



# Your heart health

## Shire of Cardinia - Current and future outcomes

This fact sheet presents information about heart health, risk factors and heart disease outcomes in the Cardinia LGA. Heart disease is the single leading cause of death in Australia and its risk is influenced by a variety of factors such as lower socio-economic status and lifestyle behaviours. The Shire of Cardinia is located on Melbourne's south-east fringe centred on the town of Pakenham, and including lifestyle bush suburbs in the north and important agricultural areas in the south. At June 2014 it had a population of 87,008.

Cardinia's age profile is significantly younger than the state average. The Pakenham area is a designated growth corridor of Melbourne and is dominated by first home-buyer families - predominantly parents with young children. It is consistently one of the fastest growing areas in Victoria.

Cardinia is slightly more advantaged than the state average, and ranks fifty-ninth in Victoria for level of total disadvantage, with a score of 1024.3, and suburbs ranging from 960 (Lang Lang, slightly disadvantaged) to 1109 (Beaconsfield Upper, highly advantaged).

Outcomes 2008 - 2013

Type of heart disease	Heart attack	Angina	Heart Failure	Cardiac Arrest
<b>Shire of Cardinia</b> rate per 10,000 pop, 6 year avg	<b>20.9</b>	<b>11.2</b>	<b>16.2</b>	<b>5.5</b>
<b>Higher or lower than expected</b> based on current age structure	<b>+15.6%</b>	<b>+11.2%</b>	<b>-3.4%</b>	<b>+3.1%</b>
<b>Shire of Cardinia</b> Change over 5 years	<b>==</b>	<b>==</b>	<b>↑</b>	<b>==</b>
<b>Rank in Victoria</b> out of 79 LGAs, 1 is highest incidence	<b>37</b>	<b>38</b>	<b>45</b>	<b>28</b>

Forecast outcomes

<b>2026 forecast</b>	<b>Number of cases</b>	<b>354</b>	<b>189</b>	<b>312</b>	<b>94</b>
	<b>Rate</b> per 10,000 persons	<b>27.3</b>	<b>14.6</b>	<b>24.1</b>	<b>7.3</b>
<b>2036 forecast</b>	<b>Number of cases</b>	<b>546</b>	<b>281</b>	<b>534</b>	<b>149</b>
	<b>Rate</b> per 10,000 persons	<b>33.5</b>	<b>17.2</b>	<b>32.8</b>	<b>9.1</b>

### Future rate of heart disease based on changing age structure of the population

**Heart attack** - Comprises STEMI - Occurs when there is a significant or complete blockage of a major artery that starves the heart muscle of oxygen resulting in muscle death and permanent damage - and NSTEMI - a less severe type of heart attack with only a partial blockage of a major artery which is slower in progression and therefore results in less heart muscle damage. If left untreated, this can progress to a full blockage.

**Angina** - Is transient pain or discomfort that occurs when part of the heart muscle is temporarily not able to get enough blood and oxygen to meet its needs.

Usually happens during times of physical or emotional stress and subsides with rest or medication and is unlikely to cause heart muscle damage

**Heart failure** - is an ongoing (chronic) condition in which the heart is weakened or enlarged making it less efficient at pumping blood around the body; this often results in the body being overloaded with fluid and causes difficulty breathing.

**Cardiac arrest** - Occurs when the electrical signals to the heart are affected and the heart stops beating altogether, this means that blood is no longer being pumped to the lungs and brain. Heart attack is a common cause of cardiac arrest.

**Forecast rates** - Projections are based on .id's Small Area Forecast Information, and age/sex rates of hospital separations. Relative risk factors for the area are assumed to remain constant and any increase is the result of changing age structure.

### KEY

<span style="color: red;">■</span> More than +5	==	SMR within 1% of 2008 rate	↑↑	SMR increased 5%+ from 2008 rate
<span style="color: green;">■</span> Less than -5	↑	SMR increased 1% - 5% from 2008 rate	↓↓	SMR declined 5%+ from 2008 rate
<span style="color: yellow;">■</span> Between -5 and +5	↓	SMR declined 1%-5% from 2008 rate		



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## Shire of Cardinia - Risk factors

Risk factors are predominantly lifestyle related characteristics which increase the risk of heart disease. Smoking, an unhealthy diet and lack of exercise are the main determinants of heart disease risk. Lower socio-economic status, low income and education levels also influence the rate at which heart disease occurs.

The Shire of Cardinia has consistently higher lifestyle risks of heart disease than the Victorian average, for both males and females. There are fewer overweight or obese males, but significantly higher rates of smoking and soft drink consumption. 35% of females and 28% of males don't meet the recommended physical activity guidelines. Fruit and vegetable consumption is also worse than the state average.

