

sepsis was observed. Italy is amongst the countries with the highest prevalence of microorganisms resistant to antimicrobial therapy in Europe. The aim of the present work was to evaluate the impact of mortality for ID on life expectancy (LE) in the Tuscany region (Italy).

Methods:

Mortality data relative to residents that died during the period 2000/2002- 2013/2015 were provided by the Tuscan Regional Mortality Registry. At first the analysis was performed for whole territory, then for geographic area (Nord-Est:NE, Centrum:C, South-East:SE). The analysis was realized with software Epidat, using the Pollard's method of decomposition of variations in LE for age and cause of death.

Results:

The overall gain in LE was 2.9 years for males and 2.6 years for females. The increase in mortality for ID was responsible for the loss of 0.11 years of LE for males vs. 0.16 years for females. The loss was observed in males aged 45-89, for females from 69 years onwards, with the highest loss between 79-89 years. After analysis for area, geographical differences emerged, for both males and females the highest loss of LE was observed for NE (-0.23 years vs. -0.19), followed by C (-0.15 years vs. -0.16) and SE (-0.12 vs. -0.11).

Conclusions:

The result can be partially explained by the transition from ICD-9 to ICD-10 (in 2010), which improved the sensitivity of codification, but also by diffusion of pathogens resistant to antimicrobial therapy. The highest impact of ID was observed in elderly, probably due to the existence of predisposing clinical condition. The ID deserve major attention; the programmes of hospital infection control and antimicrobial stewardship have to be potentiated in order to contain the phenomenon.

Key messages:

- During the study period an increase in mortality for infectious diseases comported the loss in terms of LE years.
- The growing diffusion of microorganisms resistant to antimicrobial therapy could have contributed to the higher mortality rates observed during the last period.

The impact of mortality for infectious diseases on life expectancy at birth in Tuscany, Italy

Lucia Kundisova

L Kundisova¹, N Nante^{1,2}, A Martini³, F Battisti³, L Giovannetti³, G Messina^{1,2}, E Chellini³

¹Post Graduate School of Public Health, University of Siena, Siena, Italy

²Department of Molecular and Developmental Medicine, University of Siena, Siena, Italy

³Institute for Study, Prevention and Cancer Network, Florence, Italy
Contact: lucia.kundisova@gmail.com

Introduction:

The epidemiologic transition describes the reduction of mortality for infectious diseases (ID), followed by an increase in prevalence of non-communicable diseases. During recent years the situation has changed; an increase in mortality for