

great as for females. At these ages the most important causes of death are motor vehicle and other accidents and suicide.

Between ages 25 and 44 the death rate for men is twice that for women. For both sexes, but particularly for men, motor vehicle accidents, other accidents and suicides remain important causes of death. In this stage of life ischemic heart disease (in which the heart muscle has its own blood supply restricted) becomes a significant cause of death for men. For women, cancer of the breast, uterus, ovary and gastro-intestinal tract begin to contribute noticeably to the total number of deaths, as do cerebrovascular diseases (strokes).

With increased age the proportion of deaths due to cerebrovascular disease, respiratory diseases and various types of cancer increases. Until the most advanced age categories male deaths continue to exceed those of females. One of the most notable

Heart diseases account for 40% of all deaths among men aged 45 to 64. Cancer is the second leading cause of death in the middle and later years. Rates of both are higher for men than for women.

differences between males and females is the higher proportion of male deaths due to ischemic heart disease, respiratory diseases and lung cancer and cirrhosis of the liver, all of which are related to lifestyle factors including smoking, drinking, exercise and stress.

A review of causes of death, by sex and age, raises questions about what proportion of deaths at early ages might be prevented for males and females, but particularly for males. Many deaths might be prevented through attention to lifestyle factors and the potential for accidents. For females a number of deaths are the result of illnesses which may be treated if detected at early stages.

#### 5.1.4 Specific diseases or disabilities

Statistics Canada maintains registries and does special analyses that relate to particular disease conditions, their treatment and mortality resulting from them. Some of these information systems are developed in co-operation with voluntary agencies. Other data are derived from notifications which physicians are required by law to make to public health authorities. Although not all serious conditions are covered, these records are a valuable source of health status information.

**Heart disease.** The death toll from heart disease in Canada in 1975 was 56,970, or 250 deaths for each 100,000 persons. The male rate was higher than the female, 298 against 202. Among men aged 45 to 64, heart disease accounted for nearly 40% of all deaths, and the single diagnostic class ischemic heart disease killed 9,293 of the 25,367 men in this group. In 1975 heart disease required 3,840,000 days of care in general and allied special hospitals.

The Canadian Heart Foundation, inaugurated in 1955, had by mid-1977 devoted \$57.1 million to cardiovascular research in Canada's universities and hospitals; its 1977-78 budget alone provided \$8.7 million. The Medical Research Council spent \$7.1 million on cardiovascular research in 1978-79.

**Cancer.** As the second leading cause of death in Canada, cancer accounts for about one of every five deaths, most of them occurring in the middle and later years of life. The death rate from cancer dropped slightly, from 150.4 per 100,000 population in 1974 to 149.2 in 1975. The rate for females decreased from 134.4 to 131.1, and for males increased from 166.3 to 167.4.

Statistics Canada started a national cancer incidence reporting system in January 1969 in co-operation with the National Cancer Institute and the nine existing provincial tumor registries; a centralized registry has not yet been organized in Ontario. Participating provinces send a simple notification card with basic patient and diagnostic information for each new primary site of malignant neoplasm discovered. Data for 1976 are given in Tables 5.5 and 5.6.