Recent Trends in Cardiovascular Disease and Risk Factors in the Seven Countries: The Netherlands

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Summary. This chapter describes trends in total cholesterol, blood pressure, cigarette smoking, and body mass index in the Netherlands. Data from three screening projects are available, carried out consecutively in the periods 1974–1980 (men and women aged 37–43 years), 1981–1986 (men aged 33–37 years), and 1987–1991 (men and women aged 20–59 years). For smoking, data are available since 1958. For total cholesterol no substantial changes have taken place in the general population. The prevalence of hypertension has remained more or less stable, while treatment of hypertension has decreased since 1987. A decrease in cigarette smoking in men was strongest in the 1970s, slowed down considerably in the 1980s, and has almost come to a standstill in the 1990s. In women, prevalence of smoking increased in the 1970s and decreased slightly in the 1980s and 1990s. Body mass index showed a slight increase over the last decades, particularly in the second half of the 1980s. It is concluded that elevated major risk factors for coronary heart disease are still present in a large proportion of the Dutch population. To reduce the burden of chronic diseases in our aging society, influencing risk-factor levels in the general population is an important challenge for the years to come.

Key words. Trends—Cardiovascular disease risk factors—The Netherlands

Introduction

Cardiovascular diseases are still the most important cause of death in the Netherlands, even though mortality from them has declined during the last two decades [1]. Figures 1–3 show age-standardized mortality rates for cardiovascular diseases (CVD, World Health Organization International Classification of Diseases, 9th rev., code 390–459), coronary heart disease (CHD, ICD-9 code 410–414), and cerebrovascular diseases (CVD, ICD-9 code 430–438). Mortality from cardiovascular diseases in men reached its peak in 1972. This coincides with the peak in CHD mortality, which is the largest
Fig. 1. Age-standardized mortality from cardiovascular diseases (World Health Organization *International Classification of Diseases* codes 390–459) per 100,000 in the Netherlands since 1950. *M*, men; *V*, women

Fig. 2. Age-standardized mortality from coronary heart disease (World Health Organization *International Classification of Diseases* codes 410–414) per 100,000 in the Netherlands since 1950. *M*, men; *V*, women

Fig. 3. Age-standardized mortality from cerebrovascular diseases (World Health Organization *International Classification of Diseases* codes 430–438) per 100,000 in the Netherlands since 1950. *M*, men; *V*, women

contributor to total CVD mortality in men. Between 1972 and 1990, age-adjusted CHD mortality decreased by 29% in men and 38% in women. Mortality from cerebrovascular diseases started to decline in 1956, and since has declined by 49% in men and 59% in women.