

# Report on the Deaths of Jersey Residents 2011

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Document purpose	Report on the Deaths of Jersey Residents in 2011
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<b>Title</b>	Report on the Deaths of Jersey Residents 2011
Author	Health Intelligence Unit
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<b>Amendment history</b>	
Officer	Amendment date and detail
M Clarke	Report compiled November 2013 using 2011 deaths data and applying revised population total and structure based on information published by the States of Jersey Statistics Unit on Population Update 2002-2011. This is an amendment to previously published 2011 deaths data which used previous population estimates produced by the Health Intelligence Unit which underestimated the Island population by some 10,000 persons.
M Clarke	Clarification of which European standard population used and email address updated.
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Embargo/confidentiality	Embargoed until 00:01 30 <sup>th</sup> November 2013
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# Deaths of Jersey Residents in 2011

## Summary:

This report presents statistics on deaths of Jersey residents registered for 2011. Death statistics include counts of death by age and sex, and by selected cause of death.

Data presented in this report are based on records of deaths that occurred in calendar year 2011, which were received from the Superintendent Registrars Office, along with data from the Viscount's Office, and processed by Public Health. Detailed information on the nature, sources and data handling are given in the Background Notes section of this report.

## Key findings:

- In 2011, 727 Jersey residents died, comprised of 358 male and 369 female deaths;
- This latest total was some 9% lower than the total for the previous year, 2010, and 6% less than that of two years previously in 2009<sup>1</sup>;
- The crude death rate was 745 deaths per 100,000 population per annum;
- The average (mean) age at death for Jersey residents in 2011 was 76;
- Cancer, circulatory diseases and respiratory diseases were the three largest causes of death;
- Almost 240 deaths were due to cancer, with lung cancer being the largest cause of all cancer deaths in 2011;
- More than a third (37%) of all deaths occurred in those below 75 years of age;
- There were 122 deaths to individuals of working age; almost three-quarters (71%) of these were male;
- Around 2,200 years of potential male life and around 1,700 years of potential female life were lost in 2011.

## Introduction

The Health Intelligence Unit, part of the Public Health Directorate within Health and Social Services, provides information on the health of the population in order to inform health policy in Jersey.

Data previously published for deaths in 2011 used an estimate of the Island's population produced by the Health Intelligence Unit which was found to be an underestimate upon publication of the 2011 Census. This report presents figures which are calculated using the updated population for 2011 based on the findings of the 2011 Census<sup>2</sup> and the population projections produced by the States of Jersey Statistics Unit.

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<sup>1</sup> See Reports on the Deaths of Jersey Residents 2008, 2009 and 2010, published by the States of Jersey Health Intelligence Unit, September 2013.

<sup>2</sup> For further information, please see 2011 and 2012 Population Update Report, published by the States of Jersey Statistics Unit, June 2012 and June 2013.

Reports on annual deaths are a useful way of presenting information relevant to health policy, for instance to plan hospital services and to monitor mortality from particular causes of death such as suicide, drug and alcohol deaths or preventable causes. Mortality statistics also feed into planning pensions and the social welfare system. Organisations such as the European Union and the United Nations also use mortality statistics for making international comparisons.

## Total Deaths

In 2011, there were 727 deaths of Jersey residents; a decrease of 9% on the total for the previous year, 2010, and 6% less than that of two years previously, in 2009. A greater number of female deaths were recorded in 2011 (369) compared to male deaths (358), a change to the pattern seen previously when male deaths outnumbered female deaths<sup>3</sup>. Of the total number of deaths of residents, 19 males and 6 females died outside of the Island.

**Table 1: 2011 Deaths of Jersey Residents**

	Male	Female	All
<b>Total Deaths</b>	358	369	727
Deaths off-Island	19	6	25
Deaths on-Island	339	363	702
Crude Death Rate (per 100,000 population)	744	746	745
Age standardised death rate (per 100,000 population) <sup>4</sup>	604	421	507
Average age at death	73	79	76
Life expectancy at birth <sup>5</sup>	80	84	82

As in previous years, the average age of female deaths was some 6 years higher than the average age of death for males. Figure 1 shows the distribution of deaths in 2011 by age.

Figure 1 shows that between the ages of 50 and 79 years of age, more men than women died in each age group. In contrast, there were a greater number of female deaths in those aged 85 and over.

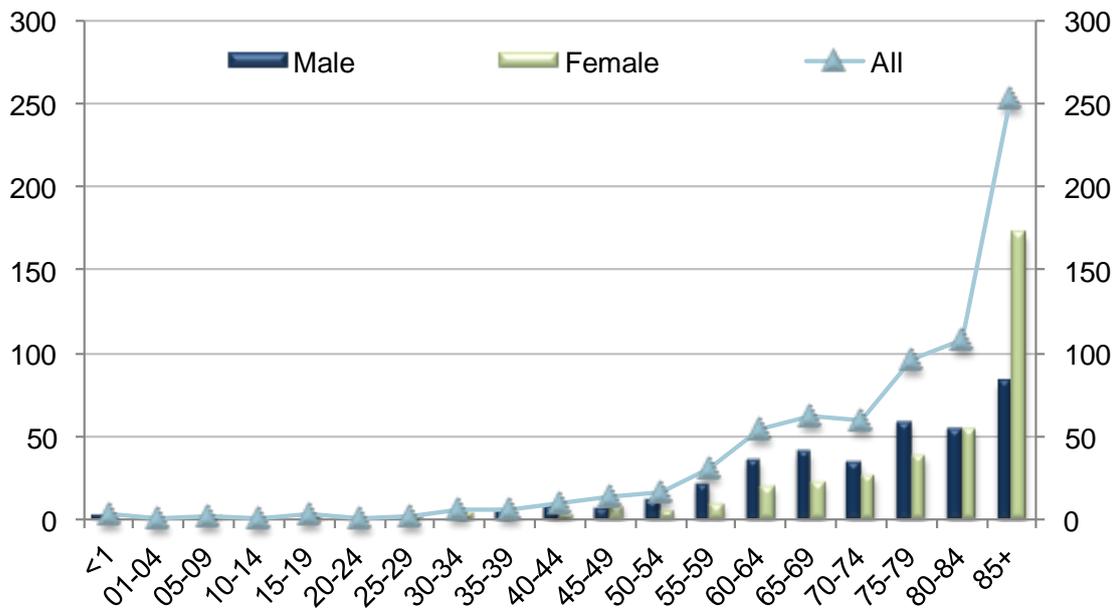
Life expectancy at birth was 80 for men and 84 for women.

<sup>3</sup> This number may differ from previously published figures, due to the results of inquests being added into the figures once complete. This can take up to 18 months to occur.

<sup>4</sup> Standardised using the 1976 European Population; this adjusts for differences in age and sex structures between populations and allows comparisons to be made.

<sup>5</sup> Life expectancy is calculated using life tables, which generate the life expectancy of a hypothetical cohort experiencing the current age-specific mortality rates for each year of their life.

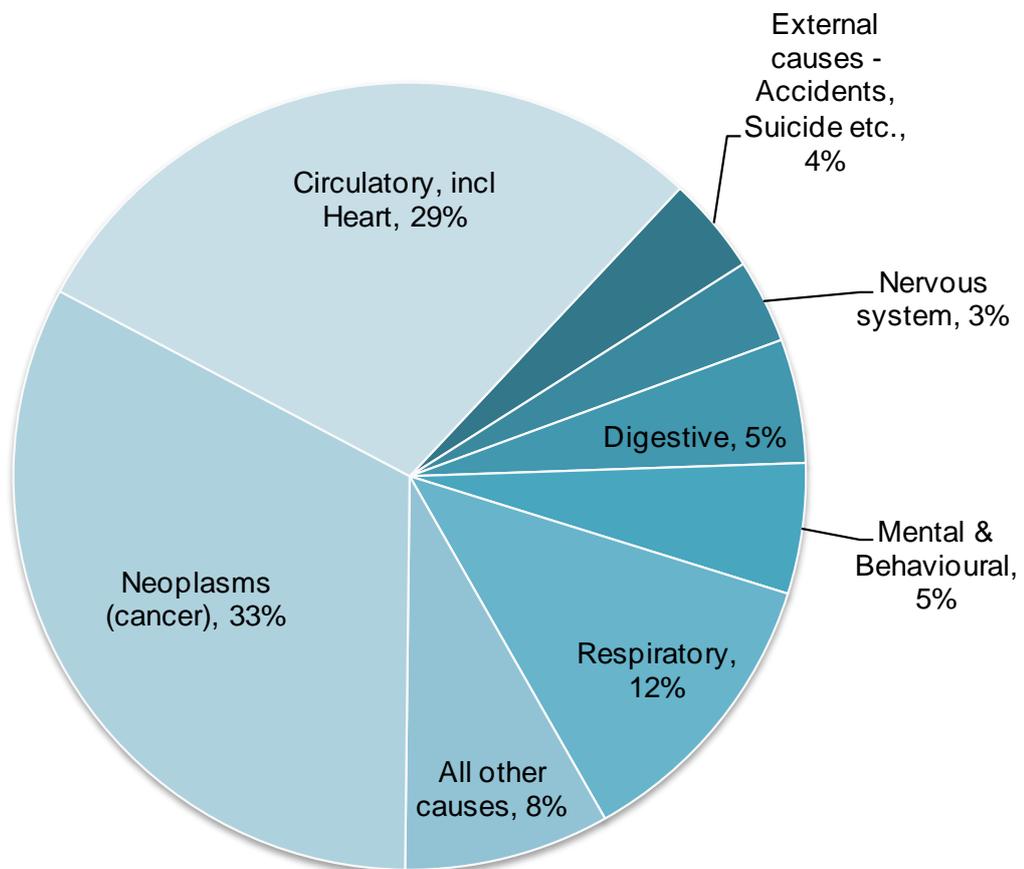
**Figure 1: Total deaths in 2011 by age**



**Main Causes of Death**

In 2011 cancer, circulatory diseases and respiratory diseases were the three largest causes of death for Jersey residents and accounted around three-quarters (74%) of all deaths.

**Figure 2: Main causes of deaths in 2011**



Around one in four (29%) deaths in 2011 was the result of circulatory diseases, including Ischemic heart disease (12%) and Stroke (8%). Cancer was the cause for a third (33%) of deaths, whilst respiratory diseases, such as Influenza and pneumonia and Chronic Lower Respiratory Disease, were the underlying cause of one in eight (12%) deaths.

Cancer (ICD-10 Codes C00-C97, D37-D48)

There were almost 240 deaths from cancer in 2011, with lung cancer the most common cancer site accounting for almost 70 deaths or 28% of all cancer deaths. In 2011, cancers of the digestive system were responsible for one in five (20%) cancer deaths; comprised of colorectal cancer (30%), oesophagus cancer (19%), pancreatic cancer (17%), liver cancer (13%), with cancers of the stomach, gall bladder and ‘other digestive organs’ (C26) make up the remainder.

More women died from cancer of the respiratory and intrathoracic organs (27%, mainly bronchus and lung) than breast cancer (19%) in 2011; whilst one in seven (14%) were the result of cancer of the female genital organs (mainly ovarian). Around one in eight (12%) of female cancer deaths were caused by cancer of the digestive organs (mainly colorectal and ‘other digestive organs’).

Around a quarter (28%) of male cancer deaths were the result of lung cancer (respiratory and intrathoracic organ cancer) and around another quarter (26%) were caused by cancer of the digestive organs (mainly colorectal, pancreas and oesophagus). One in ten (10%) male cancer deaths were due to prostate cancer.

**Table 2: Top five causes of death from Cancer in Jersey Residents in 2011**

Male			Female		
Cancer Site	ICD Code	Percentage of Cancer Deaths	Cancer Site	ICD Code	Percentage of Cancer Deaths
<b>Respiratory &amp; Intrathoracic</b> (mainly lung cancer)	C30-C39	28%	<b>Respiratory &amp; Intrathoracic</b> (mainly lung cancer)	C30-C39	27%
<b>Digestive organs</b> (mainly colorectal, pancreas and liver)	C15-C26	26%	<b>Breast</b>	C50	19%
<b>Male genital organs</b>	C60-C63	11%	<b>Female genital organs</b>	C51-C58	14%
<b>Malignant neoplasms of lymphoid, haematopoietic and related tissue</b>	C81-C96	9%	<b>Digestive organs</b>	C15-C26	12%
<b>Urinary tract</b>	C64-C68	8%	<b>Malignant neoplasms of lymphoid, haematopoietic and related tissue</b>	C81-C96	7%

Circulatory Diseases (ICD-10 Codes I00-I99)

In 2011, these diseases accounted for 212 deaths, a similar number to that recorded in 2010, and accounting for over a quarter (29%) of all deaths. The crude death rate for Circulatory diseases being 217 deaths per 100,000 population in 2011, maintaining the level seen in 2010 (220 per 100,000) which itself had seen a decrease from 244 per 100,000 population in 2009.

Deaths due to the diseases of the circulatory system are mostly accounted for by ischemic heart disease (I20-I25) and cerebrovascular disease, commonly known as stroke (I60-I69), which accounted for 12% and 8%, respectively, of all deaths of Jersey residents in 2011. Like other jurisdictions, the number of male deaths from ischemic heart disease exceeds the number of female deaths, while a greater numbers of females than males died from a stroke.

#### Respiratory Diseases (ICD-10 Code J00-J99)

Respiratory diseases were the cause of almost 90 deaths of Jersey residents in 2011, accounting for 12% of all deaths. The crude death rate for respiratory diseases being 89 deaths per 100,000 population per annum, a 25% decrease to that seen in the previous year (118 per 100,000 population).

Respiratory deaths included around 40 from Chronic Lower Respiratory Disease (J40-J47) and around another 30 deaths due to Pneumonia and Influenza (J10-J18), accounting for 6% and 4% of all deaths respectively.

#### External Causes of Death (ICD-10 Code V01-Y98)

The number of deaths from external causes registered to Jersey Residents in 2011 was 29, accounting for one in every twenty-five deaths (4%). More than half of these were due to accidents, such as falls and transport accidents.

#### Suicide (ICD-10 Codes X60-X84 and Y10-Y34, Y87.0, Y87.2)

Deaths classified as 'events of undetermined intent' and 'intentional self-harm' are reported jointly as suicide. In 2011, there were less than 10 such deaths. All suicides are referred to the Viscount and take time to be fully investigated. Therefore there is a period of time between when a suicide occurs and when the death is registered.

### **Infant Deaths**

In 2011, there were less than 5 deaths of those aged less than 1 year.

### **Premature Deaths**

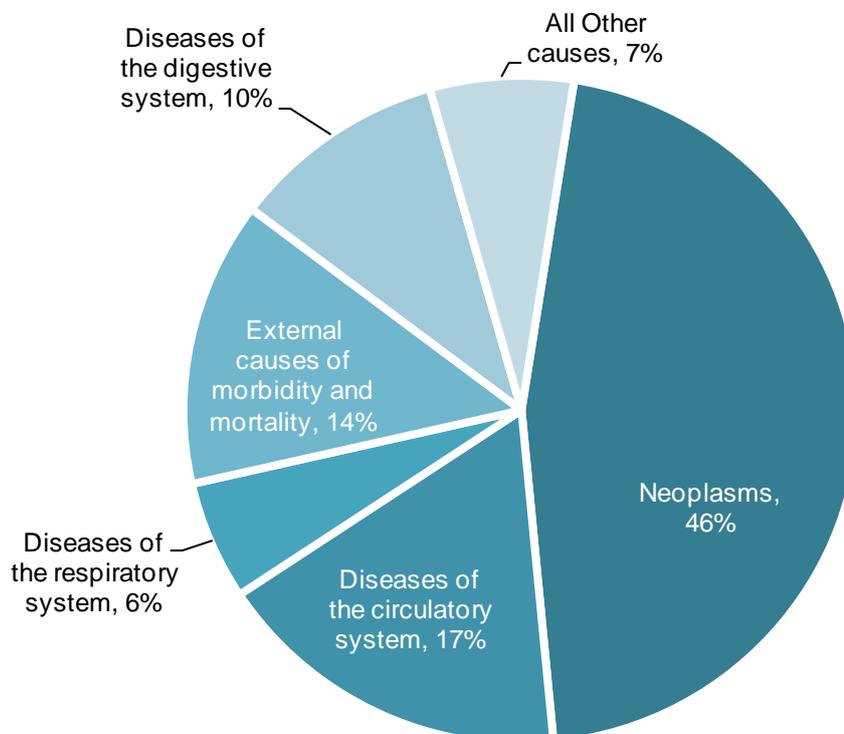
More than a third (37%) of all deaths in 2011 occurred in those under 75 years of age. The top causes of avoidable early deaths in men were lung cancer (cancer of the intrathoracic and respiratory organs), cancer of the digestive organs (mainly colorectal and pancreatic cancers), ischemic heart disease and chronic lower respiratory diseases. For females, premature deaths were caused mainly by lung cancer, breast cancer, ischemic heart disease and cancer of the female genital organs.

Estimating the number of years of life lost by these premature deaths provides a measure of the impact of the avoidable mortality in a population. There were around 3,900 potential years of life lost in Jersey in 2011; male death contributed around 2,200 to this total.

## Working Age Deaths

In 2011, there were 122 deaths to individuals of working age<sup>6</sup>; around three-quarters (71%) of these were male. The main causes of working age male deaths are shown in Figure 3. There were 35 deaths of working age females in 2011, almost half (46%) were the result of cancer.

**Figure 3: Main causes of male working-age deaths in 2011**



## Old Age Deaths

In 2011, around 250 registered deaths were to those aged 85 years and over. Two-thirds (67%) were female deaths; this is due to higher numbers of older women in the population and a comparatively lower life expectancy for men.

## Seasonality

Typically more deaths occur in winter months; in 2011 this pattern was seen with the greatest number of deaths occurring in January (71) and December (71) whilst the fewest deaths (47) occurred in July. A fifth (21%) of deaths occurred in the autumn months of September, October and November, whilst the greatest proportion of deaths occurred in the winter months of January, February and December.

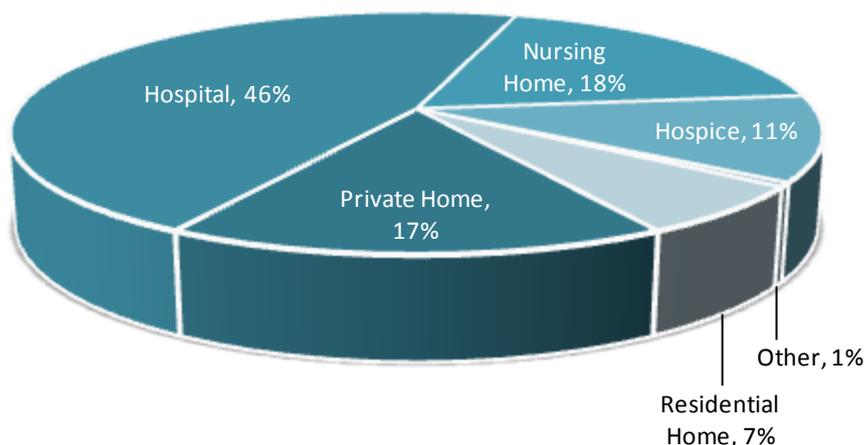
<sup>6</sup> Women aged 16-59 and men aged 16-64 years

## Place of Death

Of the 727 deaths of Jersey residents registered in 2011, around half (46%) of those who died in Jersey did so in a hospital whilst around a sixth (18%) died in a nursing home. Around one in six (17%) on-Island deaths occurred in a private home, whilst a tenth (11%) place at the Hospice, as shown in Figure 4.

Of those resident's whose deaths occurred outside of the Island, two-thirds (68%) died in a hospital.

**Figure 4: Where deaths occurred in Jersey in 2011**



## Background Notes

1. Death figures have been compiled from returns to the Registrars in each parish in Jersey. The Marriage and Civil Status (Jersey) Law 2001 requires all deaths to be registered within 5 days of the date of death.
2. The number of deaths may differ from previously published figures for 2011 due to the inclusion of data from inquests which can take up to 18 months to complete and register. This means that total deaths in a given year should be treated as provisional and used with caution.
3. The results are based on analysis of all deaths of Jersey residents registered as having occurred in calendar year 2011.
4. Cause of death is classified using the tenth revision of the International Statistical Classification of Diseases, Injuries and Causes of Death (ICD-10). As is convention, deaths classified under ICD-10 as 'events of undetermined intent' along with 'intentional self-harm' are jointly reported as 'suicide'.
5. Coding of Jersey deaths is undertaken by the Office for National Statistics on a quarterly basis.
6. A crude death rate refers to the number of deaths per 100,000 population.
7. Potential Years of Life lost estimates the number of years a person would have lived had they not died prematurely. It is based on the assumption that every individual could be expected to live until the age of 75 and premature death before that age may be preventable.
8. Percentages may not add up to 100% due to rounding.

9. This report provides statistics on a number of areas which have policy relevance. In particular, the number of deaths has implications for primary and secondary care in Jersey.
10. This report gives the number of deaths due to Cancer. Information is also available on the number of incidences of cancer in Jersey. Further information can be found in Channel Islands Cancer Registration Report, July 2012, available from [www.gov.je](http://www.gov.je).
11. Jersey rates for 2011 data are calculated using the average of the 2010 and 2011 end-year population estimates as published by the States of Jersey Statistics Unit. This estimate of the mid-year population assumes that half of births, deaths and migration occurs in the first half of the calendar year.
12. Rates for Jersey have been revised for 2001-2011 using rebased end-year population estimates that take into account the 2011 Census. For further information see: [www.gov.je/census](http://www.gov.je/census).
13. All enquiries and feedback should be directed to:

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