

Publication Summary



ScotPHO website quarterly update

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About this Release

The following topics on the Scottish Public Health Observatory (ScotPHO) website have been updated: asthma, coronary heart disease (CHD), chronic obstructive pulmonary disease (COPD), community wellbeing, deaths, deprivation, diabetes, diet and nutrition, disability, drugs, education, epilepsy, ethnic minorities, high blood pressure, high cholesterol, income and economy, lesbian, gay and bisexual (LGB) health, multiple sclerosis, obesity, older people, physical environment, stroke, surveys and tobacco use. The topics are presented in the ScotPHO style of web pages including text and charts and downloadable Excel charts and tables. The updates include collations of previously available information, and present summary data and statistics derived from published sources. Previously unpublished data are included for ten of these topics: asthma, chronic obstructive pulmonary disease (COPD), deaths, diabetes, disability, epilepsy, high blood pressure, high cholesterol, multiple sclerosis and tobacco use. Some of the key findings for the new data are given below.

Key Points

Asthma

- First hospital admissions for asthma are commoner among children than adults but have declined overall during the last five years.

Chronic Obstructive Pulmonary Disease (COPD)

- There has been a gradual fall in the incidence of COPD in men over the last ten years. By contrast, the incidence of COPD in women has risen over the same period. Both of these trends are likely to reflect past patterns of smoking.

Deaths

- Within Scotland, in 2012, the highest all-cause age/sex standardised mortality rates were generally found in the west of the country (e.g. Greater Glasgow & Clyde and Lanarkshire NHS Boards).

- There is a strong deprivation pattern in 2012, and the rate for persons living in the least deprived SIMD decile (789 deaths per 100,000 population) was less than half the rate for the most deprived decile (1,628 deaths per 100,000 population).

Disability

- In 2012, the proportion of adults in Scotland who rated their own health as 'bad' or 'very bad' varied by NHS board, from 3% in Orkney to 11% in Ayrshire & Arran.
- In 2012, the proportion of adults in Scotland who perceived themselves as having a long-standing illness, health problem or disability varied by NHS health board, from 16% in the Western Isles to 34% in Ayrshire and Arran.
- The proportion of adults rating their health as 'bad' or 'very bad', or reporting that they have a long-standing illness, disability or health problem is higher in more deprived areas.

Epilepsy

- New hospital admissions for epilepsy have declined gradually over the last ten years.

High blood pressure

- The rate of registered patients consulting with a member of the general practice team for high blood pressure has been consistently greatest in the Scottish Index of Multiple Deprivation (SIMD) quintile 3 for females and generally in deprivation quintiles 3 or 4 for males over the past ten years.
- In 2012/13 the consultation rate was higher in the least than the most deprived quintile for both males and females. This has been the case since 2003/04 for males and from 2007/08 for females.

High cholesterol

- An estimated 0.7% of the population registered with a general practice (approximately 37,660 people) consulted a member of the general practice team during 2012/13 because of high cholesterol.
- Over the past ten years, consistently fewer males than females consulted a member of the general practice team because of high cholesterol: an estimated 18,010 males compared to 19,660 females in 2012/13 (0.66% compared to 0.70% of the registered population)
- Both the number and the rate for people consulting a member of the general practice team because of high cholesterol were higher in 2012/13 for those living in the least deprived than the most deprived areas. This deprivation gradient has been generally evident throughout the last ten years and more noticeable for males than females.

Tobacco use

- In 2012, smoking prevalence in Scotland varied by NHS health board, from 17% in the Borders to 28% in Ayrshire and Arran.
- There was a strong gradient in smoking prevalence across Scottish Index of Multiple Deprivation (SIMD) quintiles in 2012, increasing from 10% in the least deprived quintile to 36% in the most deprived quintile.

Background

The ScotPHO website contains comprehensive information on a wide range of topics grouped into sections including: Behaviour; Health, wellbeing and disease; and Clinical risk factors. Along with summary data and statistics, the website provides background information, interpretation, policy notes, commentaries on data sources, references and links to further information.

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Further Information

Further information can be found on the [ScotPHO website](#). Metadata and pre-release access information for this publication is available [here](#).

About ISD

Scotland has some of the best health service data in the world combining high quality, consistency, national coverage and the ability to link data to allow patient based analysis and follow up. Information Services Division (ISD) is a business operating unit of NHS National Services Scotland - and has been in existence for over 40 years. We are an essential support service to NHSScotland and the Scottish Government Health Department and others, responsive to the needs of NHSScotland as the delivery of health and social care evolves.

About ScotPHO

The Scottish Public Health Observatory (ScotPHO) collaboration is led by ISD Scotland and NHS Health Scotland, and includes the Glasgow Centre for Population Health, National Records of Scotland and Health Protection Scotland. Our aim is to make public health information more accessible and usable to improve health and reduce inequalities in Scotland.