in Counties Manukau - December 2010



How these facts are presented:

These fact sheets contain information about the Counties Manukau population in relation to four risk factors (unhealthy diets, physical inactivity, tobacco use and the harmful use of alcohol) and the four disease areas that are the focus of the Counties Manukau District Health Board's Creating a Better Future strategy (diabetes, cardiovascular disease, smoking-related respiratory disease and cancer).

Each section first asks 'Why do we care?' about the risk factor or disease, followed by rates and comparisons. **Unless stated otherwise, the rates presented relate to the Counties Manukau population with national comparisons provided where possible.** Page 10 gives information on the source of the facts.

Further statistical information about the health of the Counties Manukau population is available on the DHB website (www.cmdhb.org.nz) under 'Publications'. The Creating a Better Future website (www.betterfuture.co.nz) also has links to surveys undertaken as part of the Let's Beat Diabetes initiative, from which Creating a Better Future has developed, under 'About Us' and 'Creating a Better Future Resources'. These surveys involved both people living with diabetes (the Living with Diabetes Survey) and other members of the Counties Manukau community (the Tracking Survey). Recommendations and information about improving your health through healthy eating, regular

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physical activity, being smokefree and the safe use of alcohol can be found on the Creating a Better Future website.

Counties Manukau is a diverse district with the fastest growing population in New Zealand. It is home to approximately 500,000 people, with a high proportion of Maaori, Pacific and Asian residents. The population is also young, with 25% aged under 15 years. About one third of the Counties Manukau population lives in areas which are described as socio-economically 'very deprived'. Health disparities are significant in Counties Manukau, with Maaori and Pacific people, and those who are socio-economically deprived, experiencing worse health outcomes than others in the district.

Four Risk Factors

Less than one in ten adults in Counties Manukau aged 15+ have a healthy lifestyle, based on not smoking, 'safe' alcohol consumption, being regularly physically active, eating 5+ fruit and vegetables a day and not being obese.

- 9.4% of females have a healthy lifestyle
- 9.8% of males have a healthy lifestyle
- 5% of Maaori adults have a healthy lifestyle
- 6.3% of Pacific adults have a healthy lifestyle
- 13.5% of New Zealand adults have a healthy lifestyle

Nutrition and Physical Activity

Why do we care?

- A healthy body size is important for good health and wellbeing. A healthy diet and regular physical activity are key to preventing obesity.
- Obesity is the main preventable cause of Type 2 diabetes therefore reducing obesity means reducing diabetes. Obesity is also linked with heart disease, some forms of cancer and arthritis, and high blood pressure (which can lead to strokes and heart attacks).
- International studies indicate being obese at age 40 reduces life expectancy by 7.1 yrs for non-smoking women and 5.8 yrs for non-smoking men.
- Childhood obesity is associated with a number of serious medical conditions in childhood and increases the likelihood of obesity and its related health problems in adult life.
- Losing five to 10% of your initial body weight can bring significant health benefits. The only effective approach to weight management is a permanent change to how people live. Social and economic factors such as the availability and cost of healthy food, and options for physical activity, have an important influence on the choices people make.

Fruit and Vegetable Intake

- **47% of adults in Counties Manukau know to eat at least five servings of fruit and vegetable per day for good health.**
- **52% eat the recommended 3+ servings of vegetables daily.** (This is the lowest proportion of adults eating enough vegetables in any district health board area in New Zealand. Overall, 64% of New Zealand adults eat the recommended 3+ servings of vegetables daily).
 - 36% of Pacific adults eat the recommended 3+ servings of vegetables daily
 - 38% of Asian adults eat the recommended 3+ servings of vegetables daily
 - 49% of Maaori adults eat the recommended 3+ servings of vegetables daily
 - 55% of adults of other ethnicities eat the recommended 3+ servings of vegetables daily

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- 57% of all female adults eat the recommended 3+ servings of vegetables daily
- 47% of all male adults eat the recommended 3+ servings of vegetables daily
- **58% of adults eat the recommended 2+ servings of fruit daily.** (Overall, 60% of New Zealand adults eat the recommended 2+ services of fruit daily).
 - 66% of female adults eat the recommended 2+ servings of fruit daily
 - 49% of male adults eat the recommended 2+ servings of fruit daily

Gardening

- **48% of adults in Counties Manukau report having their own vegetable garden or being involved with a community vegetable garden.**

Breastfeeding

- **Only 42% of babies in Counties Manukau are fully or exclusively breastfed at three months.** Exclusive breastfeeding is recommended until a baby is at least six months old.
 - 38% of Maaori babies are fully or exclusively breastfed at three months
 - 40% of Pacific babies are fully or exclusively breastfed at three months
 - 43% of Asian babies are fully or exclusively breastfed at three months
 - 48% of European babies, or babies from other populations, are fully or exclusively breastfed at three months

Fizzy Drink Intake

- **25.5% of children aged two to 14 in Counties Manukau have had three or more fizzy drinks in the past week.** (Overall, 19.6% of New Zealand children have had three or more fizzy drinks in the past week).
- **40% of adults have had fizzy drinks at least once in the past week.** This is down from 49% in 2006/2007.

Takeaway/Fast Food Intake

- **10.1% of children in Counties Manukau have eaten fast food three or more times in the past week.** (Overall, 7.2% of New Zealand children have eaten fast food three or more times in the past week).
- **59% of adults have eaten fast food at least once in the past week.**

Physical Activity

- **53% of adults in Counties Manukau are regularly physically active (do at least 30 minutes of physical activity most days)**
 - 57% of male adults are regularly physically active
 - 50% of female adults are regularly physically active
- **58% of children usually watch two or more hours of television a day.** (Overall, 64% of New Zealand children usually watch two or more hours of television a day).

Obesity

- **34% of adults in Counties Manukau are overweight (Being overweight means have a Body Mass Index (BMI) of between 25 and 29.9. BMI is calculated by dividing a person's weight in kilograms by their height in metres squared.)**
- **33% of adults (aged 15 or older) are obese (very overweight).** (Overall, 26.5% of New Zealand adults are obese). Being obese means having a BMI of 30 or over.
 - 76% of Pacific adults are obese
 - 50% of Maaori adults are obese
 - 45% of Asian adults are obese (for Asian adults, being obese means having a BMI of 25 or over)
- **5.7% of adults are extremely obese (have a BMI of 40 or over).** (Overall, 3.7% of New Zealand

adults are extremely obese).

- **12.7% of children are obese.** (Overall, 8.3% of New Zealand children are obese).
- **Nationally a further 20% of children are overweight (these figures are not available specifically for Counties Manukau).**
 - 25% of Maaori children nationally are overweight
 - 31% of Pacific children nationally are overweight

Estimated numbers in Counties Manukau

	Total	Maaori	Pacific	Asian	Other
Obese adults	121,800	26,000	54,600	24,600	58,000
Overweight adults	126,200	14,300	14,000		68,600
Obese children (5-14 yrs)	6,800	2,400	6,100		
Overweight children (5-14 yrs)	16,200	4,600	7,200		

Obese Adults	Manukau (Manurewa, Mangere, Otara, Papatoetoe)	Eastern (Howick/ Pakuranga, Botany/ Clevedon)	Papakura	Franklin
Maaori	16,200	2,400	4,400	3,100
Pacific	51,800	1,300	1,200	240
Asian	9,900	13,500	750	450
Others	16,600	21,900	7,400	12,100

Overweight Adults	Manukau (Manurewa, Mangere, Otara, Papatoetoe)	Eastern (Howick/ Pakuranga, Botany/ Clevedon)	Papakura	Franklin
Maaori	8,900	1,300	2,400	1,700
Pacific	13,400	340	300	60
Others	19,600	25,900	8,800	14,300

(Note: people could choose more than one ethnicity so estimated numbers for each ethnic group add up to more than the total)

Tobacco Use

Why do we care?

- Smoking is a major risk factor for cardiovascular disease (angina, heart attacks, stroke and peripheral vascular disease which can lead to amputation), chronic obstructive respiratory disease and many types of cancer, particularly lung cancer and cancers of the mouth, throat, gullet and stomach.
- Smoking is the leading preventable cause of death, disease and disability for all ethnicities, especially Maaori.
- Respiratory infections, asthma and dental conditions (teeth being removed due to poor oral health) are leading causes of hospitalisation for children under five in Counties Manukau. These conditions are all more common in children who are smoke-exposed or whose parents smoke.
- Most people who smoke wish they didn't, with four out of five saying they would not smoke if they had their life over again.
- The average person who smokes will make as many as 14 quit attempts before achieving long term success. Quitting is hard but possible, and more likely using Nicotine Replacement Therapy and having the wider support of families, whaanau, the community and health professionals. Telephone or face-to-face counseling can also be helpful.

Regular Smoking

- **22.1% of adults in Counties Manukau smoke regularly** (one or more cigarettes per day).
 - 20.4% of women smoke
 - 24% of men smoke
 - 50.3% of Maaori women smoke
 - 42.5% of Maaori men smoke
 - 26.7% of Pacific women smoke
 - 34.3% of Pacific men smoke
 - 19.3% of European women smoke
 - 20.8% of European men smoke
 - 3.4% of Asian women smoke
 - 16.3% of Asian men smoke
- **About 35 – 40% of Maaori women and about 10 to 15% of women of other populations use tobacco during pregnancy which means there are about 1300 - 1700 smoke-exposed pregnancies in Counties Manukau each year.**
- **40% of children aged up to 14 live in a household with a person or people who smoke.**

Estimated numbers in Counties Manukau

	Total	Maaori	Pacific	Asian	European	Males	Females
People who smoke	81,500	24,000	22,000	5,300	38,000	42,700	38,900

	Manukau (Manurewa, Mangere, Otara, Papatoetoe)	Eastern (Howick/ Pakuranga/Botany Clevedon)	Papakura	Franklin
People who smoke	44,500	18,200	8,700	10,100

Alcohol Use

Why do we care?

- Alcohol use is common - eight out of 10 adults in New Zealand have had an alcoholic drink in the last 12 months.
- There is no level of drinking that is safe for all people all the time. How much it is safe to drink depends on a person's health, age and weight.
- Along with alcohol addiction and impacts on injury and violence (which are outside the scope of the Creating a Better Future strategy), alcohol consumption increases the risk of several cancers, including liver, breast, bowel, and upper digestive tract (mouth, throat, larynx and oesophagus), and can worsen diabetes control. The more alcohol consumed, the greater the risk of cancer.
- Alcohol consumption can also be harmful in pregnancy with the risk of physical and mental health damage to the baby (Fetal Alcohol Syndrome). No amount of alcohol has been shown to be safe in pregnancy and the risk of brain damage exists during the whole pregnancy.

Alcohol Use

- **13% of adults in Counties Manukau drink alcohol in a way that puts their physical or mental health at risk.**
 - 19% of men drink in a way that puts their health at risk
 - 8% of women drink in a way that puts their health at risk
- Nationally, 61% of secondary school students have drunk alcohol and 34% report binge drinking in the last four weeks. The most common source of alcohol was friends and parents.

Estimated numbers in Counties Manukau

	Total	Maaori	Pacific	Asian	Other	Males	Females
Hazardous drinking, adults	49,000	12,800	12,600	2,300	25,200	34,300	14,900

	Manukau (Manurewa, Mangere, Otara, Papatoetoe)	Eastern (Howick/Pakuranga/Botany, Clevedon)	Papakura	Franklin
Hazardous drinking, adults	26,000	11,400	5,300	6,400

Four Disease Areas

81% of avoidable deaths in Counties Manukau are due to the 'package' of diabetes, cardiovascular disease, smoking-related respiratory disease and cancer.

Over the last decade, Maaori life expectancy at birth has been around 10 years less than non-Maaori, non-Pacific, while Pacific life expectancy has been around five to seven years less than non-Maaori, non-Pacific. Diabetes, cardiovascular disease, smoking-related respiratory disease and cancer are the key contributors to these life expectancy gaps.

Diabetes

Why do we care?

- Diabetes significantly increases the risk of coronary heart disease. People with diabetes are also at risk of kidney failure, blindness and limb amputations.
- Physical distribution of fat is important for diabetes risk, with 'central obesity' (round the waist) being a particular issue for South Asian and Chinese populations.
- Diabetes is largely preventable and two-thirds of the numbers predicted to develop diabetes can be prevented.

Diabetes

- **CMDHB estimates that there are over 31,000 people, or 8.5% of the adult population, with diabetes in Counties Manukau.** This is the largest number of people with diabetes in any district health board area in New Zealand.
 - 14.9% of South Asian adults (primarily of Indian descent in Counties Manukau) have diabetes
 - 12.7% of Pacific adults have diabetes
 - 8.7% of Maaori adults have diabetes
 - 6.0% of European and other ethnic group adults have diabetes
- **29% of adults have had a test for diabetes in the past 12 months.**
- **16% of people with diabetes smoke. Helping these people to quit is very important.**
- **Pacific people and Maaori are hospitalized at more than 11 times the rate of European people due to kidney failure as a long-term complication of diabetes and four to five times the rate for leg/foot/toe amputation because of their diabetes or cardiovascular disease.**
- **People with diabetes are 2.5 times as likely to require a hospital stay than those without diabetes, and their stays in hospital are 50% longer than patients without the condition.**
- **The hospital, pharmaceutical and laboratory costs for people with diabetes were \$83 million in 2008 for the CMDHB.** This equates to about \$3,200 per head.
- **The number of people with diabetes is expected to double by 2027.** This will be largely driven by the increase in the number of obese people, which is projected to increase by 80% by 2027.
- **It is predicted that 41% of the population (267,000 people) will either be obese or have diabetes in 2027.**

Estimated numbers in Counties Manukau

	Total	Maaori	Pacific	South Asian	Others
Adults with diabetes	31,300	4,500	10,200	4,100	12,600

	Manukau (Manurewa, Mangere, Otara, Papatoetoe)	Eastern (Howick/Pakuranga/Botany, Clevedon)	Papakura	Franklin
Adults with diabetes	18,600	6,600	2,800	3,400

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Cardiovascular Disease (CVD)

Why do we care?

- CVD, including heart attacks and stroke, accounts for 40% of all deaths in New Zealand.
- Obesity, smoking, high cholesterol and high blood pressure are important risk factors for CVD.
- CVD is also a major complication of diabetes and causes 50% of all deaths of people with Type 2 diabetes.
- CVD risk increases with age and occurs earlier in men than in women, and earlier in Maori, Pacific and South Asian populations than people of other ethnicities.
- Smoking doubles the risk of CVD in people with diabetes. Stopping smoking is at least as effective for reducing CVD risk as reducing cholesterol, controlling blood pressure and reducing blood sugar levels.

Cardiovascular Disease

- **Over 20,000 people aged 15 years or over in Counties Manukau have CVD.** Maori have the highest prevalence rate of CVD compared to other ethnic groups.
- **41% of adults have had their cholesterol checked in the past 12 months.**
- **69% of adults have had their blood pressure checked in the past 12 months.**
- **The cost of caring for people with CVD or diabetes was \$151 million in 2008 for the CMDHB.**

Estimated numbers in Counties Manukau

	Total	Maori	Pacific	South Asian	European/Other
Adults with diagnosed CVD	23,900	3,100	3,700	1,100	13,800

	Manukau (Manurewa, Mangere, Otara, Papatoetoe)	Eastern (Howick/Pakuranga/Botany, Clevedon)	Papakura	Franklin
Adults with diagnosed CVD	11,100	6,600	2,700	3,600

Smoking-related Respiratory Disease

Why do we care?

- Tobacco use is the main risk factor for chronic obstructive respiratory disease (CORD).
- People with CORD have non-reversible airways problems. Emphysema and chronic bronchitis are the most common forms of CORD. Common features are cough with phlegm and breathlessness; and symptoms vary from mild to very disabling.

Smoking-related Respiratory Disease

- In Counties Manukau, 5.6% of males and 8.4% of females aged over 45 years report having CORD.
- Maaori are more than twice as likely to report CORD and over four times as likely to be hospitalised with it as non-Maaori/non-Pacific/non-Asian populations.
- Pacific peoples also have high rates of hospitalisation with CORD (over three times the non-Maaori/non-Pacific/non-Asian rate).
- Asthma can also be aggravated by tobacco smoke. Maaori and Pacific peoples are 2.5 to three times as likely to be hospitalised with asthma than other groups.

Estimated numbers in Counties Manukau

	Total	Maaori	Pacific	Asian	Other	Males	Females
Adults 45+ years with CORD	10,500	2,000	1,300	420	6,900	4,300	6,200

	Manukau (Manurewa, Mangere, Otara, Papatoetoe)	Eastern (Howick/Pakuranga/Botany Clevedon)	Papakura	Franklin
Adults 45+ years with CORD	4,600	2,900	1,200	1,700

Cancer

Why do we care?

- Cancer is one of the leading causes of death, responsible for 30% of all deaths nationwide.
- Lung cancer accounts for the most deaths from cancer (18%). Breast and bowel cancer are the next most common.
- Proportionally more Maaori are diagnosed with, and die from, cancer than the general population.

Cancer

- **There are approximately 1500 new cancer registrations and 630 deaths due to cancer each year for people living in Counties Manukau.**
- **The death rate from cancer for Maaori is double, and for Pacific is 1.7 times, the rate for European/Other (non-Maaori/non-Pacific/non-Asian) groups.** Asian rates are about half of those for European/Other.
- **Death and hospitalisation from lung cancer is more than four times more common for Maaori than for European/Other (non-Maaori/non-Pacific/non-Asian) populations. Pacific rates are more than twice European/Other (non-Maaori/non-Pacific/non-Asian) rates.**
- **Maaori women are more likely to be hospitalised and die from their breast cancer.** Asian women's rates for breast cancer are lower than other groups.
- **European/Other (non-Maaori/non-Pacific/non-Asian) groups have the highest rates of colorectal (bowel) cancer registration, approximately double those of other groups.**

Sources of the information presented in these fact sheets:

The majority of figures for the risk factors – nutrition, physical activity, body size and alcohol use – are taken from the results of the New Zealand Health Survey 2006/07 and the Let's Beat Diabetes Tracking Survey of community members with diabetes which was undertaken in 2009. Breastfeeding rates come from Plunket. The smoking rates come from the 2006 Census. Updated figures from the New Zealand Health Survey and Census are likely to be available in the later part of 2012.

Information on disease rates comes mostly from analysis of hospital admissions and death rates by the Ministry of Health (the full report– the CMDHB Health Needs Assessment, September 2008 – is available at www.cmdhb.org.nz). Diabetes and CVD numbers, predicted increases and costs come from CMDHB modeling and analyses.

The rates given are crude (actual) rates. When making comparisons between populations note that Maaori and Pacific peoples have a lower number of older people compared to European/Other groups. This affects the rates of conditions which are more common in older people, such as diabetes, though it doesn't make much difference to rates for risk factors such as obesity. Age-standardisation is a way of calculating rates that adjusts for the differences in age structure between populations so the rates can be more reliably compared. If you need age-standardised rates for facts presented in this document please contact Katie Wylie on Katie.wylie@middlemore.co.nz