

3.1.2 Causes of death

Apart from accidents and violence, the main causes of death are diseases related to degenerative processes such as arteriosclerosis and tumours. This is essentially what distinguishes mortality of today from that of the turn of the century, when infectious diseases were the leading cause of death.

Analysis of causes of death by age group shows that in 1978, accidents, violence and suicide accounted for 55% of deaths for the age group 1-14, for 80% of deaths between ages 15 to 24 and for 46% of deaths between ages 25 to 44. Cancer was the second leading cause up to age 44, followed closely by diseases of the heart and circulatory system. Death rates for males in the various age groups up to age 80 were higher than those for females: in the age group 15-24, the death rate for males was three times as great as for females, and between ages 25 and 44 it was twice as great.

In 1982, accidents again accounted for the greatest number of deaths for persons of 1-44 years, but cardiovascular diseases were the leading cause for persons of 45 years and over, and accounted for more than 80,000 deaths at all ages (Table 3.5).

Potential years of life lost (PYLL) is a useful indicator of premature deaths. It allows heavier weight to be given to deaths occurring at a younger age. This calculation is applied only to deaths occurring between the 1st and 70th birthdays, multiplying the number of deaths in a specific age group by the remaining years of life to age 70. Analysis of this calculation for a few causes of death in 1978 (Table 3.6) varies considering the number of deaths or the corresponding number of years of life lost. Close to 40% of all years lost between the 1st and 70th birthdays are lost because of accidents and violent acts, the latter being more prevalent among males (about 40% of the PYLL) than among females (close to 30%). Ischemic heart diseases are responsible for 25.4% of the deaths between the ages of one and 70, but only 15.0% of PYLL, whereas traffic accidents account for a comparable number of PYLL but only 6.5% of deaths. Accidents of all types accounted for 27% of the PYLL.

The rate of PYLL can be used to make comparisons in time or between two populations. This is another way of showing the decline in premature mortality: for every 1,000 persons aged one to 70 in 1978, 57 years of life were lost prematurely, down from 84 in 1950.

3.1.3 Morbidity and disability

The measure used to express morbidity is patient-days in general and allied special hospitals. The leading causes of hospitalization in 1979-80 were heart disease, mental disorder, stroke, accidents and respiratory disease.

For babies up to a year old, respiratory diseases accounted for 29% of hospital days, and were the leading cause of hospitalization. For children of

1-14 years the leading causes were respiratory diseases and accidents.

Childbirth, accidents and mental disorder are the three main reasons why Canadians from 15 to 44 years old are admitted to hospital. In the next age group, 45-64 years, heart disease leads with 10% of hospital days. Next are mental disorder and disease of the nervous system.

Among the elderly the leading causes of hospitalization are heart disease, stroke and respiratory disease (Table 3.13).

The Canada Health Survey estimated that the normal activity of 2.7 million Canadians, or 12% of the population, was limited because of ill-health. Activity limitation is defined as the inability of a person to carry out normal activities such as working, housekeeping or going to school, due to physical or mental incapacity. Major causes of activity limitation were: limb and joint disorder, heart disease, arthritis and rheumatism, trauma, mental disorder, asthma and hypertension. Over half the population surveyed reported at least one health problem. More health problems were reported for the older groups and proportionally more women than men reported multiple problems (Table 3.7).

3.1.4 Specific health conditions

Mental disorder is treated both in mental institutions and in the psychiatric units of general hospitals and in 1979-80 accounted for 8.7% of all patient-days. Although the role of general hospitals in treating mental disorder is often not recognized, nearly as many days are spent for mental disorder in general hospitals as in mental institutions. Women are more likely than men to be treated in general hospitals, particularly for neuroses and personality disorders.

Neuroses account for 7.8% of patient-days for psychiatric conditions. Schizophrenia is a close second at 28.5% and psychoses third at 17.6%. Half the patient-days for neuroses and one-third for psychoses are spent in general hospitals, and about 90% of patient-days for schizophrenia in mental institutions. Only a small proportion of patient-days for mental retardation is spent in general hospitals.

For women, the two most important causes of patient-days and for admissions are schizophrenia and mental retardation. Men experience the largest number of patient-days for schizophrenia, followed by mental retardation and psychoses. This contrasts with admission data which show alcoholism as the most important cause.

Heart disease caused one of every three deaths in 1978. Over the past decade, death rates have been gradually declining. The Canada Health Survey showed that about 800,000 Canadians had heart problems in 1979; over half were persons of working age. It was estimated that heart problems caused 300,000 persons to be restricted in their daily activities and over 100,000 persons to have