

Abstract citation ID: ckad160.242
Socioeconomic inequalities in noncommunicable diseases in Portugal: an analysis of three decades

Margarida Martins Teixeira

M Martins Teixeira^{1,2}, A Varela², JV Santos^{2,3,4}, J Perelman⁵, T Leão^{1,3}

¹Institute of Public Health of the University of Porto, Porto, Portugal

²Public Health Unit Grande Porto V - Porto Ocidental, Porto, Portugal

³Faculty of Medicine - University of Porto, Porto, Portugal

⁴CINTESIS – Center for Health Technology and Services Research, Porto, Portugal

⁵Comprehensive Health Research Centre, Lisbon, Portugal

Contact: margaridat93@gmail.com

Background:

Least favored people experience poorer health than those with higher socioeconomic (SE) status. These inequalities are mainly due to disparities in noncommunicable diseases (NCD). Over the last decades, Portugal experienced important SE challenges, including the recession, making it fundamental to assess how health inequalities have been affected. Hence, this study aimed to examine the evolution of SE inequalities in the prevalence of NCD in Portugal in the last 32 years.

Methods:

We used data from all the six National Health Interview Surveys (1987, 1995, 1999, 2005, 2014, and 2019). Considering the main causes of morbimortality and data availability, we selected seven self-reported NCD: diabetes, hypertension, stroke, acute myocardial infarction (AMI), chronic obstructive pulmonary disease (COPD), asthma, and depression. We estimated the relative (RII) and absolute (SII) indexes of inequalities using education and income as proxies for SE status, adjusted for sex and age, for each NCD and survey.

Results:

Regarding education, RII decreased until 2005 but increased since 2005 for diabetes (RII87 = 4.4; RII05 = 2.0; RII19 = 2.6) and hypertension (RII87 = 1.8; RII05 = 1.3; RII19 = 1.8). For asthma, RII oscillated until 2005 but increased since then (RII05 = 0.9; RII19 = 1.9). Although data for the remaining diseases are only available since 2005, an upward trend in educational RII is noticeable in stroke (RII05 = 2.1; RII19 = 4.3), AMI (RII05 = 0.9; RII19 = 3.4), COPD (RII05 = 1.4; RII19 = 2.2), and depression (RII05 = 0.9; RII19 = 2.1). The results for SII and using income as SE indicator followed similar trends.

Conclusions:

This study found persisting inequalities in NCD, with an increasing trend after 2005. These findings are of concern since they emphasize the persistence of health inequalities and the vulnerability of the most deprived groups to economic crisis. Health and social policies are crucial to attenuate these inequalities, especially considering the announced financial crisis.

Key messages:

- In Portugal, socioeconomic inequalities in noncommunicable diseases have been increasing since 2005.

- It is crucial to tackle inequalities in health, especially considering the predicted economic crisis and the vulnerability of the most deprived groups to such events.