Mental health and mental ill health in EU:An overview of situations and challenges

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Mental health an heavy burden

 Mental ill health affects every fourth citizen and can lead to suicide, a cause of too many deaths; from 10% to

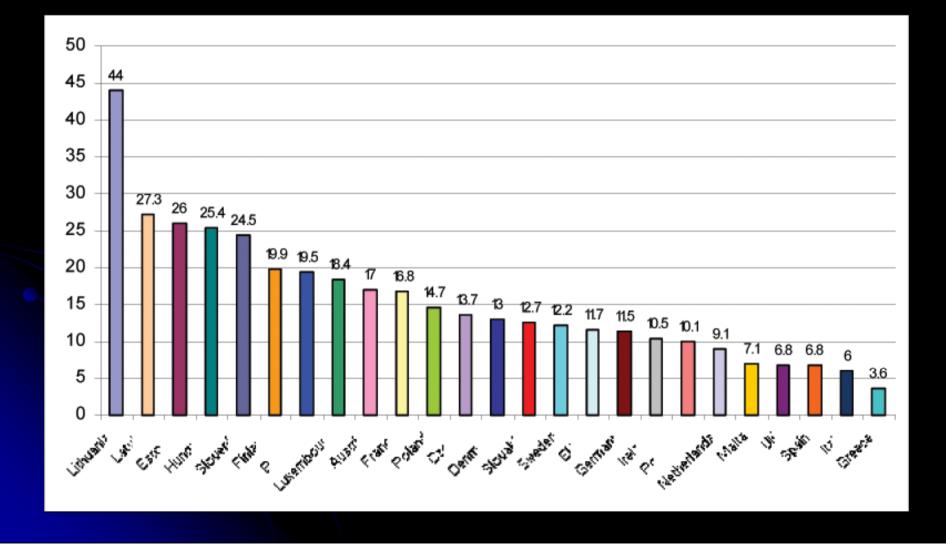
27% of adult Europeans are estimated to experience at least one form of mental ill health during any one year : mainly anxiety and depressive disorders plus substance (alcohol and drug) disorders

in the EU, some 58,000 citizens die from suicide every year

- Mental ill health causes significant losses and burdens to the economic, social, educational as well as criminal and justice systems;
 - Mental ill health costs the EU an estimated 3%-4% of GDP, mainly through lost productivity but many sectors are affected.
 - Mental disorders are a leading cause of early retirement and disability pensions.

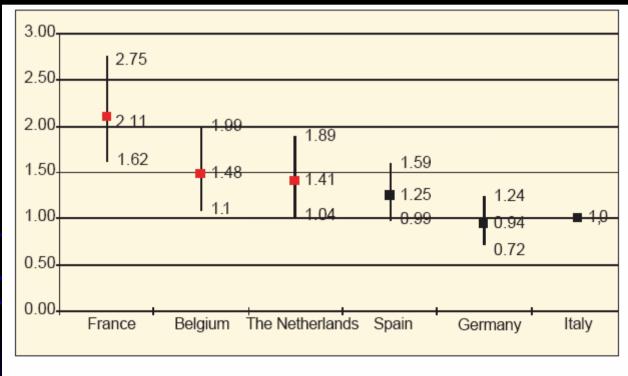
 Stigmatisation, discrimination and non-respect for the human rights and the dignity of mentally ill and disabled people still exist, challenging core European values.

Standardized suicide rates 2002



Relative risk of any mood disorder in the last 12 months

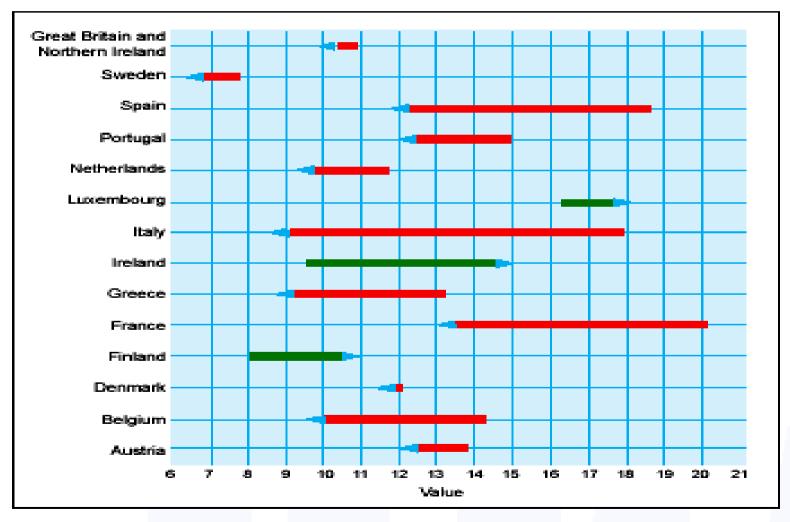
Odds ratio for any mood disorder in the last 12 months, using Italy as a base. Standardised for sex, age, living arrangements and urban/rural



Data from ESEMED 2000 study

Trend in Alcohol Consumption 1980–2001

Pure alcohol consumption, litres per capita, both sexes. Red lines indicate a decrease and green lines represent an increase.



Source: WHO Health for All Database

Sale of antidepressants (STAKES)

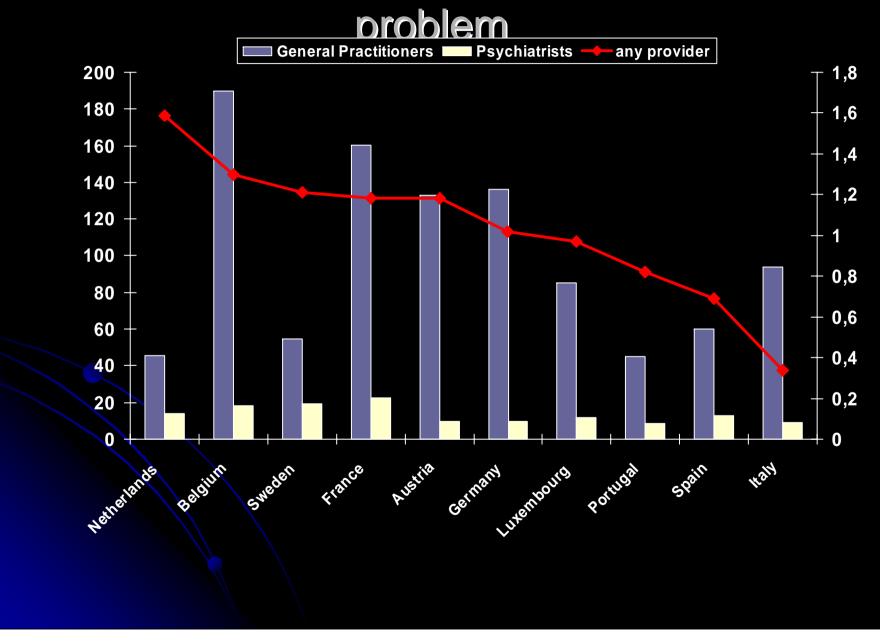
<u>Antidepressants</u> as defined by the ATC classification system by WHO (Class N06A includes SSRIs, tricyclic and tetracyclic agents, triazolopyridines, aminoketons, MAO inhibitors, and other new antidepressants like mirtazapine, reboxetine, venlafaxine, nefazodone, etc.)

Calculation is based on the volume of sales to pharmacies and hospitals by wholesalers.

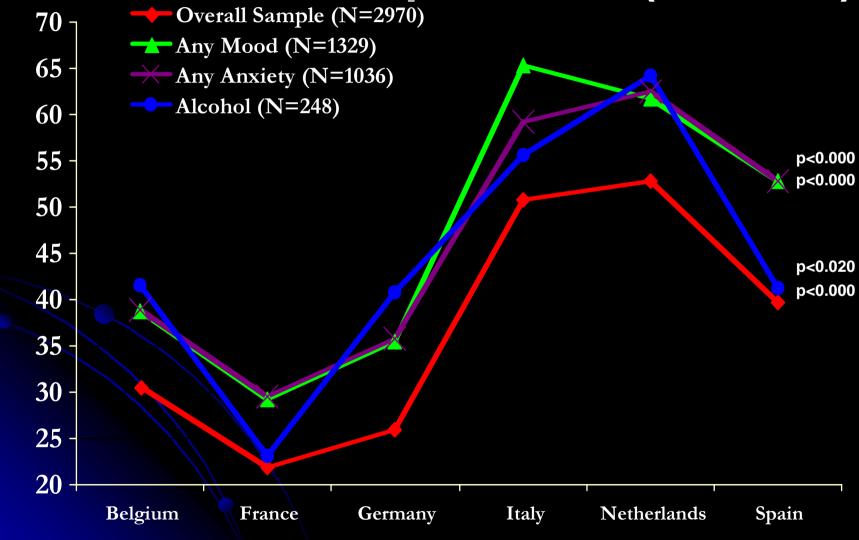
Number of 'defined daily doses' (DDD = assumed average dose per day for each drug) per 1,000 inhabitants per 365 days.

| Country | Antidepressa nts | Trend/Yea r |
|---------|---------------------|----------------|
| AUS | 6.2 (X) | |
| BEL | | |
| DNK | 30.3 (IV) | +0.2 |
| FNL | 35.5 (III) | +2.4 |
| FRA | 49,3(I)? | |
| GER | 12.6 (VII) | +0.7 |
| GRE | | |
| IRE | 10.4 (VIII) | |
| ITA* | 9.7 (IX) | |
| LUX | | |
| NED | | |
| NOR | 41.4 (II) | +2.1 |
| POR | | |
| SPA° | 19.4° (VI) | +1.1° |
| SWE | 48.8 (I) | +2.8 |
| UK | 22.0 (V) 999, ° | Packages |

Probabiliy to seek help for a mental health



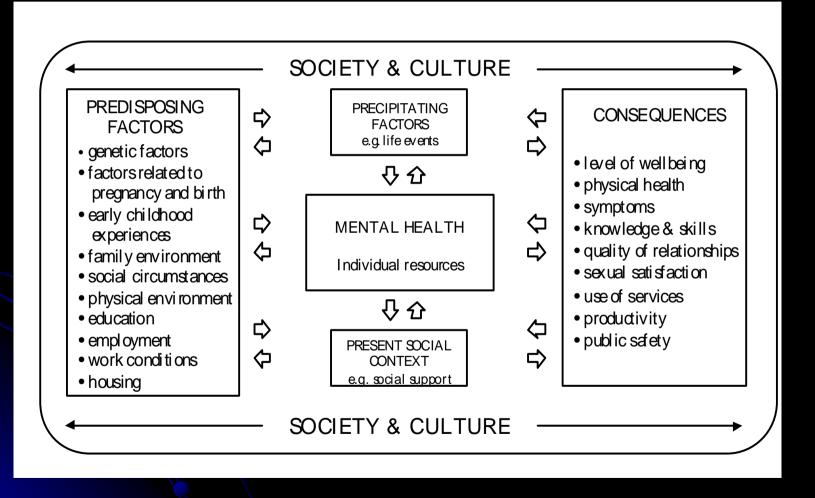
Did a Family Doctor ever refer you to a Mental Health Specialist? (Lifetime)



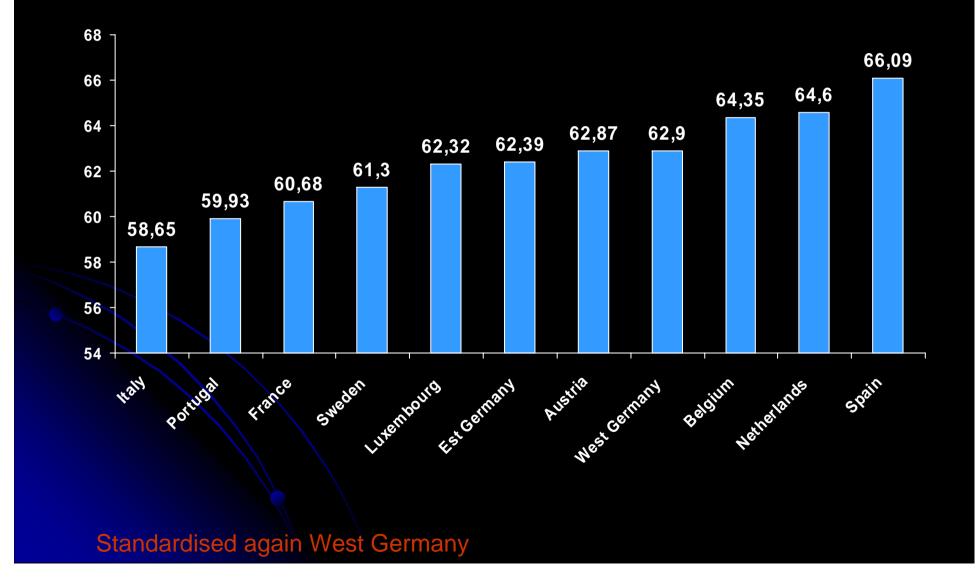
Mental health and ill health definitions Mental health has a positive and a negative dimension.

- The positive dimension refers to the concepts of well-being, positive traits and ability to cope in the face of adversities(resilience).
- The negative dimension relates
 - to negative symptoms defined as psychological distress
 - to mental disorders along a medical definition established through recognised classifications such as chapter V of the International Classification of Disease (ICD10) or DSM=ill health

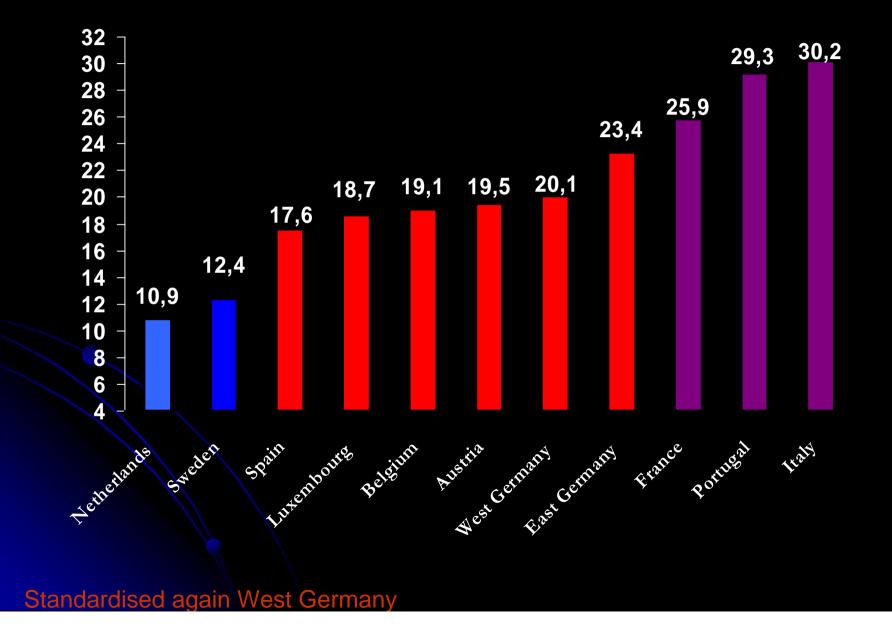
Mental health determinants



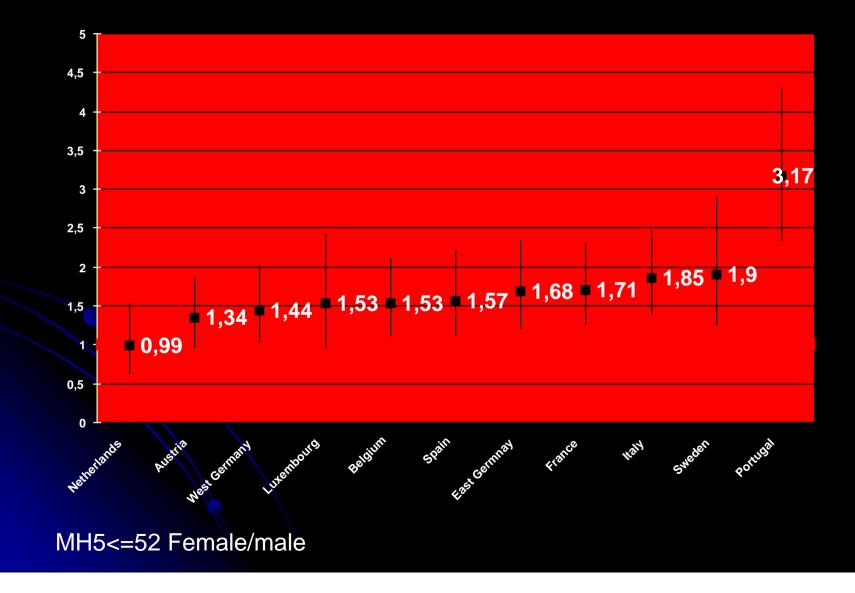
Positive mental health: Vitality subscale SF 36 (0 to 100) Eurobarometer



Occurrence of MHI-5 cases (score=52 or less) by Country (%)



Gender MH5 Caseness Eurobarometer



Large differences across EU concerning mental health indicators

- Some countries appear to have consistently lower rates of mental disorders and some others higher
- Importance of risk factors: gender, age, marital status, unemployment, low income, place of living and place of birth
- Risk groups are different in the diverse countries
- Promotion/prevention policies are very different too as well as the capacities to be transversal

Challenges

- Lack of comparable information about the 25 EU countries
- Large differences in mental health across EU
- Large differences concerning major risk factors specially gender, age, employment and work statutes
- Large differences on mental health care access
- Large differences in mental health specially alcohol, drugs, suicide prevention/promotion policies
- Let us work together and exchange experiences

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