

## 75-year study finds dramatic rise in U.S. lifespans

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Less smoking, better meds fuel lower death risk rates across all age groups since 1935.

(HealthDay) -- A look at statistics stretching from 1935 to 2010 found significant improvements in Americans' expected lifespans, mainly due to factors such as better medical care and declines in smoking rates.

While death is, of course, inevitable for everyone, the average American's overall risk of dying at a given point in time dropped 60 percent since 1935, the study found.

A combination of <u>lifestyle changes</u> and medical advances fueled the dramatic drop in death rates, according to the U.S. <u>Centers for Disease</u> <u>Control and Prevention</u> report published in the March *NCHS Data Brief*.

"Overall, the improvement in mortality has been significant over the last 75 years," said report author Donna Hoyert, a health scientist at CDC's



National Center for Health Statistics.

The reasons for this trend are varied, Hoyert said. "The way we live now is much different than in the [1930s]. In the medical field, there have been advances and changes in behavior over time," she said.

Among the most significant changes have been the decrease in smoking rates and more <u>aggressive treatment</u> of heart disease, she noted.

Dr. Laurence Gardner, executive dean for education and policy at the University of Miami Miller School of Medicine, agreed, noting that "the big change was the cessation of smoking."

In addition, the introduction of antibiotics in the 1940s made a huge impact. "There were some easily treatable potentially <u>fatal diseases</u>, such as pneumonia, that all of a sudden we got antibiotics for," Gardner said.

A more aggressive approach to treating cardiovascular disease also evolved in the past 20 years, Gardner said.

"Even more important, the use of cholesterol-lowering drugs [statins] in such a large proportion of the population has contributed to decreased death rates," he said.

The advances in treatment were really only seen in one area -cardiovascular disease, Gardner said. "The folks in the cancer world are still pulling their hair out, because while there may be increases in survival, the cure rates have not improved very much despite the enormous efforts," he said, although he added that he believes there will be advances in cancer treatment in the future that will help lower mortality rates.

However, on the downside, the obesity epidemic is fueling a diabetes



epidemic, Gardner said. "If we don't effectively address the obesity/diabetes issue, we may lose some of the benefit we have gained," he stressed. "We haven't seen the effect of the epidemic of obesity and diabetes reflected in the death rate [yet]."

Another issue is the growing cost of expensive medical interventions. The United States spends more on health care than any other nation, and there is a point of diminishing returns where the costs outweigh the benefits, Gardner said.

"You can spend too much money, and not benefit the patient at all," he explained. "We do not manage the end-of-life care very well and we do spend unnecessary funds and cause some unnecessary hardship. We don't manage the end of life one wit."

Highlights of the report include:

- In each year, heart disease, cancer and stroke were among the five leading causes of death.
- The risk of dying dropped in all age groups but was strongest among children aged 1 to 4 years, where the rate dropped 94 percent.
- For those aged 85 and older, the risk of dying dropped 38 percent.
- Death rates were higher among men, although they decreased for both genders during the 75-year study period. From 1975 to 1981, the risk of dying was 65 percent higher for men than women, while it was only 40 percent higher for men than women in 2010.



• The decline in deaths was seen in all racial and ethnic groups. However, there are still disparities, with the biggest gap found between 1988 and 1996, when one white person died for every four blacks.

To compile the statistics for the report, Hoyert used data from the National Vital Statistics System for the 75 years covered, including preliminary data for 2010.

**More information:** For more on death rates, visit the <u>U.S. Centers for</u> <u>Disease Control and Prevention</u>.

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