

No change in the link between deprivation and death since 1900s

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The link between deprivation and premature death is as strong today as it was in the early 1900s according to research published on BMJ.com today.

The study, the first of its kind to directly compare modern [deprivation](#) and [mortality](#) with conditions a century ago in the whole of England and Wales, has been undertaken by Ian Gregory, Senior Lecturer at Lancaster University.

Using the census mortality data from 634 districts in the 1900s, Gregory has explored the links between deprivation and mortality in Edwardian England and Wales to [premature death](#) and poverty in 2001.

The twentieth century saw huge improvements in mortality rates in England and Wales. In the 1900s, 33% of deaths occurred in the under 5s and only 13% occurred over the age of 75 - one hundred years later deaths aged under 5 are less than 1% and 65% of deaths now occur in those over 75. Life expectancy has also improved, rising from 46 for males to 77 and 50 for females to 81.

In the 1900s the main causes of death were respiratory, infectious and parasitic diseases but in 2001 this changed to cancers, heart diseases and strokes. The experience of poverty changed too, while in the 1900s it meant not having the bare necessities for existence, a century later relative poverty meant comparing an individual's income or deprivation with those experienced by society as a whole.

Despite the dramatic decline in mortality in the twentieth century the link between mortality and deprivation across England and Wales "remains as strong today as it was a century ago", says Gregory.

The author argues that links between mortality and deprivation are deeply entrenched and that patterns from the Edwardian era are strong predictors of ill health today. Gregory maintains that modern diseases "have a possible long-term link to unhealthy living conditions in the distant past". He says: "The strong association between modern deaths from lung cancer and 1900s mortality suggests that this might in part be a cultural effect caused by the long term prevalence of smoking in poorer areas."

Source: British Medical Journal ([news](#) : [web](#))

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