

# DPH Annual Report 2023

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Dr Emma Fletcher,  
Director of Public Health  
November 2023

# Background



**NHS Tayside**

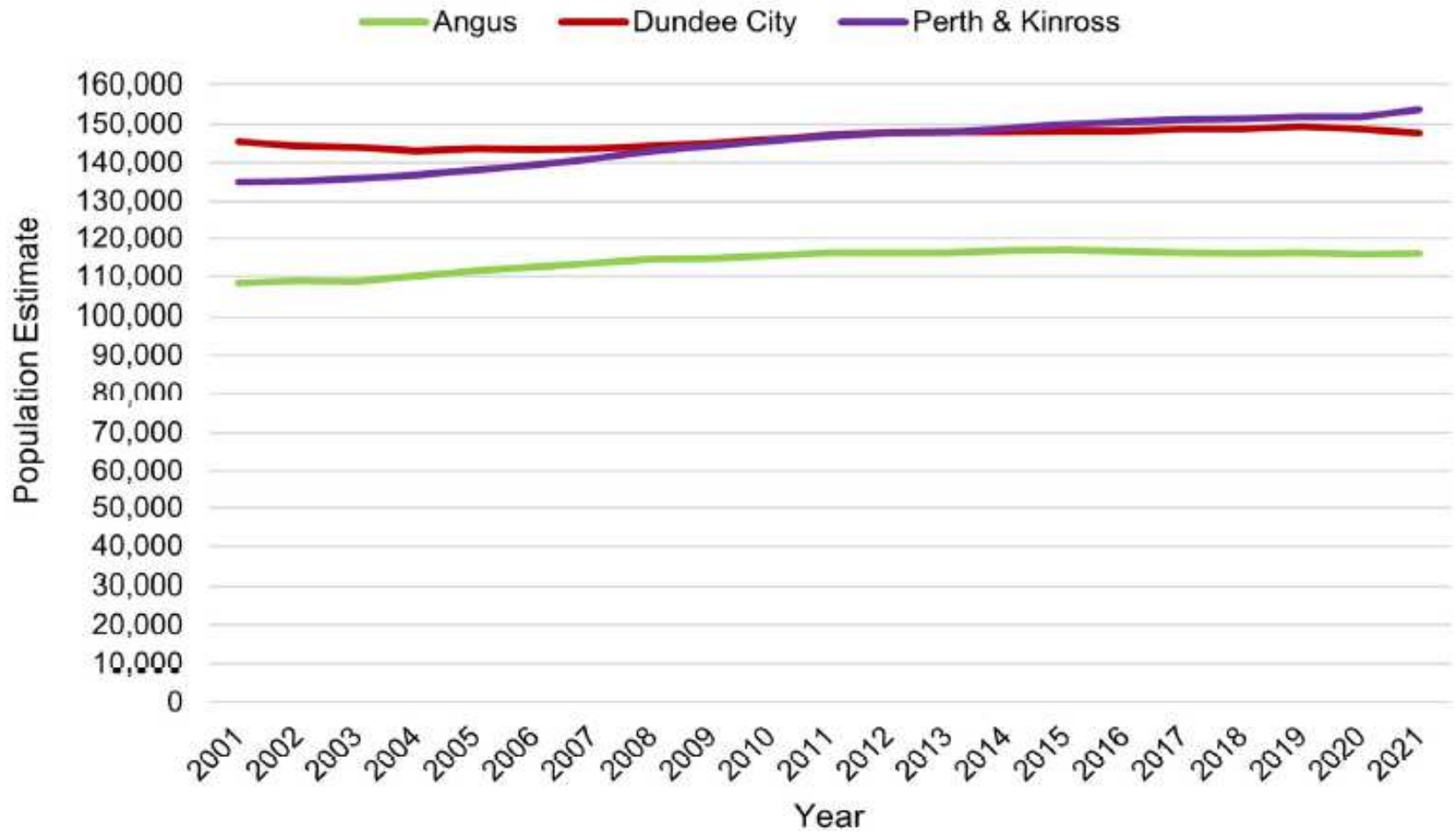
**Director of Public Health**

**Annual Report 2023**



- Qualitative reporting to PH Committee of NHST
- Epidemiological report of current health in Tayside
- <https://www.nhstayside.scot.nhs.uk/OurServicesAZ/PublicHealth/index.htm>

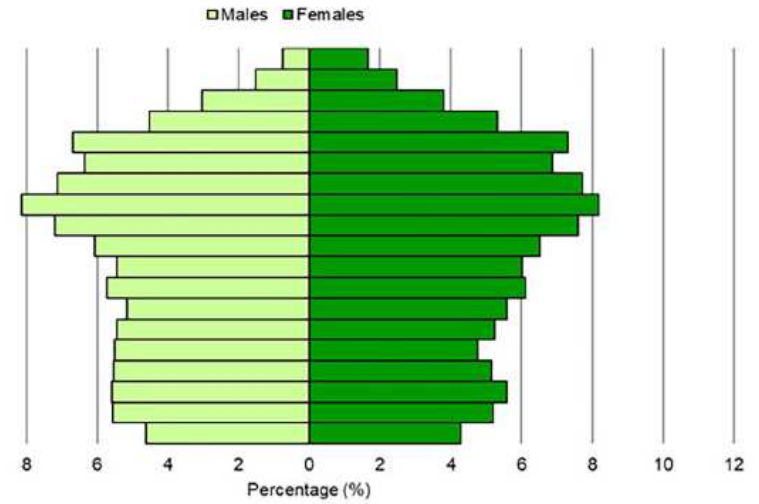
*Population estimates of Tayside by local authority area; 2001-2021*



Population estimates of Angus by age and sex as at 30 June 2021

Age band

- 90+
- 85-89
- 80-84
- 75-79
- 70-74
- 65-69
- 60-64
- 55-59
- 50-54
- 45-49
- 40-44
- 35-39
- 30-34
- 25-29
- 20-24
- 15-19
- 10-14
- 5-9
- 0-4

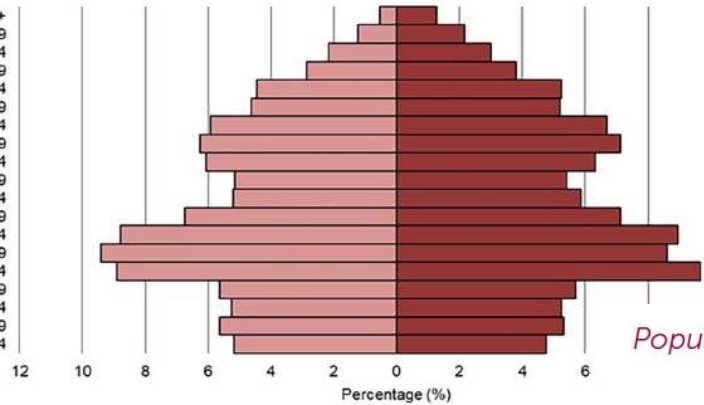


Population estimates of Dundee City by age and sex as at 30 June 2021

Age band

- 90+
- 85-89
- 80-84
- 75-79
- 70-74
- 65-69
- 60-64
- 55-59
- 50-54
- 45-49
- 40-44
- 35-39
- 30-34
- 25-29
- 20-24
- 15-19
- 10-14
- 5-9
- 0-4

□ Males ■ Females



Population estimates of Perth & Kinross by age and sex as at 30 June 2021

Age band

- 90+
- 85-89
- 80-84
- 75-79
- 70-74
- 65-69
- 60-64
- 55-59
- 50-54
- 45-49
- 40-44
- 35-39
- 30-34
- 25-29
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- 10-14
- 5-9
- 0-4

□ Males ■ Females

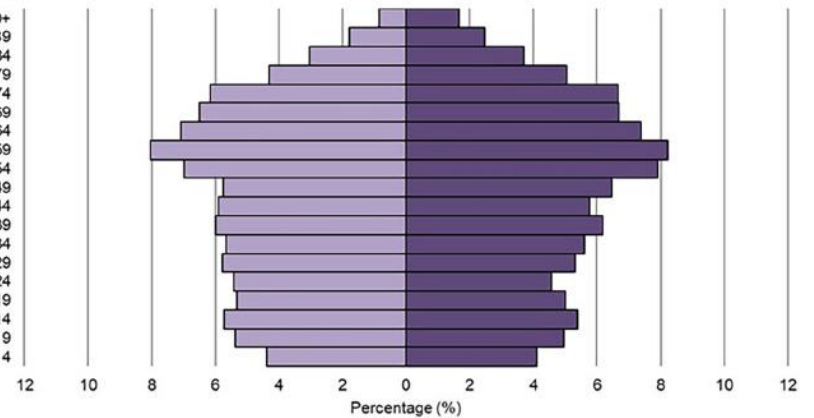


Figure 8: Projected percentage change in population of Tayside by local authority area; 2018-2028

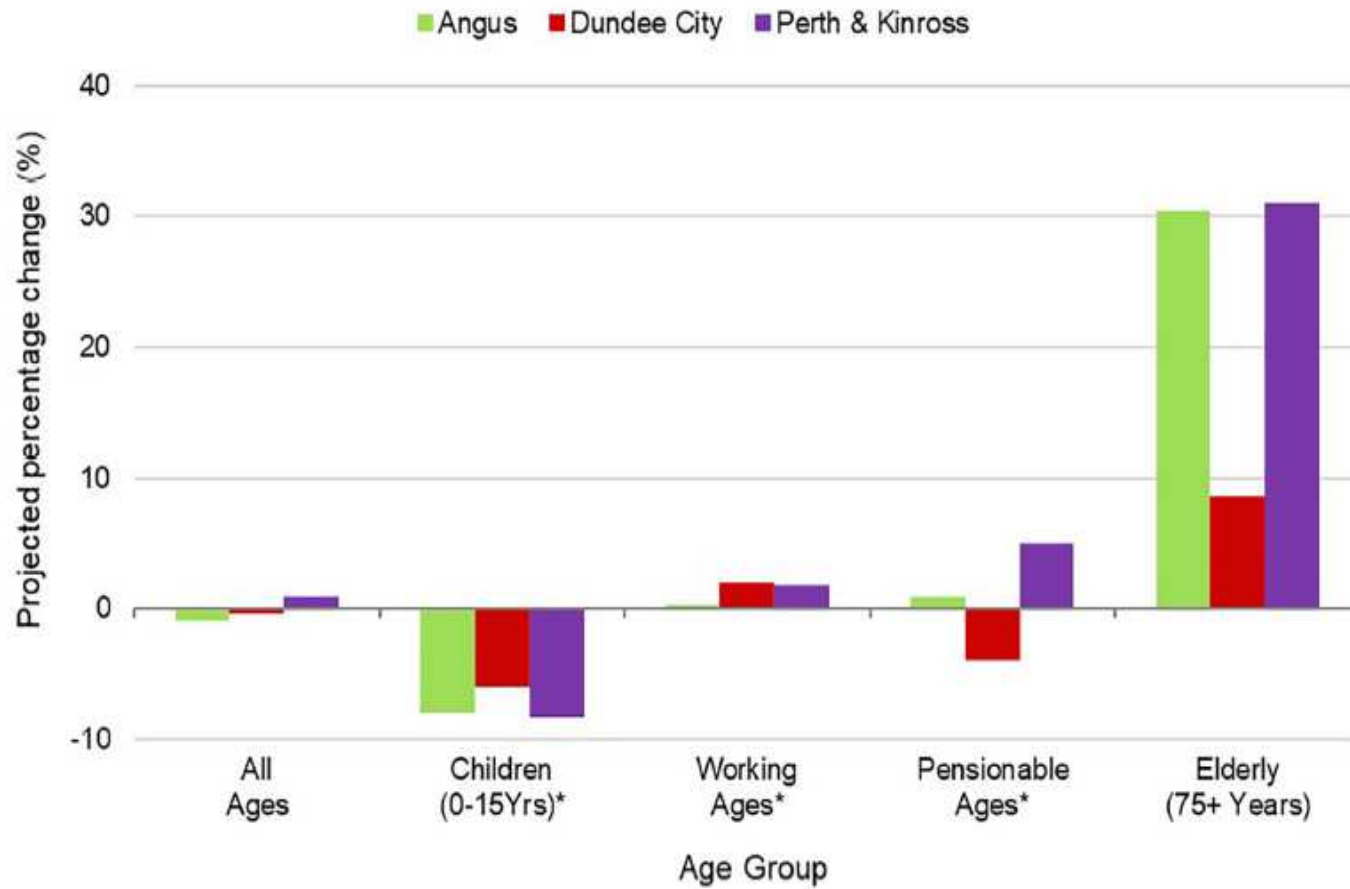
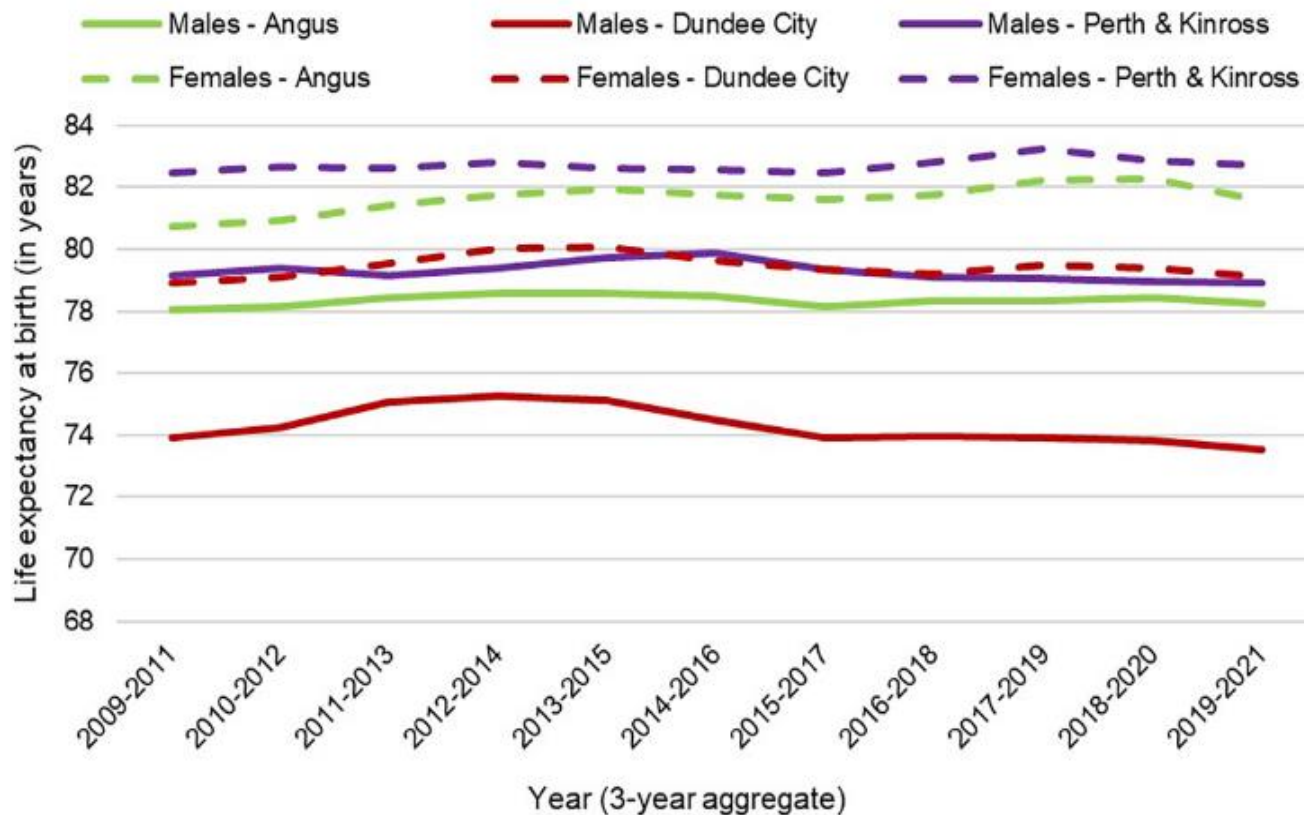
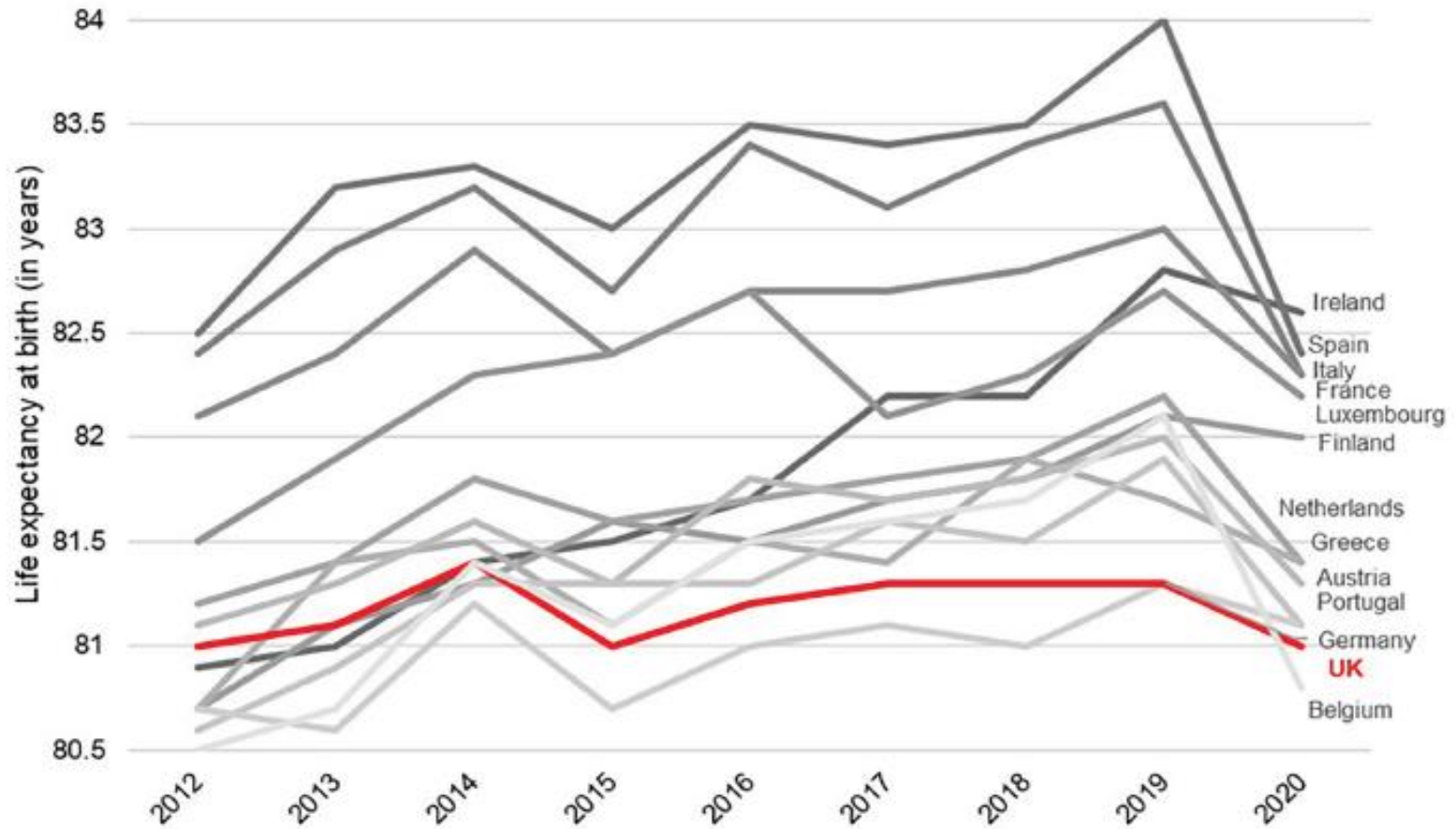


Figure 12: Life expectancy (LE) at birth for population in Tayside by local authority area and sex; 2009-11 to 2019-21



## Life expectancy (LE) at birth for population of Western Europe; 2012-2020





*Table 4: Causes of premature (<75 years) mortality in Tayside  
Comparison of the 10 main causes of death within the most and least deprived areas  
Based on five-year aggregate (2017-2021)*

<b>SIMD Quintile 1 (most deprived)</b>	<b>% of all SIMD Quintile 1 premature deaths</b>	<b>Top 10 Main Causes</b>	<b>SIMD Quintile 5 (least deprived)</b>	<b>% of all SIMD Quintile 5 premature deaths</b>
Substance use (drugs)	9.7%	1	Lung cancer	7.5%
Lung cancer	9.3%	2	Heart attack	5.3%
COPD* related	6.4%	3	Coronary Heart Disease (CHD)	4.0%
Coronary Heart Disease (CHD)	5.9%	4	Breast cancer	3.9%
Heart attack	5.3%	5	Brain cancer	3.3%
Liver disease	3.3%	6	Pancreatic cancer	2.8%
COVID-19	3.3%	7	Prostate cancer	2.7%
Suicide (hanging, strangulation & suffocation)	2.3%	8	COPD* related	2.7%
Mental & behavioural disorders - psychoactive drug use	2.1%	9	Cancer of the digestive organs	2.6%
Breast cancer	1.5%	10	COVID-19	2.5%
<b>SIMD 1 (Premature) Total</b>	<b>49.1%</b>	<b>-</b>	<b>SIMD 5 (Premature) Total</b>	<b>37.3%</b>



Figure 16: Age-sex standardised premature mortality rates per 100,000 population aged 15-44, in Tayside by local authority area and Scotland; 2002-04 to 2019-21

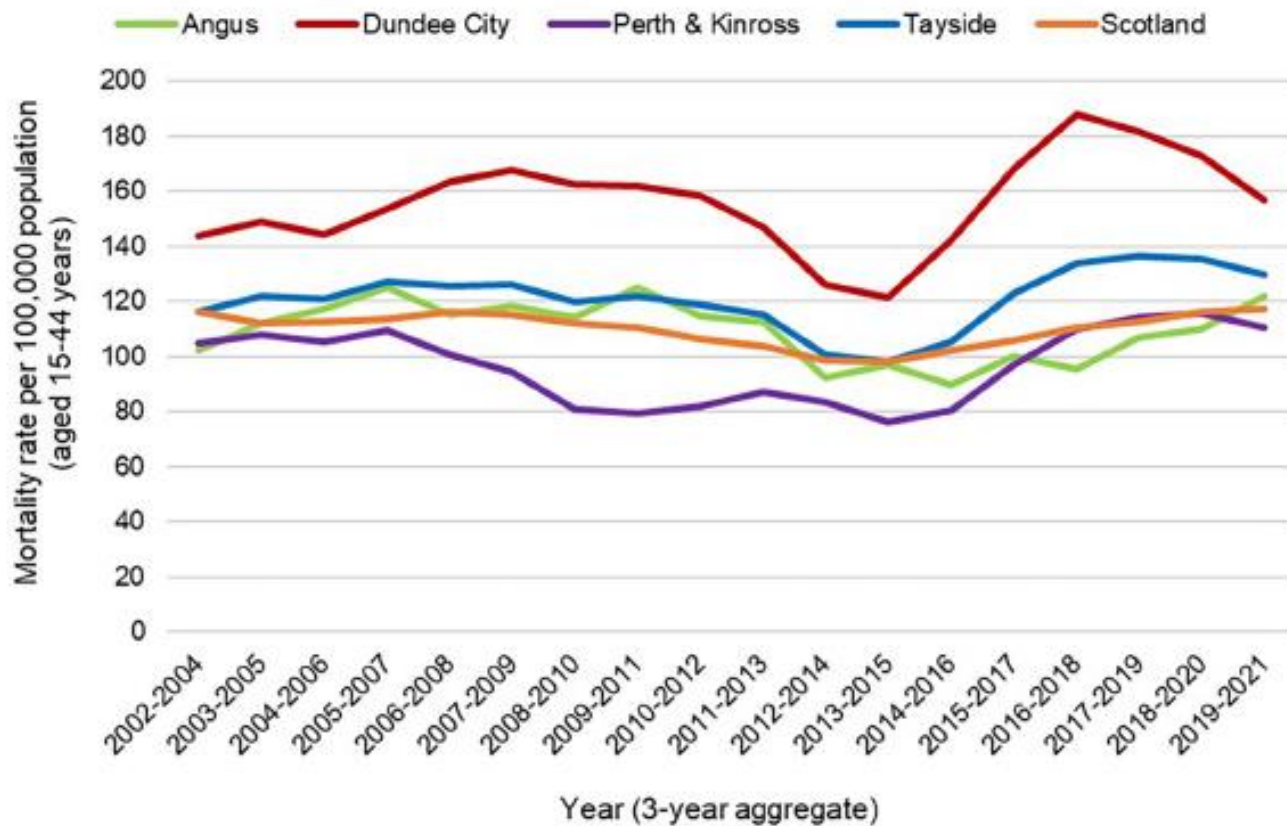


Figure 35: Age-sex standardised drug-related death rate per 100,000 population in Tayside and Scotland; 2006-2021

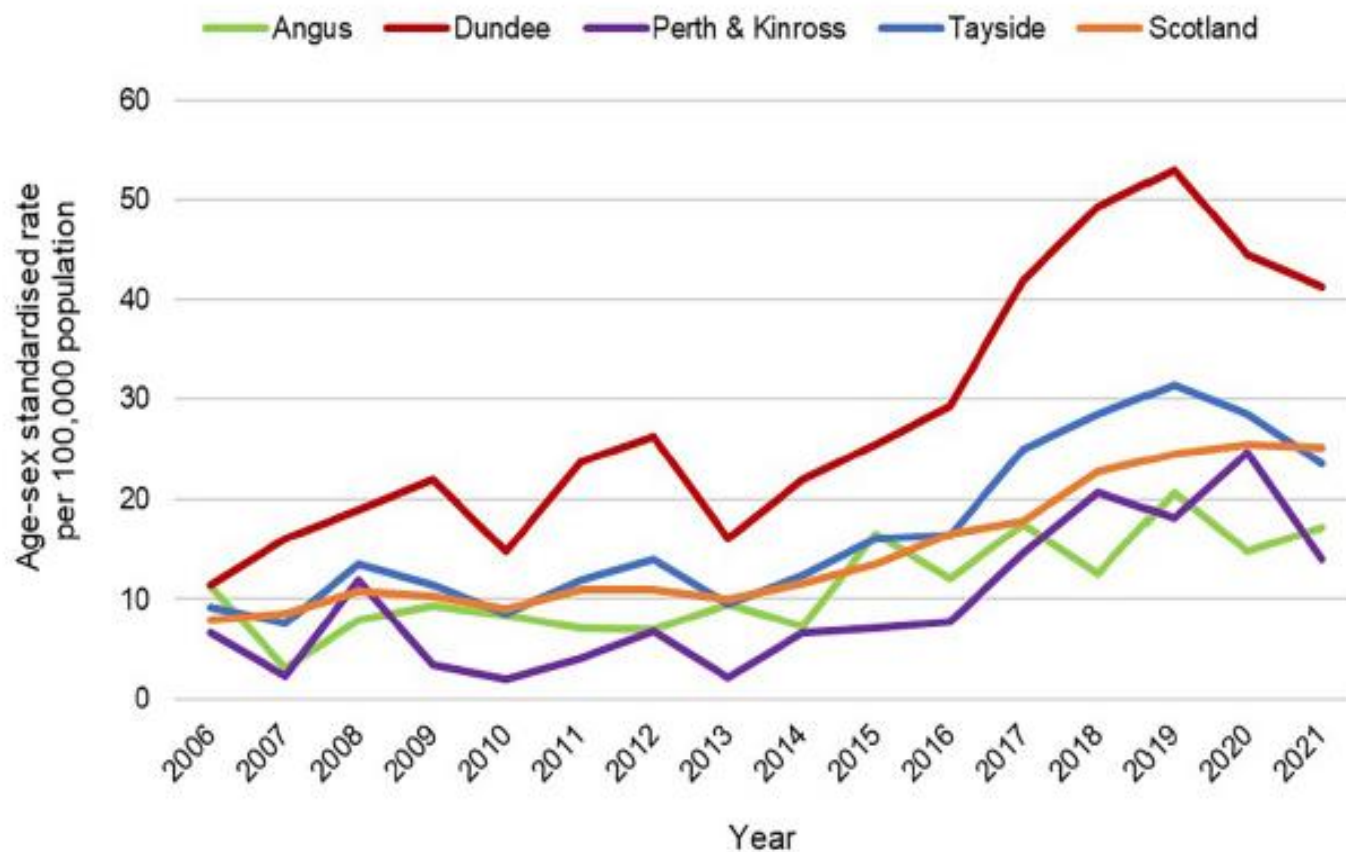


Figure 27: Age-sex standardised suicide rate per 100,000 population in Tayside and Scotland; 2002-2006 to 2017-2021

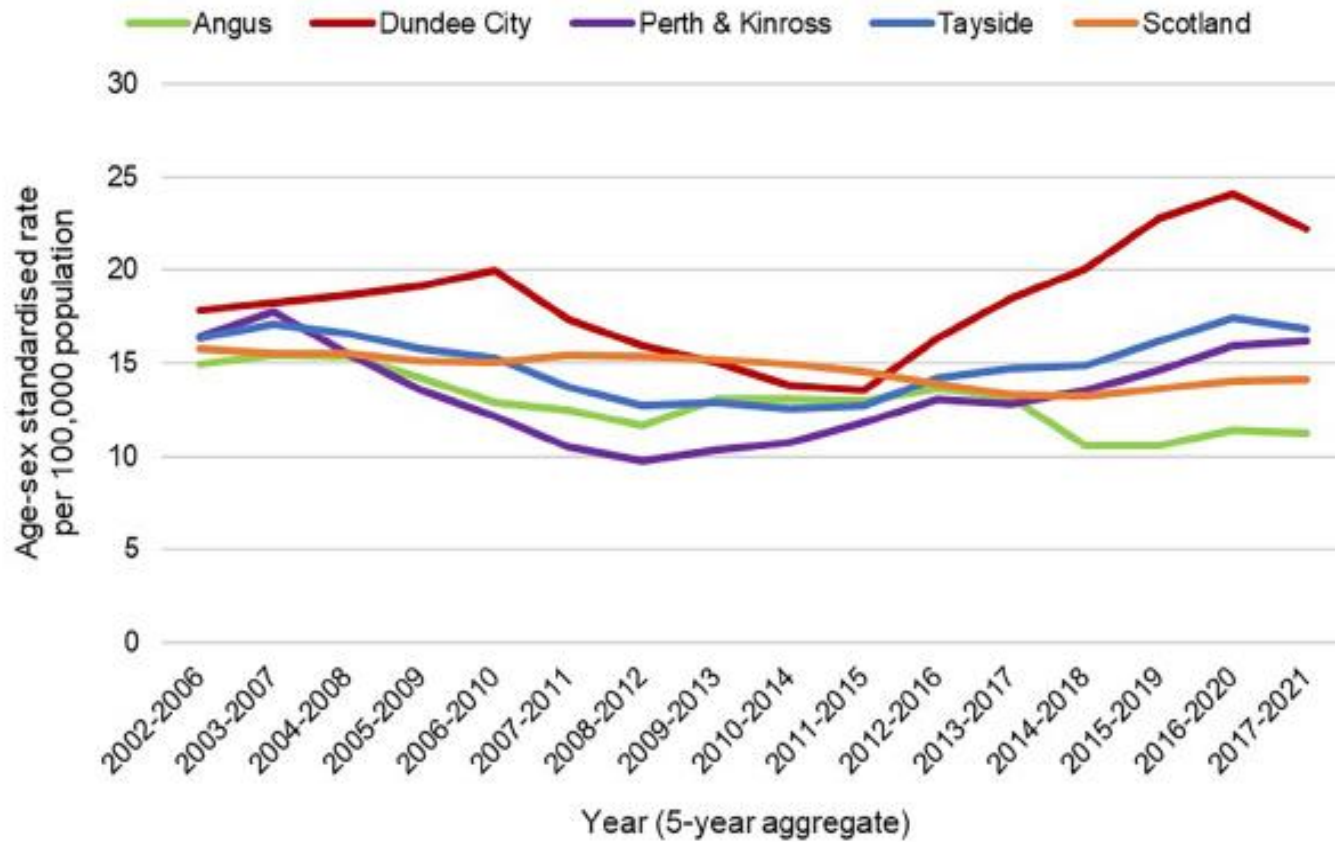


Figure 32: Alcohol-specific age standardised mortality rates per 100,000 population in Tayside and Scotland; 2000-2004 to 2017-2021

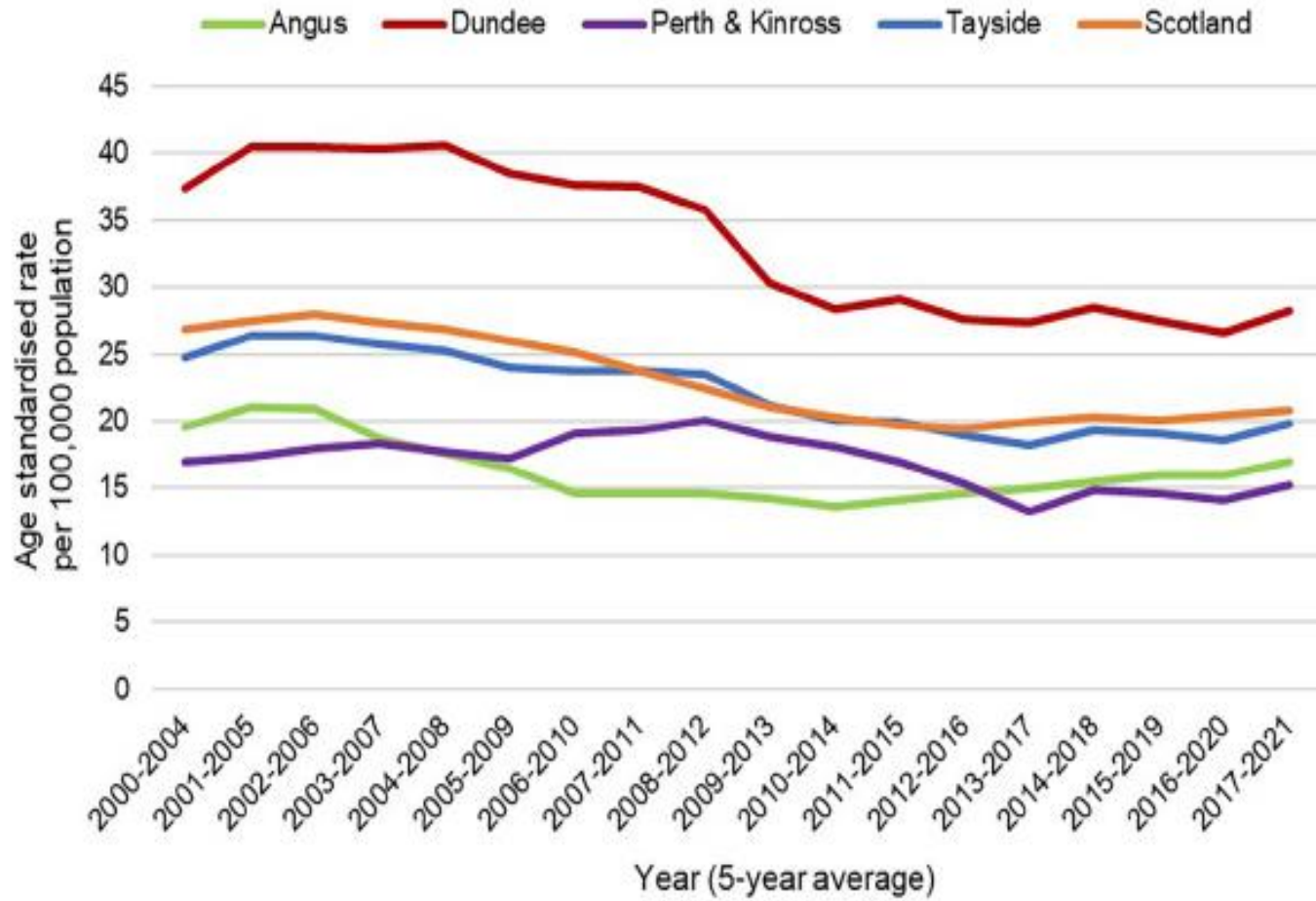


Figure 17: Age-sex standardised rate of coronary heart disease patient hospitalisations per 100,000 population in Tayside and Scotland; 2002/03-2004/05 to 2019/20-2021/22

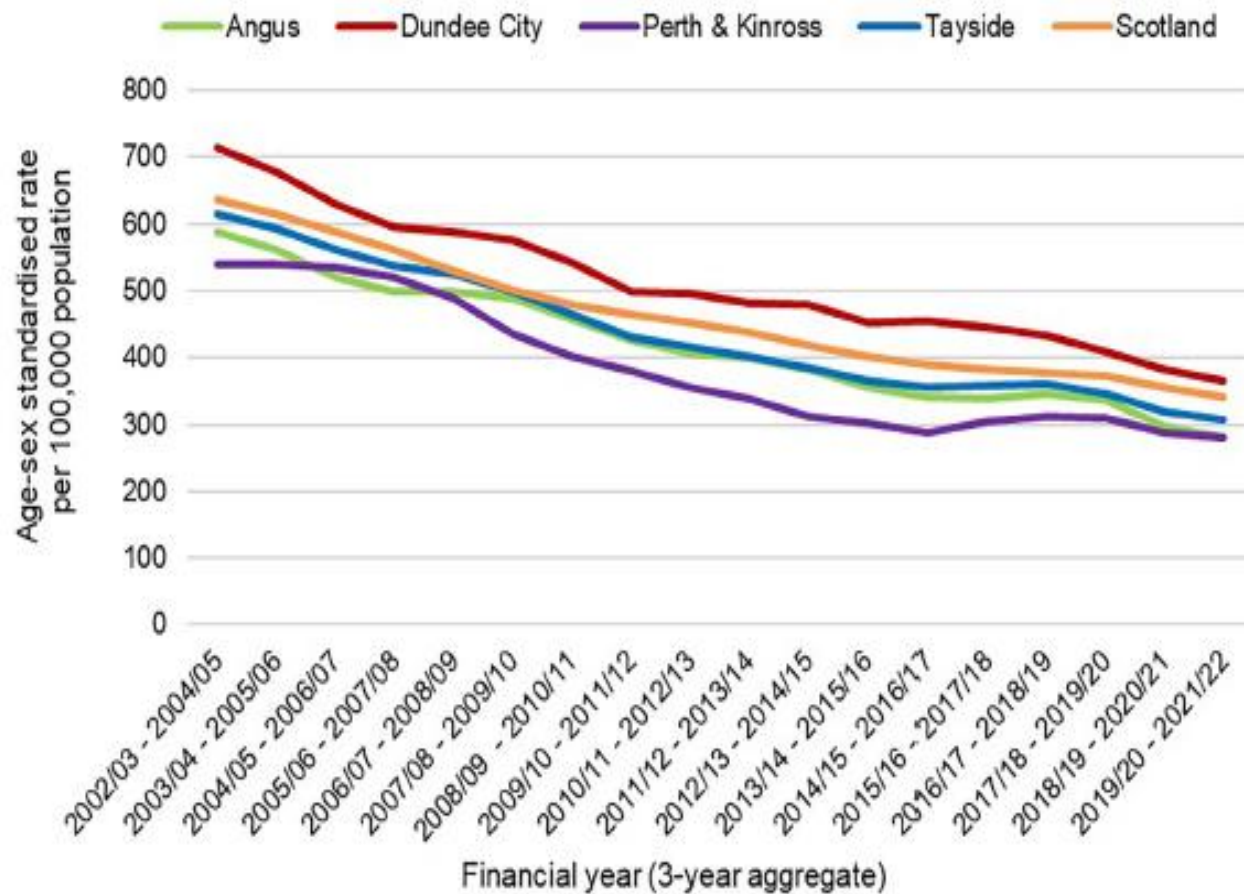




Figure 22: Crude prevalence rate of all types of diabetes for all ages per 100,000 population; 2013-2022\*

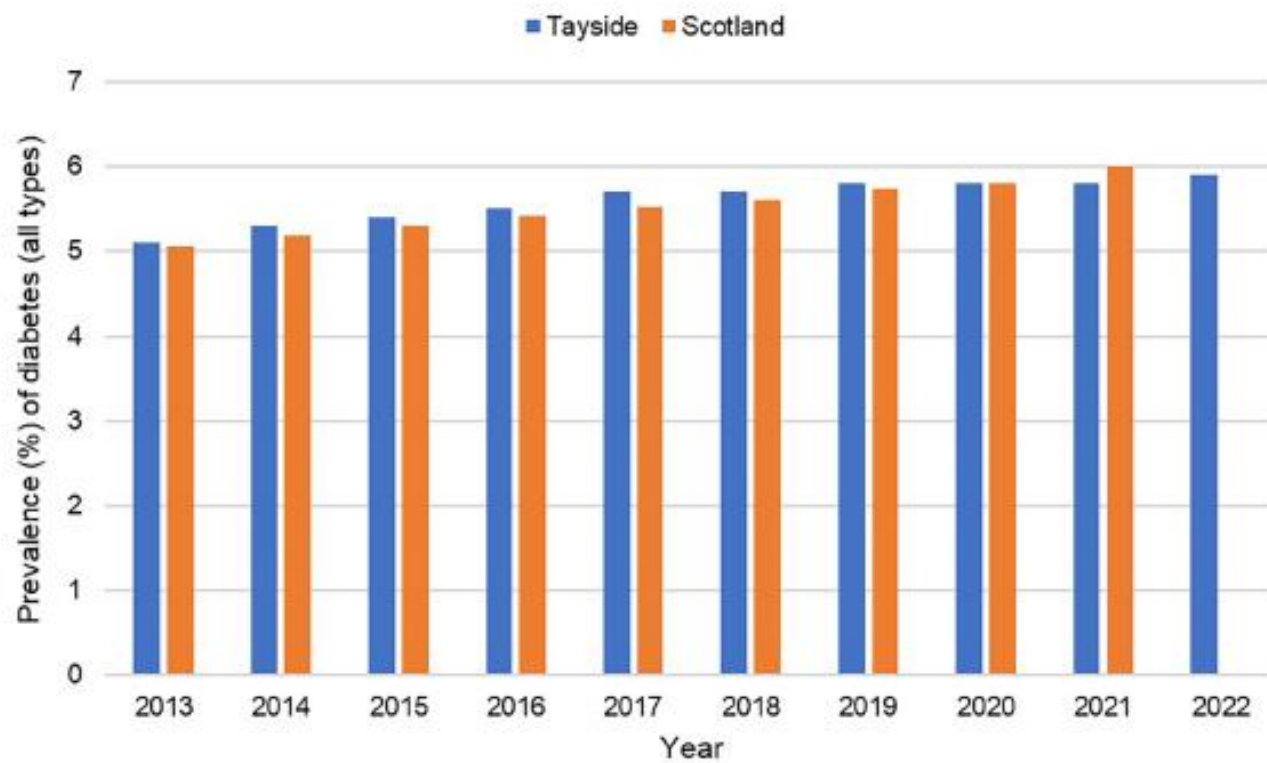


Figure 41: Percentage of adults estimated to be of healthy weight in Tayside and Scotland; 2012-2015 to 2016-2019

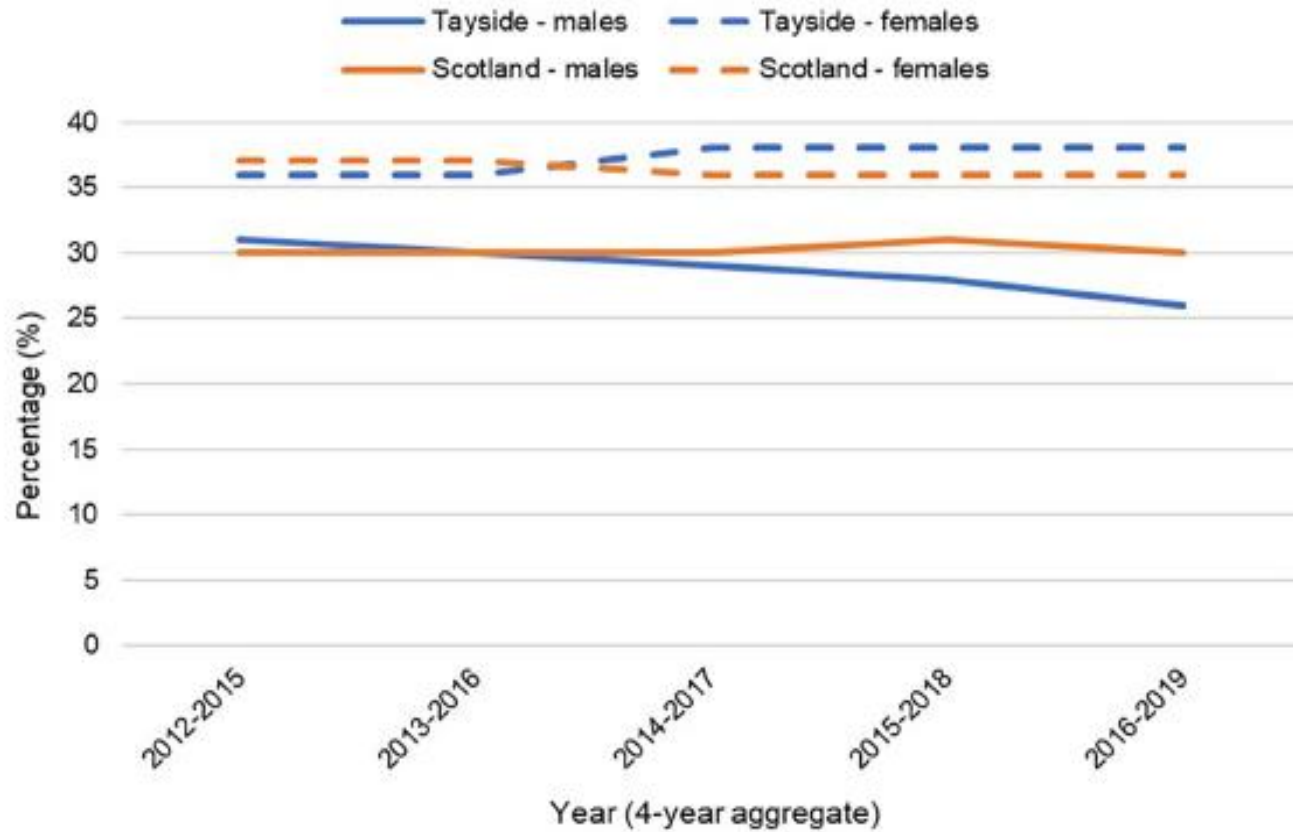
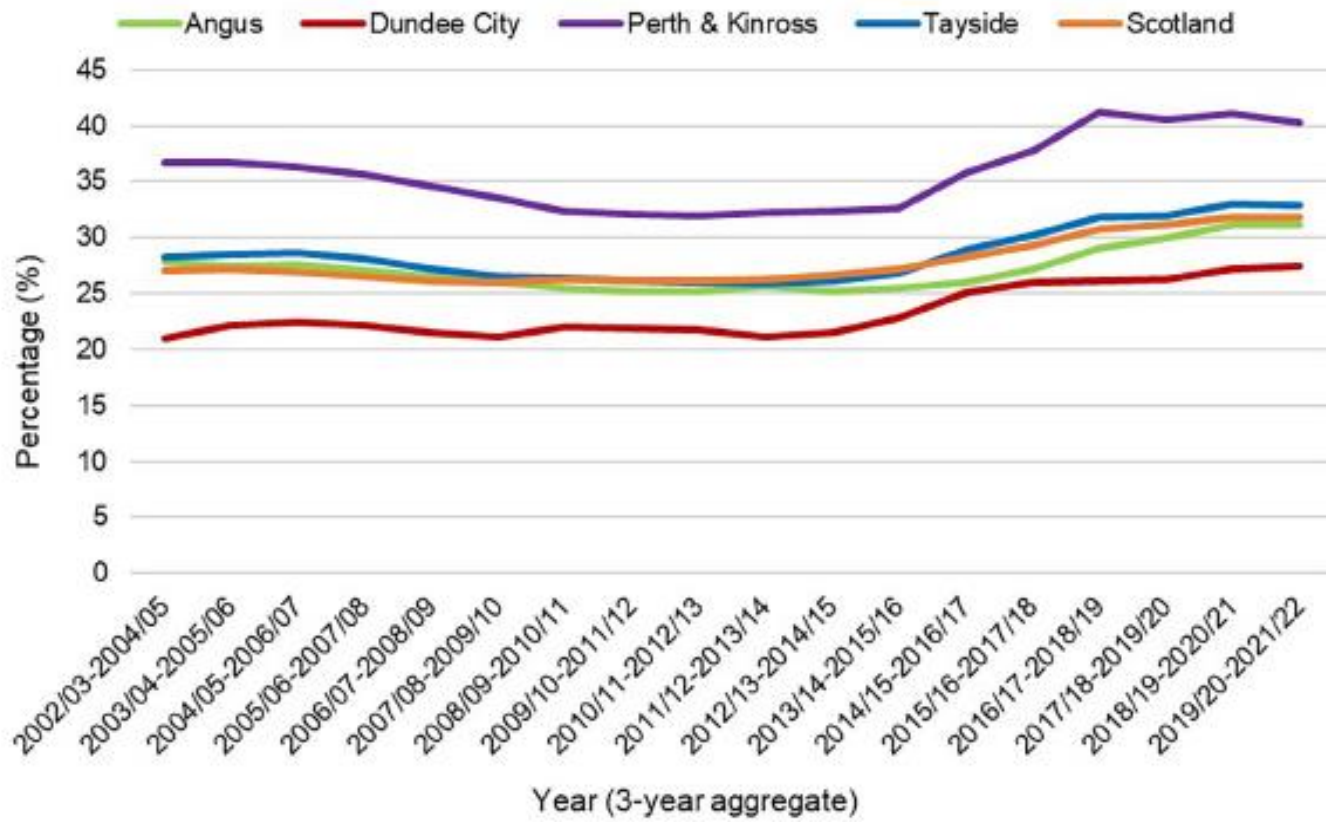




Figure 46: Percentage of babies exclusively breastfed at 6-8 weeks, Tayside and Scotland; 2002/03-2004/05 to 2019/20-2021/22



# Summary

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- Life expectancy stalling/decreasing
- Premature mortality
- Massive impact of socioeconomic deprivation
- Ageing population +++
- **Some successes**.... Smoking, breastfeeding...
- **Huge challenges**.... Obesity, substance use (drugs and alcohol), vaping...
- **Wider context hugely important but we can make a difference locally through all of our work**