Swaziland

females

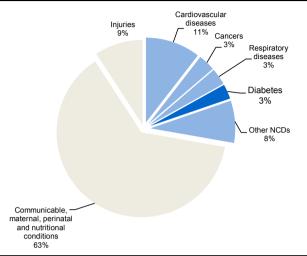
males

Mortality*

Number of diabetes deaths

	males	females
ages 30–69	<100	160
ages 70+	<100	130

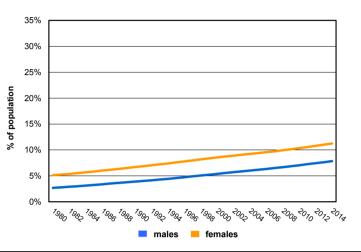
Proportional mortality (% of total deaths, all ages)*





Number of deaths attributable to high blood glucose

Trends in age-standardized prevalence of diabetes



Prevalence of diabetes and related risk factors

	males	females	total
Diabetes	5.0%	8.2%	6.6%
Overweight	23.0%	48.8%	36.1%
Obesity	6.0%	23.5%	14.8%
Physical inactivity	29.4%	38.6%	34.2%

National response to diabetes

Policies, guidelines and monitoring

Operational policy/strategy/action plan for diabetes	Yes†
Operational policy/strategy/action plan to reduce overweight and obesity	No
Operational policy/strategy/action plan to reduce physical inactivity	Yes†
Evidence-based national diabetes guidelines/protocols/standards	NR
Standard criteria for referral of patients from primary care to higher level of care	Available but not implemented
Diabetes registry	No
Recent national risk factor survey in which blood glucose was measured	Yes

Availability of medicines, basic technologies and procedures in the public health sector

Medicines in primary care facilities

ЭK
ЭK
ЭK
0
ЭK
ЭK
)

 The mortality estimates for this country have a high degree of uncertainty because they are not based on any national NCD mortality data (see Explanatory Notes).
+ = documentation not provided

economication not provided
= not generally available
= generally available

World Health Organization – Diabetes country profiles, 2016.

Basic technologies in primary care facilities

Blood glucose measurement	
Oral glucose tolerance test	DK
HbA1c test	DK
Dilated fundus examination	•
Foot vibration perception by tuning fork	DK
Foot vascular status by Doppler	0
Urine strips for glucose and ketone measurement	

DK = country responded "don't know"

NR = country responded to survey but did not give a response to a specific question