



## In Amenable Mortality—Deaths Avoidable Through Health Care—Progress in the US Lags That of Three European Countries

August 29, 2012

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**Journal:** *Health Affairs* Web First, published online Aug. 29, 2012

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### Synopsis

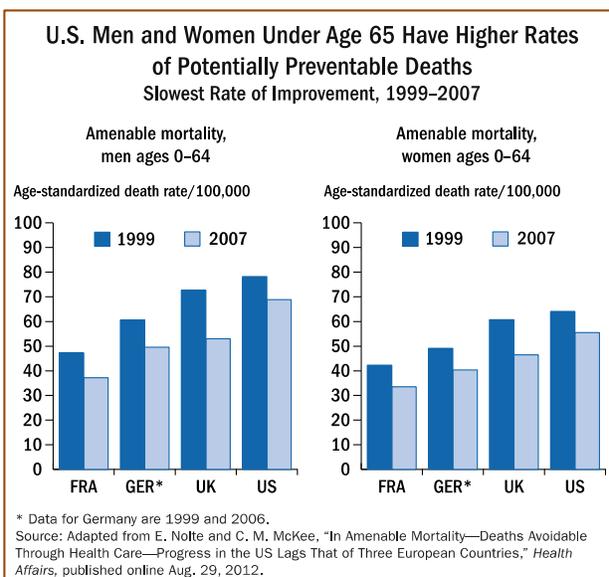
Compared with France, Germany, and the United Kingdom, the United States has a higher rate of amenable mortality—that is, deaths that could have been potentially prevented by timely access to appropriate health care. Between 1999 and 2007, the potentially preventable death rate among American men and women dropped by 18.5 percent and 17.5 percent, respectively, compared with a decline of 37 percent and 32 percent, respectively, in the U.K.

### The Issue

Despite spending twice as much as the average Western European country for its health care, the United States lags on a number of health system performance indicators, including amenable mortality—that is, deaths that could have been avoided with timely and effective health care. Examples of such conditions include diabetes and acute infections, which should be treated with insulin and antibiotics, respectively. In this Commonwealth Fund-supported study, researchers examine trends in amenable mortality between 1999 and 2007 in the United States, as compared with France and the United Kingdom, and between 1999 and 2006 in Germany.

### Key Findings

- Between 1999 and 2007, rates of potentially preventable deaths among men under age 75 fell by 18.5 percent in the U.S. During the same time period, the rate declined by 37 percent in the U.K., by 28 percent in France, and by 24 percent in Germany (2006).



- For women, the rates fell by 17.5 percent in the U.S., 32 percent in the U.K., and 23 percent in both France and Germany.
- In 2007, amenable mortality was highest in the U.S., with rates almost twice those seen in France, which had the lowest level of the four countries studied.
- The pace of improvement was slower in the U.S. than in the other countries for the two age groups examined—individuals under age 65 and those ages 65 to 74. However, the lag was most pronounced among American men and women younger than 65. These individuals are more likely to be uninsured than are Medicare-eligible Americans age 65 and older. They are also more likely to be uninsured than their European counterparts, who have access to universal coverage.

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### Addressing the Problem

The findings in the study highlight the importance of health reform in the United States to improve coverage and access to health care. The authors note that previous research has shown that certain localities or regions of the United States outperform others—Minnesota, for instance, achieves outcomes as good as those in many European countries and has a potentially preventable death rate that is less than half the rates in Mississippi and the District of Columbia. Improved outcomes may be driven by several factors, the authors say, including individuals receiving care that meets best-practice guidelines, as well as adequate preventive care that reduces unnecessary hospital admissions. “There is no reason,” they conclude, “why all Americans cannot benefit equally from living in a country with the most expensive health care system in the world.”

**“This study shows that the rate of decline in the United States was slower than that in France or Germany, and especially slow compared to that in the United Kingdom.”**

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### About the Study

The authors use mortality and population data from the World Health Organization’s mortality database (France, Germany, and the U.K.) and the Centers for Disease Control and Prevention (U.S.). They looked at rates of amenable mortality for people under age 65, as well as for those between ages 65 and 74, from conditions like treatable cancer, diabetes, infections, and heart disease.

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### The Bottom Line

Rates of potentially preventable death were highest in the United States, compared with France, Germany, and the United Kingdom. In addition, the rate of improvement was slower in the U.S. than in the other three countries.

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### Citation

E. Nolte and C. M. McKee, “In Amenable Mortality—Deaths Avoidable Through Health Care—Progress in the US Lags That of Three European Countries,” *Health Affairs* Web First, published online Aug. 29, 2012.