

Americans less healthy than English, but live as long or longer, study finds

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Older Americans are less healthy than their English counterparts, but they live as long or even longer than their English peers, according to a new study by researchers from the RAND Corporation and the Institute for Fiscal Studies in London.

Researchers found that while Americans aged 55 to 64 have higher rates of <u>chronic diseases</u> than their peers in England, they died at about the same rate. And Americans <u>age</u> 65 and older -- while still sicker than their English peers -- had a lower death rate than similar people in England, according to findings published in the journal <u>Demography</u>.

The paper was co-authored by James Banks and Alastair Muriel of the Institute for Fiscal Studies and James P. Smith, distinguished chair in labor markets and demographic studies at RAND.

"If you get sick at older ages, you will die sooner in England than in the United States," Smith said. "It appears that at least in terms of survival at older ages with chronic disease, the medical system in the United States may be better than the system in England."

The study expands upon an earlier analysis by Banks and Smith that found that Americans aged 55 to 64 suffered from diseases such as diabetes at rates up to twice those seen among similarly aged people in England. The trend was observed across all <u>socioeconomic groups</u>.

Researchers analyzed information from two comparable surveys of



people age 50 and over in the United States and England -- the Health and Retirement Survey and the English <u>Longitudinal Survey</u> of Ageing -- funded by the National Institute on Aging in the United States.

In the new study, researchers examined the prevalence of illness among those 55 to 64 and 70 to 80. They also looked for the first time at the onset of new illnesses in those age groups in the United States and England during the years spanning 2002 to 2006. Finally, researchers examined trends in death rates in each country.

The findings showed that both disease prevalence and the onset of new disease were higher among Americans for the illnesses studied -- diabetes, high-blood pressure, heart disease, heart attack, stroke, chronic lung diseases and cancer. Researchers found that the higher prevalence of illness among Americans compared to the English that they previously found for those aged 55 to 64 was also apparent for those in their 70s. Diabetes rates were almost twice as high in the United States as in England (17.2 percent versus 10.4 percent) and cancer prevalence was more than twice as high in the United States (17.9 percent compared to 7.8 percent) for people in their 70s.

In spite of both higher prevalence and incidence of disease in America, death rates among Americans were about the same in the younger ages in this period of life and actually lower at older ages compared to the English.

Researchers say there are two possible explanations why <u>death rates</u> are higher for English after age 65 as compared to Americans. One is that the illnesses studied result in higher mortality in England than in the United States. The second is that the English are diagnosed at a later stage in the disease process than Americans.

"Both of these explanations imply that there is higher-quality medical



care in the United States than in England, at least in the sense that these chronic illnesses are less likely to cause death among people living in the United States," Smith said.

"The United States' health problem is not fundamentally a health care or insurance problem, at least at older ages," Banks said. "It is a problem of excess illness and the solution to that problem may lie outside the health care delivery system. The solution may be to alter lifestyles or other behaviors."

The study also investigated the relationship between the financial resources of individuals in both countries and how soon they would they would die in the future.

While poorer people are more likely to die sooner than their more well-off counterparts, researchers say their finding supports the view that the primary pathway between health and wealth is that poor health leads to a depletion of household wealth, rather than being poor causes one's health to decline. Researchers found that the substantial changes in wealth that occurred in the years 1992 and 2002 in the United States through increases in stock prices and housing prices did not alter the probability of subsequent death.

Provided by RAND Corporation

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