

# REDUCING THE INCIDENCE OF LIFESTYLE DISEASES: THE NURSING CONTRIBUTION

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“  
TO BE IS WHAT  
YOU DO AND  
WHAT YOU  
CHOOSE NOT TO  
DO”

“Essence and existence are the result of form, substance and function.”

In 2003 a national survey examined Perceived Health and Health Behaviour in Malta.

National Health Interview Survey (2003), n=5510

## Perceived health & Health Behaviour

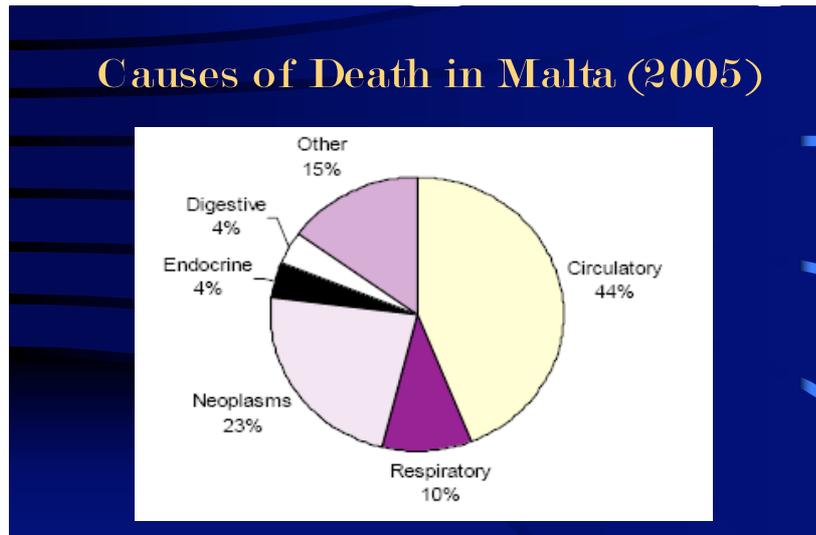
### Health

	Men	Women
Self-perceived good health	73%	66%
Long standing health problem sufferers	23%	27%
Feeling stressed over previous month	54%	68%

### Health behaviour

	Men	Women
Moderate or vigorous activity at work	57%	53%
Regular exercise (at least once weekly)	18%	11%
No. of days per week doing regular exercise	3 days	3 days
Smoke cigarettes	33%	21%
Drank alcohol in previous week	53%	28%
Drinking & driving (>3 units)	17%	5%
Changed eating habits in last 3 years	22%	31%
Average weight	78kg	66kg
Average height	1.7m	1.6m

In 2005 the percentages of Causes of Death in Malta were identified as:



- In the 15-44 age group traffic accidents and overdoses are the commonest causes of death
- Diabetes mellitus (DM) is both a common cause of death as well as an important risk factor for circulatory diseases. The standardized mortality rate for DM in Malta is higher than that of EU-15 and EU-10.
- There were 381 deaths (12.2%) attributable to smoking: 269 male deaths and 112 female deaths.

### COMMON LIFESTYLE ISSUES AND ASSOCIATED DISORDERS

of particular concern in Malta are:

- Circulatory disorders
- Smoking
- Sexual Health
- Breast Cancer
- Transport Accidents

### CIRCULATORY DISORDERS

Deaths due to diseases of the circulatory system, namely ischaemic heart disease, stroke and heart failure are the leading causes of death accounting for 44% of all deaths. The standardized mortality rate for diseases of the circulatory system in Malta is lower than that of the new EU member states but higher than that of the old EU member states. However a decreasing trend is seen both in Malta as well as EU15, and EU10.

**Ischaemic Heart Disease** accounts for 22.4% of female deaths and 26.2% of male.

**Cerebrovascular diseases:** Female deaths 12.6%. Male deaths 8.2%

**Other heart diseases:** Female deaths 8.7%. Male deaths 4.8%

Deaths due to cerebrovascular disease in Malta.

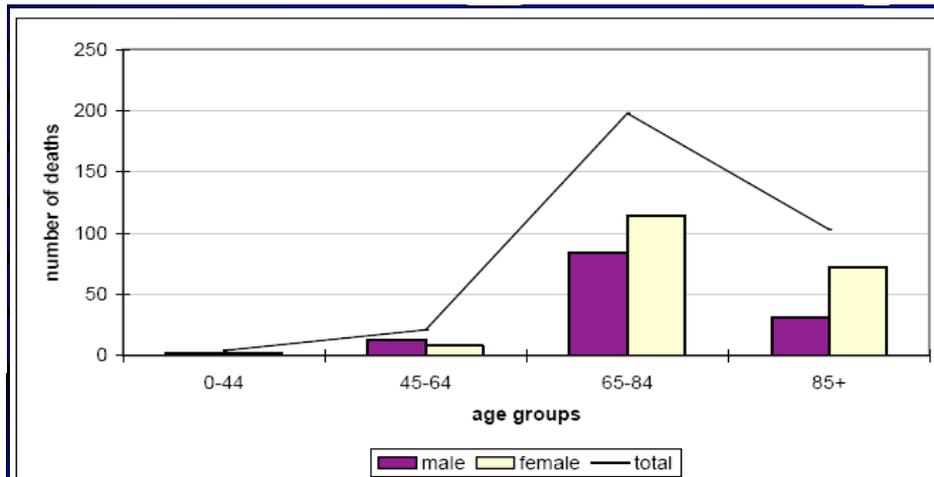
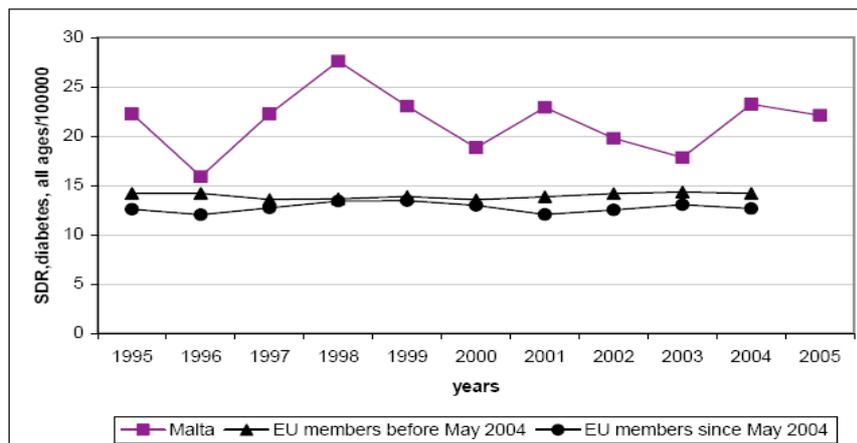


Figure 13a: Deaths due to cerebrovascular disease by age group and gender

## DIABETES MELLITUS

Diabetes Mellitus is common on the Maltese Islands. Even though a relatively common cause of death it does not reflect the actual prevalence of diabetes in Malta, since it is often a risk factor for many diseases and not necessarily the underlying cause of death. During the year 2005 there were 113 deaths due to diabetes, 56 males and 60 females. The age standardised death rate (ESP) was 22 per 100,000 population.



Diabetes Mellitus accounts for 3.9% of female deaths and 3.4% of male.

## NURSING CONTRIBUTION

Nurses are leading behavioural change by acting as:

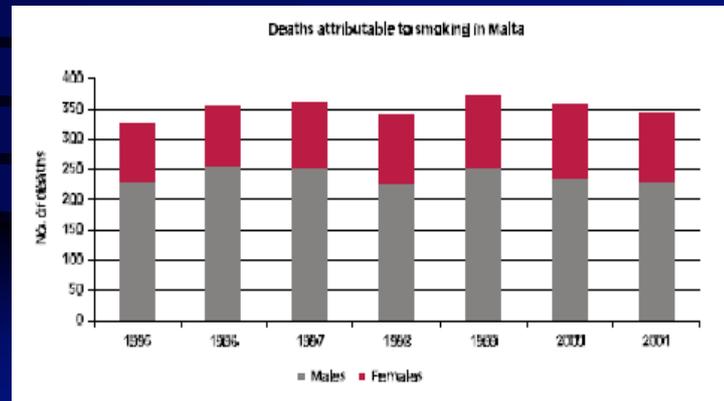
- Educators
- Role Models
- Promoters of healthy lifestyles that include healthy eating, exercising and stress management.

Caring for patients stricken with the effects of disease.

Providing specialised cardiovascular medical and surgical nursing.

## SMOKING

### Deaths attributable to smoking in Malta



- 26.01% of the population smokes. 70.74% do not. (H.I.S. 2003)
- 33% of student nurses are smokers. (Trapani, 2000)
- 25.1% of medical doctors smoke. (Mamo & Galea, 1991)

What will it take to discourage nurses from smoking?



## NURSING CONTRIBUTION

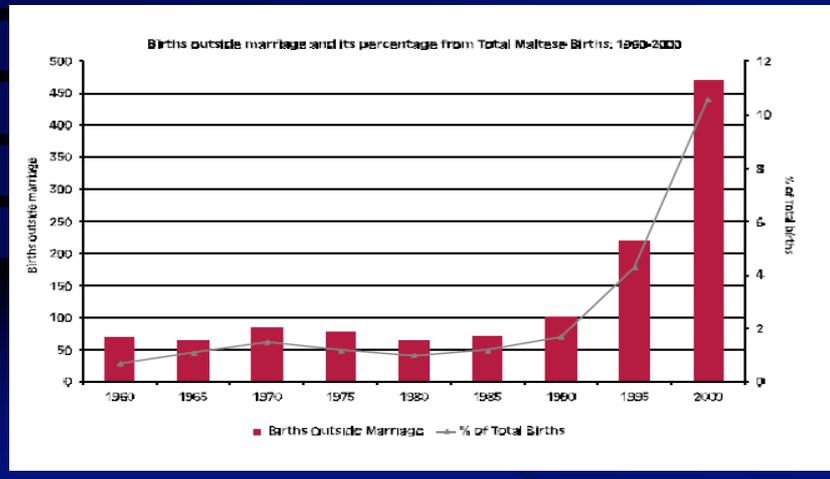
Nurses leading behavioural change by acting as

- Educators
- Role models
- Political lobbyists for legislation

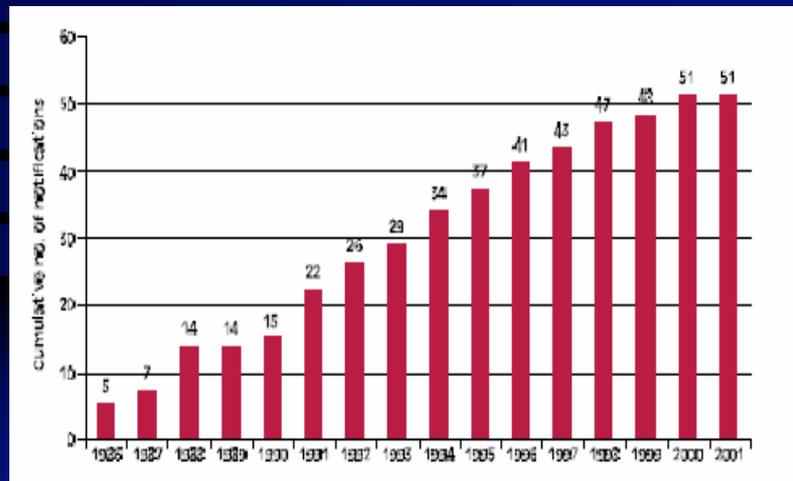
And caring for patients stricken with the effects of smoking

## SEXUAL HEALTH

## Births outside marriage and its % of total Maltese Births



## Cumulative no of AIDS notifications (1986-2001) by notification



## NURSING CONTRIBUTION

- School Nurses – to move from traditional roles to more contemporary and contextually relevant roles.
- Sexual Health nurses moving away from clinics to being present at Entertainment places/Colleges.
- More active contribution in Health Promotion Department.
- Nurses to act as educators for sexual health and family planning.
- Such specialised roles are to be delivered at a Primary level of Care.

## BREAST CANCER

The incidence of breast cancer in Malta is slightly higher than the EU average.

## EARLY DETECTION and TREATMENT -

are the two most important factors in reducing the number of women who die of breast cancer. Studies show that survival rates drop dramatically when women present with advanced cancer. (Kols, 2002)

Breast cancer may be associated with lifestyle.

## NURSING CONTRIBUTION

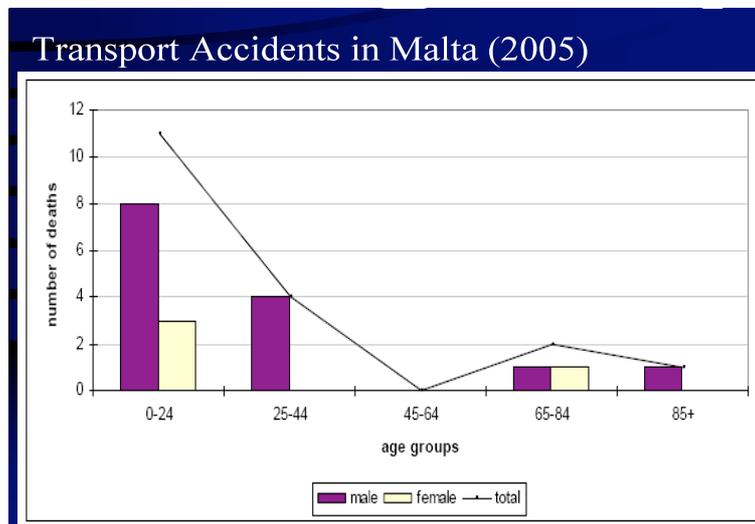
Nurses leading behavioural change by acting as

- Educators – encouraging self examination and early intervention.
- Points of reference for patients and their families.
- Promoters of healthy lifestyles that include healthy eating, exercising and stress management.

Carers of patients stricken with the effects of breast cancer – providing therapeutic care, support, advice and counselling.

Specialists in the provision of breast care nursing.

## TRANSPORT ACCIDENTS



Young males between the ages 15 – 24 form the highest proportion of people killed in transport accidents.

## **NURSING CONTRIBUTION**

Nurses lead behavioural change by acting as

- Educators – encouraging responsible driving and safety during driving.
- Promoting the notion that responsible driving and drinking do not go together.

Nurses act as a point of reference for patients who have suffered from an MVA and their families.

## **CONCLUSION**

- Nurses as educators do assist in the provision of the right choices to the public.
- Nurses as role models help in developing a healthy image for society.
- Nurses as deliverers of care alleviate the effects of physical and emotional disability due to disease.
- Nurses cannot value-judge their clients stricken with lifestyle disease.