



Health statistics

Atlas on mortality in the European Union

Chapter 4 'Premature' mortality

Data 1994-96

3



EUROPEAN
COMMISSION

Inserm

CépiDC — Centre d'épidémiologie
sur les causes médicales de décès



UNIVERSITÉ PARIS X NANTERRE



THEME 3
Population and
social conditions

Europe Direct is a service to help you find answers to your questions about the European Union

**New freephone number:
00 800 6 7 8 9 10 11**

A great deal of additional information on the European Union is available on the Internet.
It can be accessed through the Europa server (<http://europa.eu.int>).

Luxembourg: Office for Official Publications of the European Communities, 2002

ISBN 92-894-3727-8

© European Communities, 2002

ATLAS — Contents

1. Introduction.....	9
2. Methodology.....	11
3. General mortality.....	15
4. 'Premature' mortality.....	23
5. Mortality by age group.....	27
6. Typologies of mortality by age.....	43
7. Typologies of mortality by cause.....	49
8. Cardiovascular diseases.....	53
9. Respiratory diseases.....	59
10. Respiratory cancers.....	65
11. Intestinal cancers (colon, rectum and anus).....	71
12. Stomach cancers.....	75
13. Breast cancers.....	79
14. Cancers of the uterus.....	81
15. Prostate cancer.....	83
16. Cancer of the pancreas.....	85
17. Cancer of the bladder.....	89
18. Malignant melanoma of the skin.....	93
19. Mortality associated with alcoholism.....	97
20. Violent deaths.....	101
21. AIDS.....	111
Annex 1 — Standard European population.....	115
Annex 2 — Causes of death (European shortlist).....	116
Annex 3 — List of NUTS 2 regions.....	118

4. 'Premature' mortality

This term covers all deaths recorded before the age of 65 (the age limit used in the bulk of international work).

In the EU as a whole, these early deaths account for one third of general mortality, with death rates that are twice as high for men as for women. Spatial analysis of premature mortality shows substantial differences in the EU, and different patterns for men and for women.

For men, major disparities within national borders

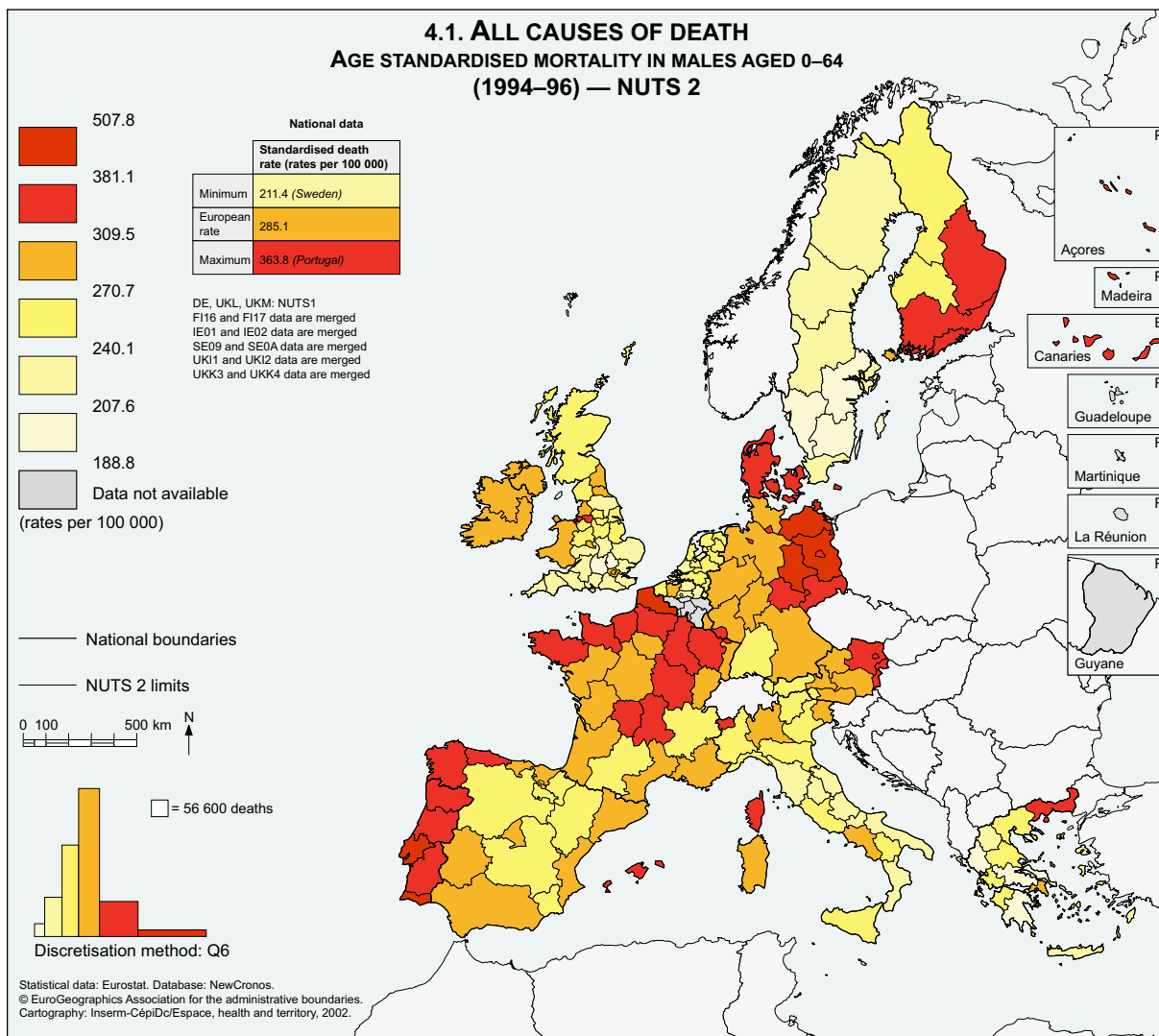
Early mortality does not strike the male population with equal force throughout Europe. Between Sweden, which has the lowest rate, and Portugal, which has the highest rate, the figures

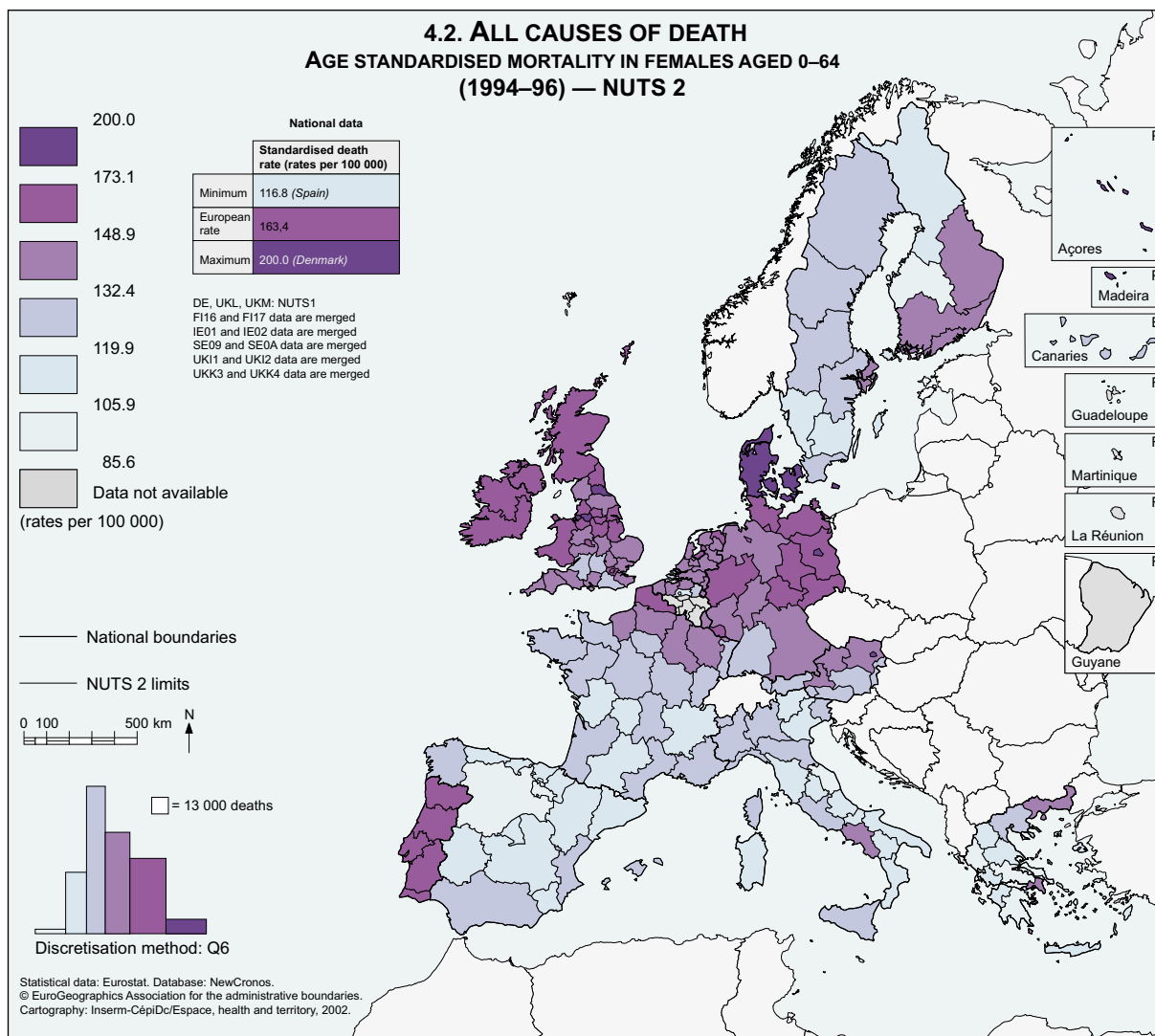
vary at a ratio of 1 to 2.5. France and Germany also have excess male mortality overall. There are major differences even within countries. Some countries have very marked regional structures. The similarities between cross-border regions are also noticeable.

In Finland, the figures are clearly higher in the south than in the northern regions, where rates are closer to the Swedish ones. In Germany as a whole, there is a serious risk of dying early, but the former eastern *Länder* and those of Bremen and Hamburg have clear excess mortality.

In France, the maps show a 'T' of excess mortality in the north fitting into a 'U' of excess longevity.

In Austria, there is an east/west slope with the Danube area at the bottom. The lower death rates in the Alpine *Länder* are the same as those in the





neighbouring Italian Alpine regions (Trentino-Alto Adige).

In Spain, the coastal provinces whose rates are close to those of the coastal regions in the south of France and the Comunidad de Madrid have higher rates than the inland provinces. The rates in Galicia and Principado de Asturias are the same as those recorded in the neighbouring Portuguese provinces. These spatial patterns indicate that premature mortality is due basically to regional factors.

However, some of the European regions with the worst rates, particularly large urban and old industrial regions (Nord-Pas-de-Calais, Lorraine, Saarland, Greater Manchester), or economically disadvantaged regions such as the *Länder* of eastern Germany, Anatoliki Makedonia-Thraki in Greece, and Portugal as a whole, have some socioeconomic characteristics in common.

Less noticeable differences in female rates in Europe

The female mortality patterns are different from the male. Denmark has the highest rates here, twice as high as Spain's. Denmark belongs to a group of regions with excess mortality which join together on the map, including the UK, Benelux, the north-east of France, Germany and the north of Austria.

The rest of the EU, Portugal as a whole, the south of Finland, Anatoliki Makedonia-Thraki, the region Attiki in Greece, and Campania in Italy also has high female death rates. Everywhere else, women run less risk of dying prematurely.

Mortality linked in particular to behavioural risks

In general, violence, alcoholism and smoking (broncho-pulmonary cancers, diseases of the respiratory

apparatus, alcoholic cirrhosis, etc.) are the main causes of early death among the male population, accounting for over 30 % of male premature mortality.

The size of these causes linked to habits that put people's health at risk shows that premature mortality is one of the most useful indicators for assessing preventive policies in various European countries.