Human race has always been interested in the question of immortality and longevity. In today’s developed societies, mainly due to a progress in healthcare and medicine, it is increasingly probable to reach old age and to survive old age. Life expectancy at age 65 is prolonging and adult mortality is decreasing, and from this reason human populations live longer. Life expectancies have reached record high values mainly among populations in developed societies. Although life expectancy is prolonging for both men and women, women live in general longer than men—the difference is approximately 5 years. On the one hand we talk about life prolonging and added years of life. On the other hand, are these added years of life spent in good health? In our research, we will focus on adult health status, principally on mental health diseases and death rates due to chronic disorders in Europe. Europe is facing an intensive population ageing, that creates a large space for health and social care needs of the elderly. Mental diseases are one the major public health objects in ageing societies.

**Keywords:** mental health; health services; life expectancy; diseases at old age.

1. Introduction

As people live longer, mental diseases are appearing more often among the elderly. Mental diseases, like Alzheimer’s disease, Parkinson’s disease, depression, dementia, are directly occurring in old ages and are connected with the population ageing. Old people above 65 years represent the main risk group of the incidence of mental diseases. Alzheimer’s disease and other forms of dementias belong undoubtedly among the major adult diseases in the 21st century. Chronic disorders represent in developed societies, including Europe, a challenge to health care systems and public health. All around the world, there are 36 million people suffering from dementia; 7.3 million people live in Europe.1 Every twentieth person older than 65 years has some form of dementia. After the age of eighty, it is every fifth person. According to projections, there will be 66 million people suffering from

---

1 [www.alzheimer.sk](http://www.alzheimer.sk), downloaded 8 November 2015.
dementia in 2030, including Europe with an estimation of 10 million people. The treatment and social care of chronic diseases is very protracted and expensive, involving social workers and family members taking care of the patients. In our research, we monitored Visegrad countries that belong among high income European countries (according to World Bank criteria in 2010).

2. Methods

Data were collected by the World Health Organization (WHO) in 2011 and published by countries in Mental Health Atlas-2011. We focused on the number of patients treated in mental health facilities in the Czech Republic, Slovakia, Hungary and Poland. We selected Visegrad countries to see the development in the Central and Eastern Europe. In case of Slovakia, data including number of persons treated in mental health facilities were not available. Furthermore, in our study we used data from Eurostat Database. We were interested in the percentage of total population reporting a chronic disease in the Czech Republic, Slovakia, Hungary and Poland. The latest available dataset is from the European Health Interview Survey (EHIS) held in 2008.

3. Graphs

Figure 1: People reporting a chronic disease in Hungary, Czech Republic, Slovakia and Poland in 2008 (%)

Source: Eurostat, 2008; author’s construction
Figure 2: Mental health services in Hungary, Czech Republic and Poland in 2011

![Bar chart](chart1.png)

Source: WHO, 2011; author´s construction

Figure 3: Mental health care in the Czech Republic, Hungary and Poland in 2011

![Bar chart](chart2.png)

Source: WHO, 2011; author´s construction
4. Results

As people live longer and populations are ageing, the total expenditure on health is also increasing and represents an important part of the government budget. In our study we focused on the mental health problems in four Visegrad countries. In the Czech Republic, mental health expenditures by the government represent nearly 3% of the total health budget. In Hungary, mental health costs are 5% and in Poland approximately 5% as well. Data for Slovakia were not available at this time of monitoring (WHO, 2011). From figure 1 it is visible that the percentage of people reporting a chronic disease was the highest in Hungary (almost 5%). We may assume that this percentage is related to the number of people treated in mental health facilities in Hungary (see Figure 2). In comparison, almost 67 persons per 100,000 people were treated in mental health day treatment facilities in the Czech Republic in 2011 (see Figure 3). Another authors who describe mortality at older ages and health status of the elderly are e.g. Dotlačilová (2014), Fiala (2014), Langhamrová (2014), Šimpach (2012). Mental diseases are more precisely described in Bódi (2012).
5. Conclusions

Nervous system diseases, like Parkinson´s disease, Alzheimer´s disease, dementias, depressions and chronic illnesses, such as diabetes, heart disease, cancer or stroke represent the major causes of death of adults in the world. In general, civilization diseases will represent leading illnesses in the 21st century (Cséfalvaiová, 2014). From figure 4 it is visible, that death rate due to chronic diseases is the highest in Hungary (almost 258 people from 100 000 persons died on chronic disease in 2009). At present, there is no definite treatment and the costs of treatment are very high. In the future, treatment of mental disorders will be the key issue among ageing populations. It is difficult to diagnose and treat these illnesses, not to mention the part of financing. In our future research we would like to continue with the issue of the health status of the elderly, primary to focus on mental and neurocognitive disorders. We see challenges and opportunities for many areas of life and experts working in this field of research. It is important to study the mortality patterns of the adults and to understand the secret of surviving to 100, and under what circumstances (Anson, 2013).

Acknowledgement

This article was written with the support of the Internal Grant Agency of University of Economics, Prague, No. GA ČR 15-13283S under the title “Projection of the Czech Republic Population According to Educational Level and Marital Status.”

References


EUROSTAT. 2008. People reporting a chronic disease, by disease, sex, age and educational attainment level (%). http://ec.europa.eu/eurostat/data/database


