



**Substantial progress has been made in postponing death between 1970 and 2010**

Across the region, each country increased its average age of death. Great variation exists, however, with the Maldives demonstrating the greatest gain (about 42 years) and Pakistan showing the smallest improvement (13 years).

**Declines in mortality rates largely varied by age, with greatest improvements for young children**

Death rates for children between 1 and 4 years old declined by 84% between 1970 and 2010, while mortality rates saw the least improvement for people over 80 years old (30% and 15% decreases for women and men, respectively).

**Premature death and disability caused by most communicable diseases and newborn conditions have greatly declined**

Between 1990 and 2010, the region succeeded in decreasing premature death and disability, also known as healthy years lost, from lower respiratory infections, preterm birth complications, and diarrheal diseases; however, these conditions are still among the top five causes of disease burden for Afghanistan, Bangladesh, and Nepal.

**HIV/AIDS is rapidly rising in the region**

HIV/AIDS caused 4,753% more healthy years lost in 2010 than in 1990, reflecting how the epidemic is taking hold of the region. In India, HIV/AIDS became the 15th leading cause of disease burden in 2010, up from 114th.

**Non-communicable diseases are now the leading causes of premature death and disability in South Asia**

Between 1990 and 2010, healthy years lost from causes like stroke, ischemic heart disease, depression, and diabetes increased between 50% and 100% in the region. Sri Lanka experienced a 211% increase in diabetes.

**Road injuries have taken a growing toll on health in most countries**

Healthy years lost from road injuries increased 58% between 1990 and 2010, with substantial country variation (ranging from a 20% decrease in the Maldives to a 112% rise in Afghanistan).

**Key terms**

**Years of life lost (YLLs):** years of life lost due to premature mortality.

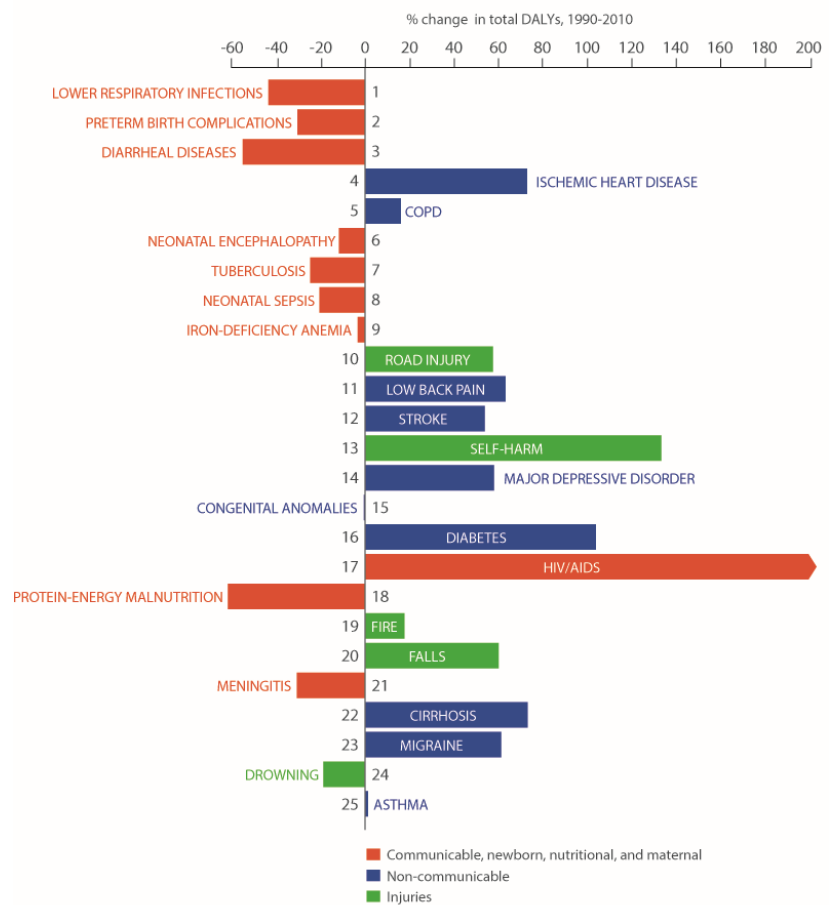
**Years lived with disability (YLDs):** years of life lived with any short-term or long-term health loss.

**Disability-adjusted life years (DALYs):** the sum of years lost due to premature death (YLLs) and years lived with disability (YLDs). DALYs are also defined as years of healthy life lost.

**Risk factors:** potentially modifiable causes of disease and injury.

To learn more about the Global Burden of Disease (GBD), visit [www.ihmeuw.org/gbd](http://www.ihmeuw.org/gbd)

Shifts in leading causes of DALYs in South Asia, 1990-2010



Note: The leading 25 causes of DALYs are ranked from top to bottom in order of the number of DALYs they contributed in 2010. Bars to the right of the vertical line show the percent by which DALYs have increased since 1990. Bars on the left show the percent by which DALYs have decreased. Pointed arrows indicate causes that have increased by a greater amount than shown on the x-axis.

**Disease burden driven by risk factors for communicable diseases has substantially declined**

Much progress has been made for potentially avoidable risk factors like household air pollution, childhood underweight, and suboptimal breastfeeding, such that their burdens declined between 30% and 70% from 1990 to 2010. Nonetheless, these risk factors remain among the leading contributors of disease burden in Nepal and Pakistan.

**Potentially preventable behavioral risk factors are rapidly contributing to greater disease burden over time**

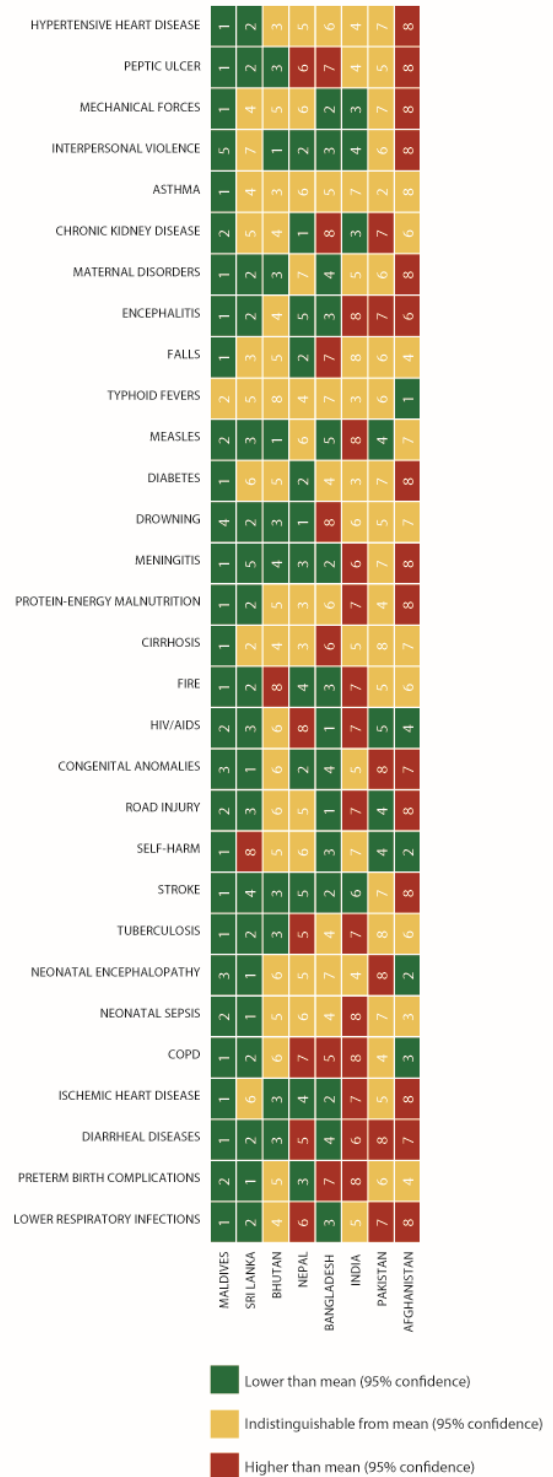
Risk factors associated with lifestyles, such as dietary risks and high body mass index, contributed to far more healthy years lost in 2010 than in 1990. During this time, Bangladesh saw a 749% rise in disease burden from high body mass index.

**GBD results allow countries to explore areas of success and identify areas of improvement relative to other countries within the region**  
 Benchmarking exercises (like the one to the right) can show premature mortality ranked relative to the region’s average and highlight the best (green) and worst (red) performers across the conditions that cause the most premature mortality in the region.

Across all countries and diseases, higher-income countries like the Maldives and Sri Lanka generally performed the best. India and Afghanistan had the most conditions for which they performed significantly worse.

For many communicable diseases, countries such as India and Pakistan consistently performed worse than the rest of the region. However, more variation took place for non-communicable diseases. Countries like Bangladesh and Nepal had significantly higher rates of premature mortality from chronic obstructive pulmonary disease (COPD), while Sri Lanka experienced significantly greater rates of premature mortality from self-harm than the rest of the region.

Causes of leading years of life lost, South Asia countries relative to regional average, 2010



Note: The columns are ordered by the absolute number of YLLs for that particular year. The numbers indicate the rank across countries for each cause in terms of age-standardized YLL rates, with 1 as the best performance and 8 as the worst.