

Decreases seen in leading causes of death

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An analysis of deaths in the United States between 1969 and 2013 finds an overall decreasing trend in the age-standardized death rate for all causes combined and for heart disease, cancer, stroke, unintentional injuries, and diabetes, although the rate of decrease appears to have slowed for heart disease, stroke, and diabetes, according to a study in the October 27 issue of *JAMA*.

A comprehensive examination of long-term trends in mortality is important for health planning and priority setting and for identifying modifiable factors that may contribute to the trends. Jiemin Ma, Ph.D., M.H.S., of the American Cancer Society, Atlanta, and colleagues analyzed U.S. national vital statistics data from 1969 through 2013 to determine total and annual percent change in age-standardized death rates and years of potential life lost before age 75 years for all causes combined and for the leading causes.

Between 1969 and 2013, the age-standardized death rate for all causes combined decreased from 1,279 per 100,000 population to 730 (43 percent reduction) - an average annual decrease of 1.3 percent. Five of the six leading causes of death experienced an overall decline in death rates during this time period. The rate of death (per 100,000) decreased for stroke by 77 percent; for [heart disease](#), by 68 percent; for unintentional injuries, by 40 percent; for cancer, by 18 percent; and for diabetes, by 17 percent. The death rate for chronic obstructive pulmonary disease (COPD) increased by 101 percent during this period. However, during the last time segment in the analysis, the death rate for COPD in men began to decrease and the declines in rates slowed for

heart disease, stroke, and diabetes. For example, the annual decline for heart disease slowed from 3.9 percent during the 2000-2010 period to 1.4 percent during the 2010-2013 period.

Between 1969 and 2013, age-standardized years of potential life lost per 1,000 decreased from 1.9 to 1.6 for diabetes (14.5 percent reduction); a 41 percent reduction for cancer; 48 percent for unintentional injuries; 68 percent for heart disease; and 75 percent for stroke. For COPD, the rate for years of potential life lost did not decrease over this time interval.

The researchers write that the progress against heart disease and stroke is attributed to improvements in control of hypertension and hyperlipidemia, smoking cessation, and medical treatment. "The reduction in cancer deaths since the early 1990s is also an outcome of tobacco control efforts, as well as advances in early detection and treatment. Notably, the years-of-potential-life lost rate from cancer has been decreasing since 1969, preceding the decline in cancer death rates by about 20 years. This may reflect the importance of smoking cessation in substantially reducing premature mortality. The overall decrease in the death rate for unintentional injuries has been largely attributed to continuous declines in motor vehicle-related deaths."

The authors note that the observed recent slowing of the decline in death rates for obesity-related diseases (e.g., heart disease, stroke, and diabetes) may reflect the lagged consequences of increased obesity prevalence since the 1980s.

"Further disease-specific studies are needed to investigate these trends. Regardless of the changes in [death rates](#), the increasing numbers of old persons in the United States and growth of the U.S. population will pose a considerable challenge for health care delivery in the coming decades, in view of the shortage of primary care physicians and geriatricians, increasing cost of health care, and the lag between healthy life and life

expectancies."

More information: *JAMA*, [DOI: 10.1001/jama.2015.12319](https://doi.org/10.1001/jama.2015.12319)

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