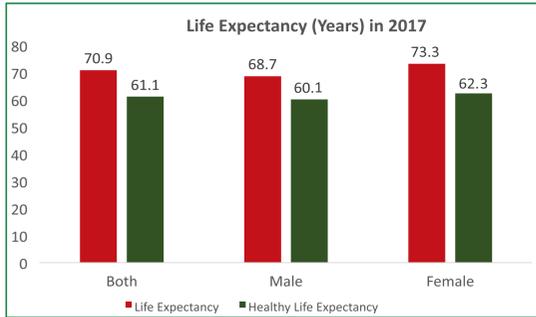


Burden of Disease in Nepal-2017

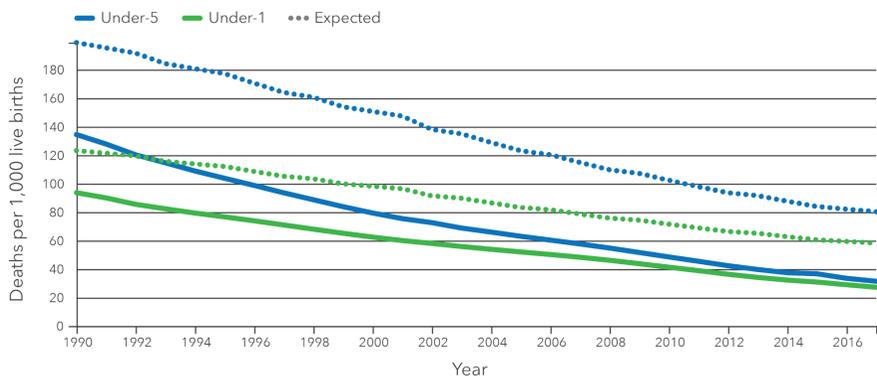
LIFE EXPECTANCY

Nepalese born in 2017 have a life expectancy of 71 years. However, only 61 of those years will be healthy. Females are expected to live 73 years with 63 years of healthy life; whereas males are expected to live 69 years with 60 years of healthy life.



ALL CAUSE MORTALITY

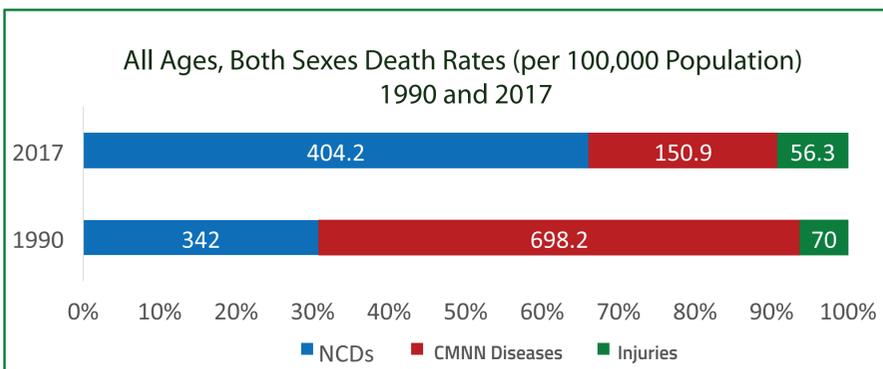
Mortality rates have sharply declined over the past two decades with all ages, both sexes mortality rate decreasing from 1,110 deaths per 100,000 population in 1990 to 611 deaths per 100,000 population in 2017. Under-5 and under-1 mortality rates were 31 deaths per 1,000 live births, and 27 deaths per 1,000 live births, respectively.



	Expected		Observed	
	1990	2017	1990	2017
Under-5	199.0	80.3	134.4	31.4
Under-1	123.2	58.3	93.6	27.2

EPIDEMIOLOGICAL TRANSITION

The previous two decades have marked an epidemiological transition in Nepal from communicable diseases to NCDs. Deaths due to CMNN diseases have declined rapidly - by 78% between 1990 and 2017; while the decline is sluggish, with 18% and 20%, for death rates due to NCDs and injuries, respectively.

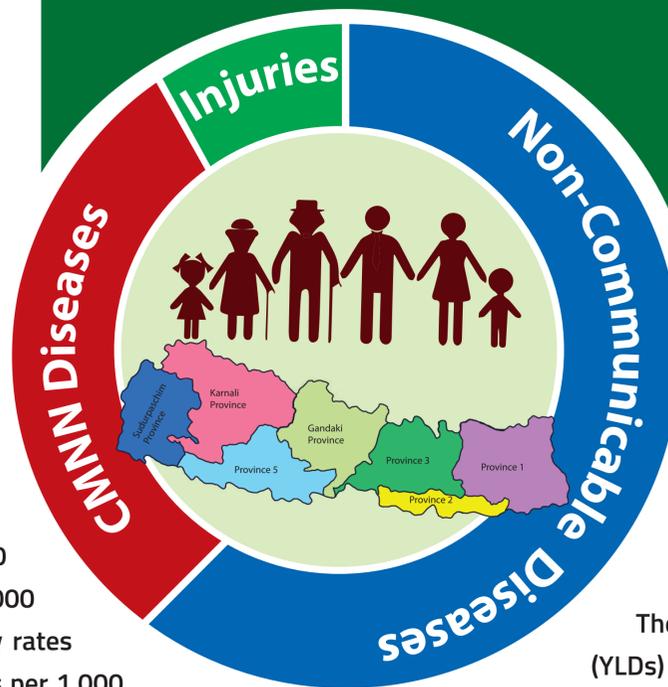


RISK FACTORS

Approximately, 34% of total disease burden is attributable to behavioural risk factors, 18% to environmental risk factors and 14% to metabolic risk factors. High systolic blood pressure, smoking, high blood glucose levels and ambient particulate matter pollution are the leading risk factors for death in 2017.

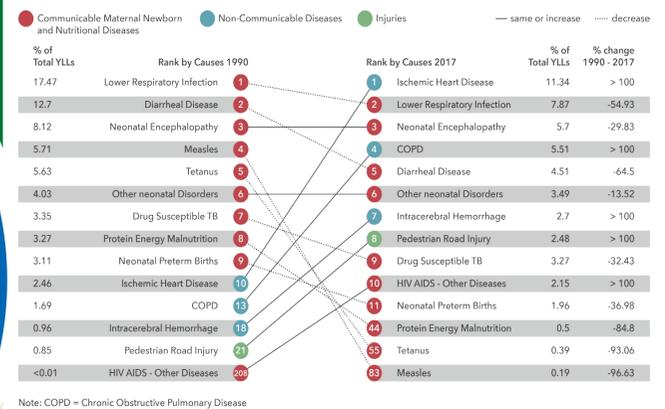
CAUSE SPECIFIC MORTALITY

A total of 182,751 deaths are estimated in Nepal for the year 2017. Non-communicable diseases (NCDs) are the leading causes of death, two thirds (66%), with an additional 9% due to injuries. The remaining 25% are due to communicable, maternal, neonatal and nutritional (CMNN) diseases.



CAUSES OF PREMATURE DEATH

Heart diseases and chronic obstructive pulmonary disease (COPD) have skyrocketed from 10th and 13th to 1st and 4th, in their ranking for premature deaths respectively, since 1990. Ischemic heart disease, lower respiratory infection and neonatal encephalopathy are the leading causes of premature death in 2017; whereas lower respiratory infection, diarrheal disease and neonatal encephalopathy were the leaders in 1990.



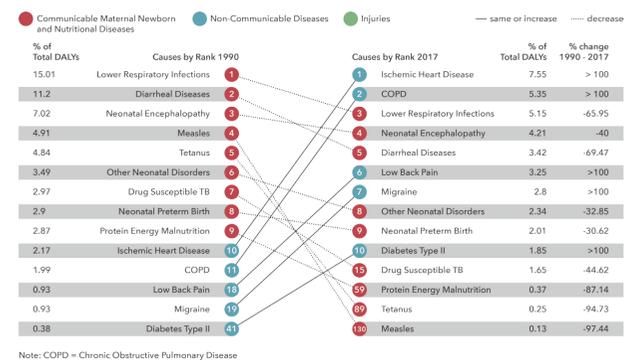
CAUSES OF DISABILITY (MORBIDITY)

The number of years Nepalese spent living with disability (YLDs) from chronic pain and mental disorders rose between 1990 and 2017; the years people living with disability due to communicable diseases and nutrition deficiencies dropped sharply. Dietary iron deficiency and vitamin A deficiency, lower back pain and migraine were the leading causes of disability in 1990, while lower back pain, migraine and COPD are the leaders in 2017.

1990 Ranking (YLDs Per 100,000 Population)		2017 Ranking (YLDs Per 100,000 Population)	
Causes by Rank	YLD	Causes by Rank	YLD
1 Dietary iron deficiency	1335.19	1 Low back pain	983.65
2 Low back pain	718.92	2 Migraine	847.04
3 Migraine	716.16	3 COPD	533.66
4 Other musculoskeletal disorders	432.48	4 Other musculoskeletal disorders	509.20
5 COPD	411.82	5 Dietary iron deficiency	447.79
6 Vitamin A deficiency	397.61	6 Major depression	418.71

BURDEN OF DISEASE (DALYs)

Approximately, 59% of the disease burden (including premature death and disability) in 2017 is due to NCDs, 31% due to CMNN diseases, and 10% due to injuries. Five out of the top ten causes of disease burden in 2017 are NCDs. Ischemic heart disease, COPD and lower respiratory infection are the top three leading health problems causing most of the disease burden in 2017.



RISK FACTORS CAUSING DEATH IN 2017

Behavioural risks	Environmental/occupational risks	Metabolic risks
Smoking Diet low in whole grain Diet low in fruits Diet low in nuts and seeds	Ambient particulate matter pollution Household air pollution Unsafe water source Lead exposure	High systolic blood pressure High blood glucose levels High LDL cholesterol High body mass index