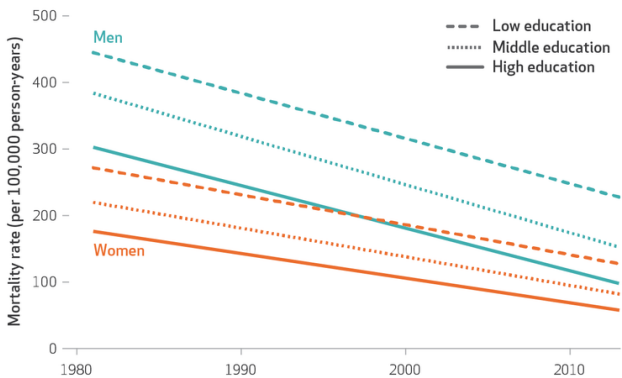


Amenable death in Europe: Health care expenditure decreases mortality rates

5 June 2017

Trends in amenable mortality rates in 17 European countries, by sex and level of education, ca. 1980–2010



Johan P. Mackenbach et al. *Health Aff* 2017;36: 1110–18

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HealthAffairs

2.2 percent for men with lower education levels.

The declines for women were 3.3 percent and 2.1 percent, respectively. The data also indicated that an increase in [health care expenditure's](#) share of GDP was associated with a reduction of absolute inequalities in amenable mortality among men and women.

The authors conclude that European health care systems were successful in reducing mortality from conditions amenable to health care among people at low education levels. This conclusion lends important support to the idea that [health care](#) can be an effective policy instrument for reducing health and [mortality](#) inequalities.

Trends in amenable mortality rates in 17 European countries, by sex and level of education, ca. 1980-2010. Credit: Health Affairs

Provided by Health Affairs

The June issue of *Health Affairs* includes an analysis of amenable mortality rates—rates of deaths that are potentially preventable with available health care treatment options—in seventeen European countries, which found that higher health care expenditure was associated with lower amenable mortality and with smaller absolute inequalities in amenable mortality.

Johan Mackenbach of Erasmus University Medical Center and coauthors used country-level data on mortality by level of education for the period 1980-2010 to determine that mortality from conditions amenable to [health](#) care has declined strongly over time for women and men in all education groups.

For all amenable causes combined (including tuberculosis, asthma, appendicitis, and certain cancers), the estimated annual mortality decline was 3.5 percent for highly educated men versus

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