

45,000 excess deaths annually linked to lack of health insurance: study

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A study published online today estimates nearly 45,000 annual deaths are associated with lack of health insurance. That figure is about two and a half times higher than an estimate from the Institute of Medicine (IOM) in 2002.

The new study, "Health Insurance and Mortality in U.S. Adults," appears in today's [Thursday's] online edition of the [American Journal of Public Health](#).

The Harvard-based researchers found that uninsured, working-age Americans have a 40 percent higher risk of death than their privately insured counterparts, up from a 25 percent excess death rate found in 1993.

Lead author Dr. Andrew Wilper, who worked at Harvard Medical School when the study was done and who now teaches at the University of Washington Medical School, said, "The uninsured have a higher risk of death when compared to the privately insured, even after taking into account socioeconomic, health behaviors and baseline health. We doctors have many new ways to prevent deaths from hypertension, diabetes and heart disease - but only if patients can get into our offices and afford their medications."

The study, which analyzed data from national surveys carried out by the Centers for Disease Control and Prevention (CDC), assessed [death rates](#) after taking education, income and many other factors including

smoking, drinking and obesity into account. It estimated that lack of health insurance causes 44,789 excess deaths annually.

Previous estimates from the IOM and others had put that figure near 18,000. The methods used in the current study were similar to those employed by the IOM in 2002, which in turn were based on a pioneering 1993 study of health insurance and mortality.

Deaths associated with lack of health insurance now exceed those caused by many common killers such as kidney disease.

An increase in the number of uninsured and an eroding medical safety net for the disadvantaged likely explain the substantial increase in the number of deaths associated with lack of insurance. The uninsured are more likely to go without needed care.

Another factor contributing to the widening gap in the risk of death between those who have insurance and those who don't is the improved quality of care for those who can get it.

The research, carried out at the Cambridge Health Alliance and Harvard Medical School, analyzed U.S. adults under age 65 who participated in the annual National Health and Nutrition Examination Surveys (NHANES) between 1986 and 1994. Respondents first answered detailed questions about their socioeconomic status and health and were then examined by physicians. The CDC tracked study participants to see who died by 2000.

The study found a 40 percent increased risk of death among the uninsured. As expected, death rates were also higher for males (37 percent increase), current or former smokers (102 percent and 42 percent increases), people who said that their health was fair or poor (126 percent increase), and those that examining physicians said were in

fair or poor health (222 percent increase).

Dr. Steffie Woolhandler, study co-author, professor of medicine at Harvard and a primary care physician in Cambridge, Mass., noted: "Historically, every other developed nation has achieved universal health care through some form of nonprofit national health insurance. Our failure to do so means that all Americans pay higher health care costs, and 45,000 pay with their lives."

Dr. David Himmelstein, study co-author and an associate professor of medicine at Harvard, remarked, "The Institute of Medicine, using older studies, estimated that one American dies every 30 minutes from lack of health insurance. Even this grim figure is an underestimate - now one dies every 12 minutes."

More information: "[Health Insurance](#) and Mortality in U.S. Adults," Andrew P. Wilper, M.D., M.P.H., Steffie Woolhandler, M.D., M.P.H., Karen E. Lasser, M.D., M.P.H., Danny McCormick, M.D., M.P.H., David H. Bor, M.D., and David U. Himmelstein, M.D. *American Journal of Public Health*, Sept. 17, 2009 (online); print edition Vol. 99, Issue 12, December 2009.

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