

Mortality rates are one of the most common measures of population health. Statistics on important life events such as birth and death remain the most widely available and comparable sources of health information across whole populations, although the coverage, completeness and reliability of these data are problematic for many countries in the Asia/Pacific region. The World Health Organization uses available data and information to derive comparable estimates of mortality and its causes.

Estimates of mortality rates are available for the year 2008 (Figure 1.4.1). Mortality for all causes combined ranged from less than 500 per 100 000 population in Japan, Australia, Singapore, New Zealand and the Republic of Korea, to over 1 000 in Myanmar, Cambodia, the Lao PDR, Papua New Guinea, Pakistan, India, Bangladesh and Nepal. The average rate in 20 Asian countries (902) was around twice that of the OECD.

Non-communicable diseases such as cardiovascular diseases and cancers are the most common causes of death, being responsible for about two-thirds of all deaths, on average, across 20 Asian countries (Figure 1.4.2). In OECD countries, the average is higher at 86% (see also Indicator 1.5, "Mortality from cardiovascular diseases", and Indicator 1.6, "Mortality from cancer"). Communicable diseases such as respiratory infections, diarrhoeal diseases and tuberculosis, along with maternal and perinatal conditions, remain major causes of death among many countries in the region.

Increasing development in countries brings an "epidemiological transition", whereby communicable diseases are replaced by non-communicable diseases, and early deaths by late deaths (WHO, 2008a). Injuries are responsible for between 5-10% of all deaths (see Indicator 1.7, "Mortality from injuries").

There are wide disparities in adult mortality in the region. For males in 2009, the mortality rate for those aged between ages 15 and 60 ranged from a low of 76 per 1 000 population in Singapore, to 350 per 1 000 Cambodia (Figure 1.4.3). It also exceeded 300 per 1 000 population in Mongolia, and was less than 100 not only in Singapore, but also in Australia, New Zealand and Japan. Across 20 Asian countries, the average mortality rate for males aged 15-60 in 2009 was 213 per 1 000 population, almost twice the average in OECD countries (114).

Among females, the rate ranged from 42 per 1 000 population in Japan and Singapore to a high of 251 in the Lao PDR. Rates also exceeded 200 in Bangladesh and Papua New Guinea, and were less than 50 in Japan, Singapore, Australia and the Republic of Korea. Across 20 Asian countries, the average mortality rate for females aged 15-60 in 2009 was 132 per 1 000 population, more than twice the average in OECD countries (58).

In a number of countries (Bangladesh, Pakistan, Papua New Guinea, Lao PDR), there is little difference between male and female mortality rates. In Japan, Mongolia and the Republic of Korea, however, male rates are more than twice those of females, and in Sri Lanka, more than three times. Disparities between countries for females were greater than those for males.

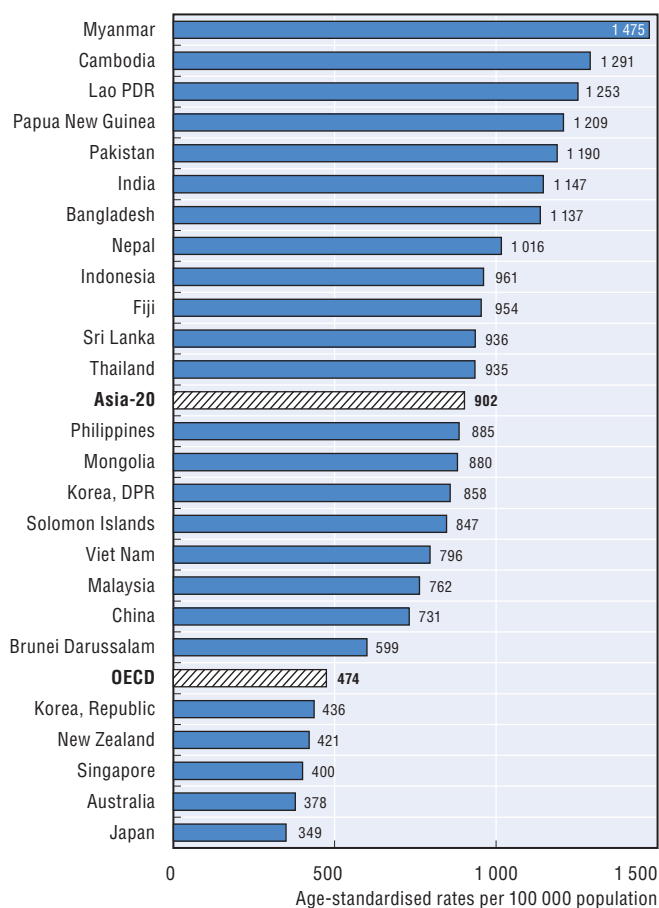
Definition and comparability

Mortality rates are calculated by dividing annual numbers of deaths by mid-year population estimates. Rates have been age-standardised to the World Standard Population to remove variations arising from differences in age structures across countries.

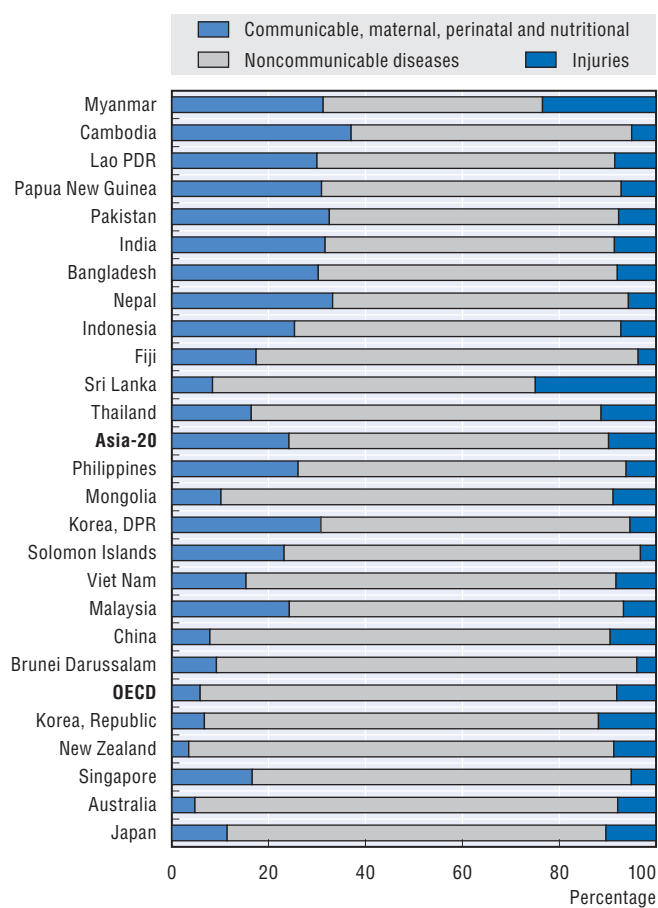
Complete vital registration systems do not exist in many developing countries, and about one-third of countries in the region do not have recent data (WHO, 2008a). Misclassification of causes of death is also an issue. A general assessment of the coverage, completeness and reliability of causes of death data has been published by WHO (Mathers *et al.*, 2005).

The WHO Global Burden of Disease project draws on a wide range of data sources to quantify global and regional effects of diseases, injuries and risk factors on population health. The latest assessment of GBD is for 2008. WHO has also developed life tables for all member states, based on a systematic review of all available evidence on mortality levels and trends. The probability of dying between 15 and 60 years of age (adult mortality rate) derive from these life tables.

1.4.1. All causes, estimated mortality rates, 2008

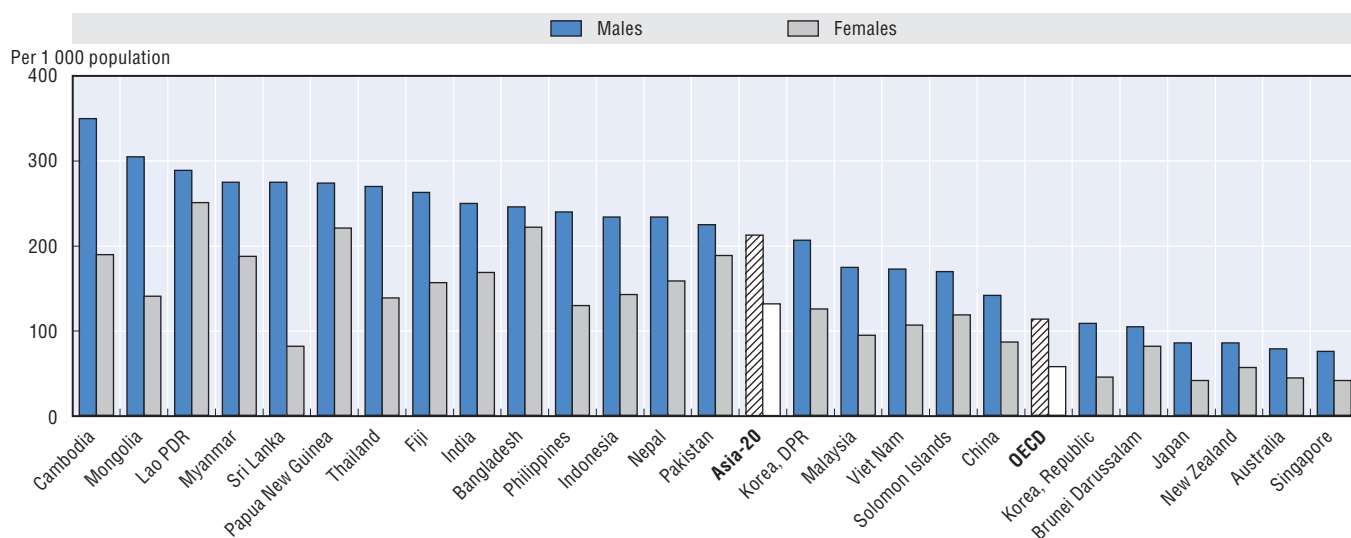


1.4.2. Proportions of all cause deaths, 2008



Source: WHO Global Burden of Disease, 2011.

1.4.3. Adult mortality rate for ages 15 to 60, 2009



Source: WHO (2012f).

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