



In the Literature

Highlights from Commonwealth Fund-Supported Studies in Professional Journals

What Changes in Survival Rates Tell Us About U.S. Health Care

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Full text is available at:

<http://content.healthaffairs.org/cgi/content/full/hlthaff.2010.0073?ijkey=SU.Odbex2wK3A&keytype=ref&siteid=healthaff>

Synopsis

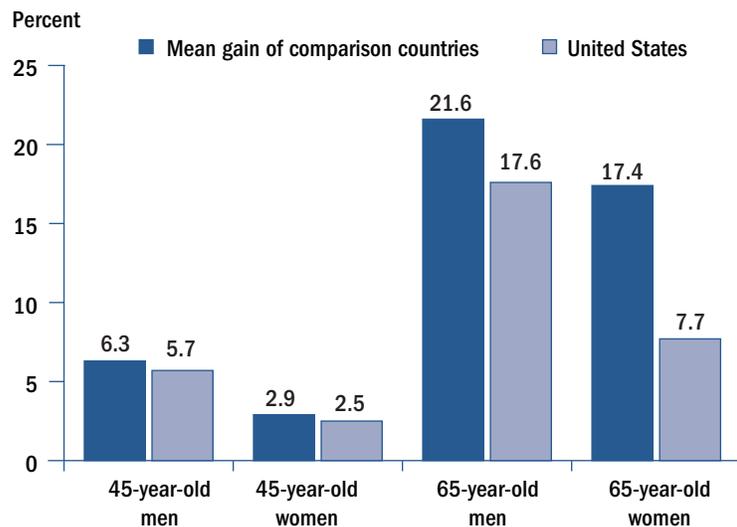
Using 30 years of cross-national data on the 15-year survival rates of men and women, this study sought to determine whether poor health care system performance or other risk factors, such as obesity or smoking, account for the lower relative gains in life expectancy in the United States compared with those of other industrialized countries. The researchers found that even though the U.S. has achieved gains in 15-year survival rates over three decades, life expectancy has declined relative to other wealthy nations, which have experienced even greater gains. This suggests that the U.S. health care system is in part to blame for relatively lower life expectancy.

The Issue

Between 1970 and 2002, per capita health spending in the U.S. has increased at nearly twice the rate of other wealthy nations. At the same time, studies have shown that many Americans are living shorter, less healthy lives relative to citizens of other countries. Advocates of health reform have suggested that this is a sign that the U.S. health care system is inefficient and

performing poorly. Others say that poor U.S. health outcomes are related to high rates of smoking, obesity, traffic fatalities, and other factors not related to the quality of care delivery. In this Commonwealth Fund-supported study, researchers examined changes in 15-year survival rates at middle age (45 years) and older ages (65 years), alongside per capita health care spending, in the U.S. and 12 other wealthy nations.

Gain in 15-Year Survival Rates for Men and Women, Ages 45 and 65, United States and 12 Comparison Countries, 1975–2005



Source: Adapted from P. A. Muennig and S. A. Glied, "What Changes in Survival Rates Tell Us About U.S. Health Care," *Health Affairs* Web First, Oct. 7, 2010, Exhibit 2.

Key Findings

- Even as health care spending per capita has increased in the U.S. over the last three decades, the nation has fallen behind 12 other wealthy nations in 15-year survival for men and women at ages 45 and 65.
- By 2005, 15-year survival rates for 45-year-old white women in the U.S. were lower than in all comparison countries; these rates had not even surpassed 1975 survival rates for Swiss, Swedish, Dutch, or Japanese women.
- U.S. white men ages 45 and 65 experienced declines in their rankings in 15-year survival rates among the comparison countries, but they were not as dramatic as the declines in rankings for women.
- While smoking and obesity are two important behavior-related risk factors, they do not explain the nation's deteriorating performance. Prevalence of obesity in the U.S. has grown more slowly in the U.S. than in other nations, and smoking prevalence has declined more rapidly.

Addressing the Problem

The study findings suggest that improving the U.S. health care system could lead to improved health outcomes. Many chronic diseases that can be prevented or treated with health interventions arise in midlife, and deaths from these diseases cluster in the second half of life. Significant reforms such as those in the Affordable Care Act will help improve the health care system and lower costs by expanding health insurance, improving primary care, and ensuring the coordination of primary care and specialty care to eliminate errors and wasteful duplication of tests and services.

“The nature of our health care system—specifically, its reliance on unregulated fee-for-service and specialty care—may explain both increased spending and the relative deterioration in survival.”

About the Study

The authors compared life expectancy in the U.S. and 12 other wealthy countries, all of which have universal insurance coverage but varying health care systems. Focusing on the years 1975 to 2005, they examined changes in two measures of health system performance: cost and 15-year survival among men and women ages 45 and 65. Data were obtained from the Organization for Economic Cooperation and Development, the World Health Organization, the Centers for Disease Control and Prevention, and the International Mortality and Smoking Statistics.

The Bottom Line

Most of the commonly cited explanations for the smaller gains in U.S. life expectancy relative to other advanced nations—population diversity, smoking and obesity rates, and rising numbers of uninsured—did not hold up to the authors' analysis. Instead, the authors speculate that the U.S. health system itself, with its emphasis on fee-for-service treatments, specialty care, and lack of care coordination, may explain both rising costs and deteriorating relative life expectancy.

Citation

P. A. Muennig and S. A. Glied, “What Changes in Survival Rates Tell Us About U.S. Health Care,” *Health Affairs* Web First, Oct. 7, 2010.