



# Najčešći uzroci umiranja radno sposobnog stanovništva u Srbiji

## The most common causes of death of the working age population in Serbia

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### Apstrakt

Prevrmeno umiranje se definiše kao umiranje stanovništva pre 65. godine, u nekim visokorazvijenim zemljama na primer u Australiji je pre 70, a u Japanu pre 80. godine života. Masovne hronične nezarazne bolesti (MHNB) su najčešći uzrok prevremenog umiranja stanovništva životne dobi od 30 do 50 godina širom sveta. Prema podacima Svetske zdravstvene organizacije (SZO) 82% od ukupnog broja prevremenog umrlog stanovništva je iz srednje razvijenih i zemalja u razvoju. U ovim zemljama, svake godine od MHNB umre više od 12 miliona radno aktivnog stanovništva. Kardiovaskularne bolesti (KVB) i to ishemijska bolest srca i mozga prvi su uzrok prevremene smrtnosti sa prevalencom od 46,2%. Na drugom mestu su maligne bolesti sa 21,7%, na trećem su hronične respiratorne bolesti sa 10,7% i na četvrtom dijabetes sa 4%. Prema SZO najveći rizik od prevremenog umiranja od jedne do navedene četiri bolesti imaju stanovnici jugoistočne Azije, istočnog mediteranskog regiona i afričkog kontinenta. Više od 3/4 prevremeno umrlih je umrlo zbog KVB i dijabetesa. Oko 2/3 svih umrlih od malignih bolesti je iz srednje razvijenih i zemalja u razvoju, a približno 90% svih koji umru od hroničnih respiratornih bolesti je iz ovih zemalja. Prema podacima danske kohortne studije koja je obuhvatila preko 130.000 osoba uzrasta od 30 do 69 godina procenjena je sirova stopa incidencije od akutnog koronarnog sindroma od 234 na 100.000. U Srbiji vodeći uzrok umiranja muškaraca životne dobi od 55. do 64. godine je infarkt miokarda, a kod žena je to infarkt mozga. Godišnje od dijabetesa u Srbiji umre oko 3.500 osoba i dijabetes se nalazi na 4. mestu kao uzrok umiranja stanovništva.

Radno aktivno stanovništvo provodi u proseku trećinu vremena na radu. Faktori rizika koji deluju u radnoj sredini, a mogu dovesti do povećanog obolevanja i umiranja od MHNB su: buka, hemijski i biološki agensi koji kontaminiraju vazduh, stres, pušenje, zloropotreba alkohola, fizička neaktivnost, neadekvatna visokokalorijska ishrana sa povećanim sadržajem masti i soli i smanjenim unosom dijetetskih vlakana. Prevencija prevremene smrtnosti pojedinca smatra se glavnim ciljem za društvo.

### Abstract

Premature death is defined as the death of the population before the age of 65, in some highly developed countries, for example in Australia it is before the age of 70, and in Japan before the age of 80. Mass chronic non-communicable diseases (MHNBS) are the most common cause of premature death in people aged 30 to 50 worldwide. According to the World Health Organization (WHO), 82% of the total number of premature deaths is from middle-income countries and developing countries. In these countries, more than 12 million people in employment die each year from MHNB. Cardiovascular diseases (CVD) and ischemic heart and brain diseases are the first cause of premature mortality with a prevalence of 46.2%. In second place are malignant diseases with 21.7%, in third place are chronic respiratory diseases with 10.7% and in fourth place is diabetes with 4%.

According to the WHO, the residents of Southeast Asia, the eastern Mediterranean region, and the African continent have the highest risk of premature death from 1 to the above 4 diseases. More than 3/4 of premature deaths died due to CVD and diabetes. About 2/3 of all deaths from malignant diseases are from middle-income countries and developing countries, and approximately 90% of all deaths from chronic respiratory diseases are from these countries. According to the data of the Danish cohort study, which included over 130,000 people aged 30 to 69, the raw incidence rate of the acute coronary syndrome was estimated at 234 per 100,000. In Serbia, the leading cause of death in men aged 55 to 64 is myocardial infarction, and in women, it is a cerebral infarction. About 3,500 people die of diabetes in Serbia every year and it is in 4th place as the cause of death of the population.

The working active population spends on average a third of their time at work. Risk factors that act in the work environment and can lead to increased morbidity and mortality from mass chronic non-communicable diseases (are noise, chemical and biological agents that contaminate the air, stress, smoking, alcohol abuse, physical inactivity, and inadequate high-calorie diet with increased fat and salt content, and reduced intake dietary fiber. Prevention of premature mortality of an individual is considered a major goal for the society.