



Public Health
Compendium

Directors of Public Health
Annual Report 2006



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Acknowledgements

Contributors

Peter Fryers

Angela Moss

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Introduction

This is the 2006 Annual Report of the Directors of Public Health in Dudley and takes the form of a compendium of routine health data.

On October 1st 2006, the Dudley Beacon & Castle PCT and the Dudley South PCT merged to form a single PCT - Dudley PCT - covering the whole of the borough of Dudley. In this report, data are analysed to the new PCT and separate analyses for Dudley Beacon & Castle and Dudley South PCTs are no longer presented.

The purpose of an annual report on the state of the public health in Dudley is to provide a yearly update on the health of our people and set this in the context of longer-term changes.

For the 2006 Annual Report Compendium, we have followed the layout established in the 2005 Compendium for ease of use and this document contains the most up-to-date relevant data.

The Compendium is a collection of routine Public Health outcome data that is available for, and relevant to, Dudley. We have organised these data into sections relating to life stages. So, after an opening section on the demography and make-up of the Dudley population and health services, we have sections 'From

Conception to One', 'Morbidity' and 'Mortality'.

In the chapter 'From Conception to One' we look at general fertility rates and low birth weight, infant mortality and teenage conception rates. We then go on to look at cancer incidence and hospital admissions for important conditions in the chapter on morbidity. Finally we examine mortality from the major causes in the last chapter.

The appendices provide background information on targets, sources of data and definitions used.

An annual examination of routine data of this sort is an important part of the general health surveillance of a PCT. It allows issues to be picked up and recommendations for action or further analysis to be made and these will be found in the next section of the report.

Some of the trends and changes in trends observed will be down to data issues, such as changes in coding practice or definition and the data should never be looked at in isolation, but the charts and maps give a useful summary of long-term trends and inequalities within Dudley. To help with the interpretation of graphs and data, we have provided a few bullet points with each highlighting the main issues shown.



Director of Public Health
Dudley PCT (from October 2006)
Dudley Beacon & Castle PCT (Jan-
Sept 2006)



Director of Public Health
Dudley South PCT (Jan-
Sept 2006)

Demography

The main demographic issues facing Dudley are similar to those facing much of the country. That is, a rapidly aging population and the concomitant impacts on services. The number of people aged 85+ in the Dudley population is projected to increase by over 50% over the next 15 years. As people in this group are the highest users of health services this will have a major impact on commissioning and providing these services.

Between the census of 1991 and 2001 there was an increase in single people, people living on their own and lone parent households in Dudley; this mirrors national trends. There was also an increase in people living with a long-term illness that limits their daily activities, as would be expected within an ageing population.

The deprivation indices published in 2004 show Dudley to be generally more deprived than the national average, but there are differences in the detail. The indicator consists of several 'domains' and the relative position of Dudley on these domains differs. Apart from the barriers to housing and services domain, which is generally an indicator of rurality, Dudley wards are mostly in the bottom half nationally, but with relatively few in the most deprived 10%. Interestingly the most extreme example of this is in the health domain where no ward is in the bottom 10% nationally, but only one is outside the bottom half. This would indicate that health outcomes are possibly more evenly distributed than nationally.

Educational attainment in Dudley was not keeping up with the national average, with the proportion of pupils achieving 5 or more grade A* to C GCSEs increasing at a slower rate. This changed in 2006 for the first time since 2002. Unemployment, as measured by those seeking job-seekers allowance, is also higher than the national average. As has been the case nationally, this rate has fallen steadily

over the last decade and is falling again in 2006, after a loner rise during 2005.

Conception to One

Fertility rates in Dudley are similar to the national average, whilst overall birth rates are lower than nationally and have increased more slowly over the last 3 years, following a long decline since 1990. This pattern will have an impact on children's services over the next few years.

Teenage pregnancies continue to go down in Dudley. The rate in the under 16s has decreased by more than the national rate, although it remains higher than this. Whilst the teenage pregnancy rate for under 18s has continued to decline in 2005, the rate of reduction is still not great enough to reach the target of a 50% reduction on 1996 rates by 2010. The decrease still needs to be increased significantly if this challenging target is to be met. Rates of teenage conception vary considerably between wards, with four wards accounting for around a quarter of all teenage conceptions in Dudley. Teenage conception rates remain the highest in Castle & Priory ward, significantly higher than any other ward.

Abortion rates have increased in the last few years in all age groups with the exception of under 16s where the rate is low and remains relatively constant. Around a quarter of the 981 abortions in Dudley are in women aged under 20.

Comparing the 2005 and 2006 Compendiums, Dudley has an increasing rate of low-birth-weight babies born relative to both national and other areas in the region. This has corresponded with an increase in the rate of mortality in the first 4 weeks of life. In addition the stillbirth rate is still above that for England and the region, but has declined relative to the high rate of stillbirths recorded in 2005 and no longer has the highest stillbirth rate of any local authority in the Birmingham and the Black Country area. An investigation of stillbirths showed that

Commentary & Recommendations

the increase noted in the early part of 2005 did not, statistically, fall outside of normal variation. The investigation did however highlight areas of inadequacy with data collection and this will now be investigated further.

The infant mortality rate remained static compared with the 2005 figure. This followed three unusually low years (2001-2003), this change may still be due to fluctuations in small numbers but requires monitoring to confirm any underlying change.

Recommendations

- 1 Investigate and develop more robust data collection between maternity services and the Perinatal Institute to aid future audits. (PCT, Dudley Group of Hospitals NHS Trust, West Midlands Perinatal Institute)
- 2 Further investigate teenage pregnancy rates in Castle & Priory ward and develop targeted programmes to reduce the rate. (PCT, Children's Services Dudley MBC)

Morbidity

Overall cancer incidence in under 75 years in Dudley is rising and this is more significant in men with the rate for men being significantly higher than the national rates for the first time in 15 years. The rate for women has been about the same for the last 6 to 7 years. 'All cancers' includes a wide variety of different diseases with different causes and prognoses and the make-up of this overall figure is changing significantly. For men, prostate cancer and colorectal cancer have overtaken lung cancer as the most common cancers in the under 75s. Whilst lung cancer incidence for men has halved over the last 20 years, prostate cancer incidence has doubled in the last decade and is rising at a faster rate than the national average. The incidence of colorectal cancer is significantly higher in men than women and the rate for men

continues to run significantly higher than the national average.

For women under 75 years, breast cancer remains the most common and the rate continues to track the national average. Following the introduction of screening throughout the UK, incidence rates have risen, but mortality rates have continued to fall. Cervical cancer incidence has fallen since 1990, but has started to rise in the last 6-7 years, and for this period is now significantly higher than the national average.

Skin cancer (or, more specifically, malignant melanoma) incidence (all ages, all sexes) increased rapidly between 1996 and 2000, much more so than nationally, but the incidence has dropped back since then and is now not significantly different from the national rates.

Chronic conditions considered amenable to primary care intervention to prevent emergency admissions include asthma and diabetes. The number and rate of emergency admissions to hospital from these conditions have gone down in Dudley since 1997/98, to a minimum in 2001/02 and has started to show an upward trend in the last two years. There are now over 500 such admissions each year.

Emergency admissions for neurotic disorders (including Anxiety disorders, obsessive-compulsive disorder, reaction to severe stress and somatoform disorders) are nearly half the number of a decade ago. A similar pattern is seen with schizophrenia, for men, with rates for women remaining fairly stable over the period.

Admissions for accidents have increased in the last six years and this increase corresponds to a large increase of nearly 50% in the rate for those aged 65 plus. With the upturn in deaths from accidents in this age group, further investigation is warranted to determine possible causes and associations.

Commentary & Recommendations

Admissions for primary hip replacement in the 65+ age group have levelled off in the last three years reflecting the improved waiting time position and care pathway redesign.

Recommendations

3. Feedback practice comparisons of emergency admissions for chronic conditions usually managed in primary care. GP practices to carry out audits for improvement. (PCT, Dudley GP Practices)

Mortality

Life expectancy at birth in Dudley has increased in line with the national picture, but in the last few years life expectancy has fallen away from the national line and is now significantly lower than life expectancy in England and Wales for both males and females. The rate of decline is greater for males. There are clear inequalities within Dudley, with the wards with the lowest life expectancy being 8.0 years lower than those with the highest. This gap has widened from 6.6 years in the 2005 Compendium. When compared with the map of deprivation, it can be seen clearly that those areas with the lowest life expectancy also have the highest levels of deprivation. Life expectancy is a measure determined through complex calculations and is strongly influenced by small changes in the number of deaths in young people. This increase in inequalities of life expectancy requires further investigation.

Premature circulatory disease mortality continues to fall rapidly and the target of a 40% reduction from 1996 rates has been met. Fewer than half the number of people aged under 75 die from these diseases than two decades ago, which equates to more than 400 fewer premature deaths every year. More than half of these deaths are from coronary heart disease (CHD), with a further fifth dying from stroke. For the most recent period the rate of women dying prematurely from stroke has decreased,

hence more men than women die prematurely from stroke. In addition three times as many men die from CHD before the age of 75 than do women. Mortality from circulatory diseases continue to mirror the patterns of deprivation in the borough, with higher rates in the most deprived wards.

Premature mortality from cancers has overtaken circulatory disease as the major cause of death for under 75s in Dudley. However the rate continues to fall, and for both men and women match the national average. The 20% reduction target from "Our Healthier Nation" by 2010 has already been achieved for men and should be achieved for women. A major factor in this overall decline is the decrease in lung cancer premature deaths in men, which have nearly halved in 20 years. Other cancers from which fewer people are dying prematurely include colorectal cancer and breast cancer in women. Skin cancer mortality had increased in the last few years, but has declined in the last two periods back to within the national average, with the variation being likely due to small numbers. Mortality from prostate cancer in men and cervical cancer in women are not significantly changing. In the latter, rates actually increased from 1998 to 2001 and have since not fallen back down, in contrast to national figures and remain significantly higher than national rates. Measures need to be continued to improve uptake of screening for cervical cancer and an audit of cervical cancer deaths is recommended to try to determine any links.

Mortality rates from accidents (all ages) in Dudley are no longer significantly lower than national rates. They remain higher than in 1996, which was the baseline set for the target of a 20% reduction by 2010. If the long-term trend is continued, the target will be met, but if the recent trend continues then it will not. Accident mortality rates in young people have decreased, but there has been an upturn in the rates amongst older people. This along with the similar increase in hospital

admissions due to accidents in people aged 65 plus, as mentioned above, warrants further investigative analysis and action.

Suicide rates have declined slightly over the last two periods and if this continues the current trajectory should achieve the "Our Healthier Nation" target by 2010.

Also for men, rates of chronic liver disease and cirrhosis are significantly higher than Dudley women and the national average. As alcohol is the major cause of these, it is not surprising that alcohol-related diseases is also significantly high for men. In fact rates of mortality from these causes have increased rapidly over the last decade in particular and are a cause of concern. Alcohol now kills more men aged under 75 than die from strokes. For this reason we recommend that 'Safe & Sound', Dudley's Community Safety Partnership, should reassess and refocus the partnerships strategy for tackling alcohol misuse, as a matter of urgency.

The comparison of major causes of death with national rates reveals certain causes that appear to be a bigger problem in Dudley than on average. Respiratory diseases and particularly chronic respiratory conditions in men are significantly high. This may be related to the types of industry prevalent in Dudley in the recent past and it will be of interest to see how these change as the industrial landscape of the area changes.

Recommendations

- 4 Continue to monitor and investigate the increasing inequalities gap for life expectancy (PCT, Local Strategic Partnership)
- 5 Continue measures to improve cervical screening uptake. (PCT)
- 6 Work with Dudley Group of Hospitals to undertake an audit of cervical cancer deaths in the last 5 years (a total of 46 deaths). (PCT,

Dudley Group of Hospitals NHS Trust)

- 7 Analyse further the upturn in admissions and mortality from accidents in the population aged 65 plus. (PCT)
- 8 That the Dudley Community Safety Partnership re-examines its strategy, investment and action plans to tackle the steep and continuing rise in alcohol-related deaths as a matter of urgency. ('Safe & Sound' - Dudley's Community Safety Partnership)



Dudley Wards, 2001

Dudley Health Service Locations

GP Surgeries
Health Centres
Pharmacies
Dentists
Opticians

Population

2006 Estimate
Projected Population 2005-2020

Census Indicators

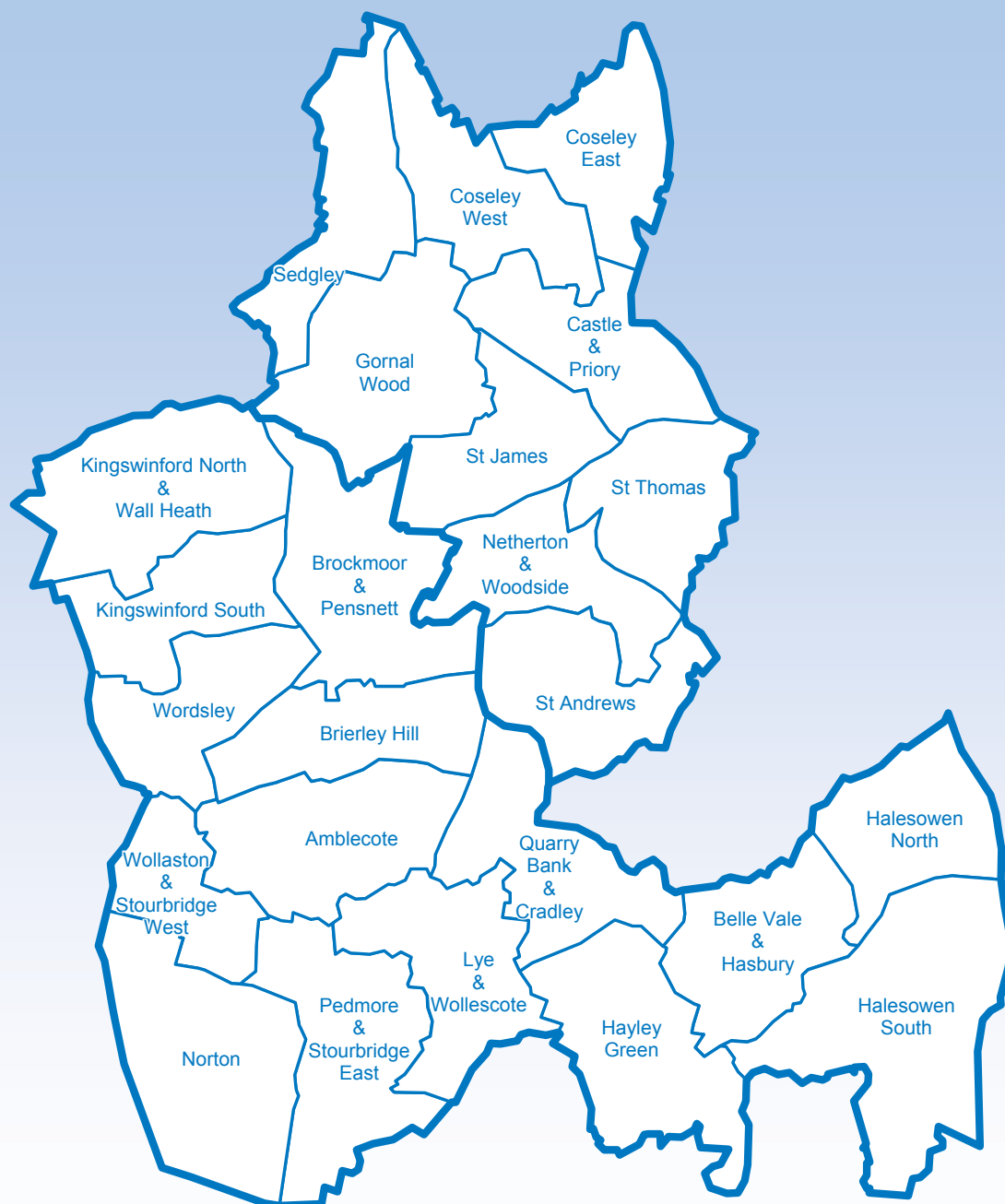
Index of Multiple Deprivation 2004
Low Educational Attainment
Unemployment

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Demography

Dudley Wards, 2001

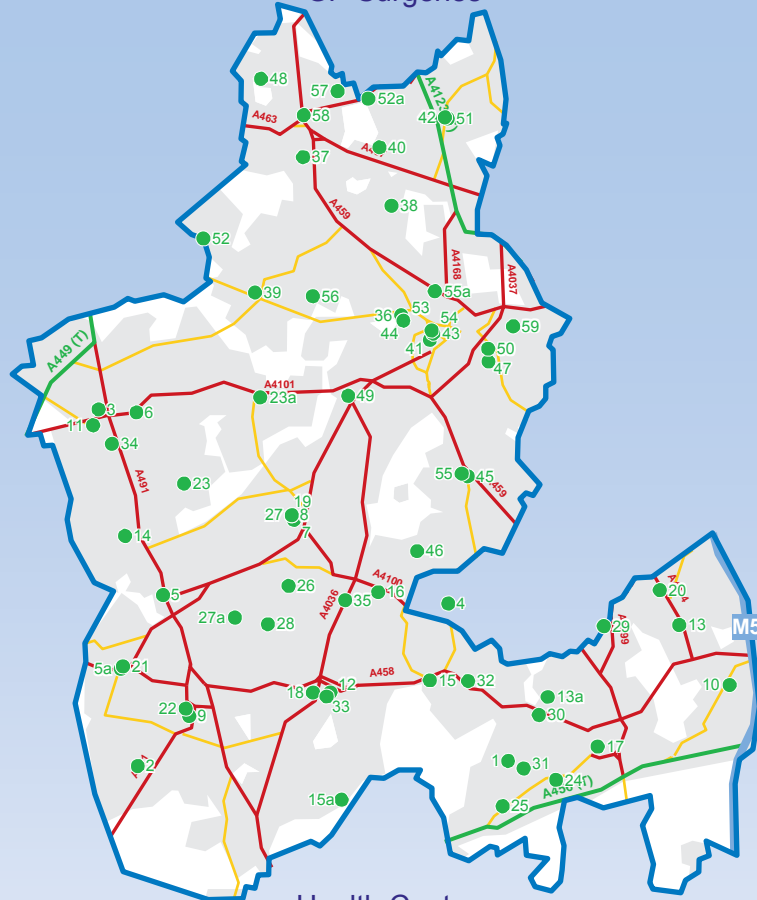
- There are 24 wards in Dudley, with 9 wards in Dudley Beacon and Castle PCT and the remaining 15 wards in Dudley South PCT.
- In 2004 electoral ward boundaries were redefined. However, as these do not match other existing boundaries or data, the 2001 Census wards are still more widely used.



Demography

GP Surgeries

- 1 Cooke MJ
- 2 Powell DJS
- 3 Cripps DF
- 4 PCT Locum
- 5 Powell DF
- 5a Powell DF
- 6 Skilbeck AB
- 7 Bundred MA
- 8 Sumaria MKM
- 9 Watt AJM
- 10 Lewis RA
- 11 Plant NA
- 12 Gallimore DJ
- 13 Bamford CS
- 13a Bamford CS
- 14 Rees DA
- 15 Yarwood-Smith CH
- 15a Yarwood-Smith CH
- 16 Karim H
- 17 Johnson RA
- 18 Killin WP
- 19 Sahni PK
- 20 Vamadevan T
- 21 Firth J
- 22 Dingwall IM
- 23 Bloor JA
- 23a Bloor JA
- 24 Darby JH
- 25 Khetani MJ
- 26 Jones TEG
- 27 Mary JSG
- 27a Mary JSG
- 28 Merotra SK
- 29 Akufo-Tetteh HN
- 30 Shameem NA
- 31 Modi V
- 32 Mittal VK
- 33 Prashara BK
- 34 Chisholm IT
- 35 Shah RM



- 36 Blackman AJ
- 37 Irani S
- 38 Smith MH
- 39 Gee RW
- 40 Broad MVJ
- 41 Welch NCC
- 42 De SK
- 43 Parry DG
- 44 White NC
- 45 Conlon DM
- 46 Ingle PR
- 47 Das Gupta S
- 48 Hampson WT
- 49 Cartwright ST
- 50 Brettell PBV
- 51 Arsiwala IS
- 52 Jain SK
- 52a Jain SK
- 53 Porter WAB
- 54 Pall J
- 55 Gupta PD
- 55a Gupta PD
- 56 Rathore JS
- 57 Sarkar PK
- 58 Shather N
- 59 Basu S

Health Centres



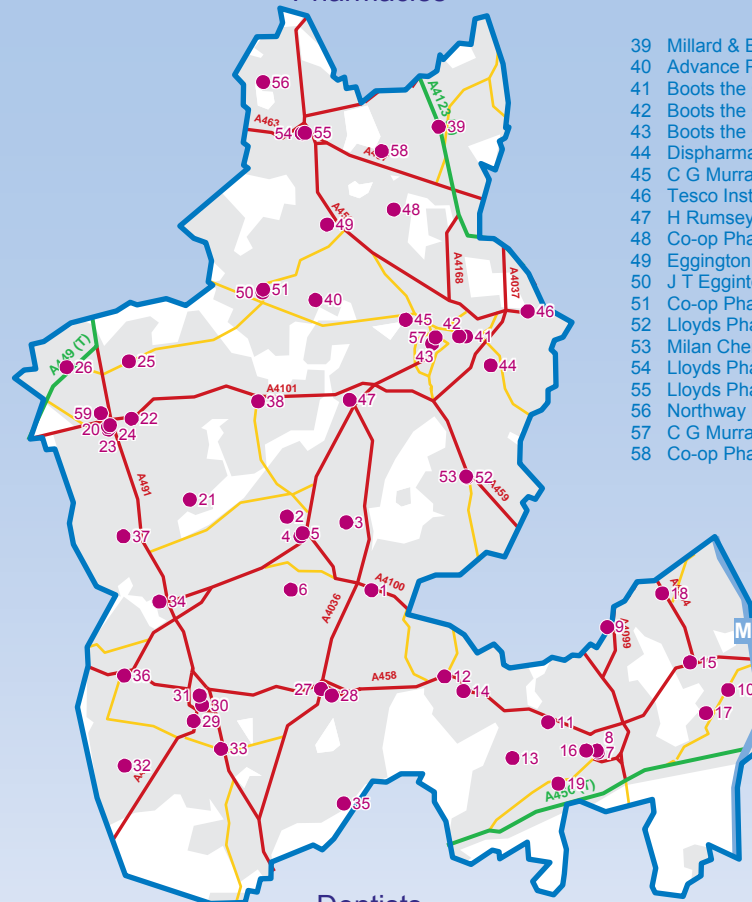
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Demography

Pharmacies

- 1 C G Murray & Son Ltd
- 2 Lloyds Pharmacy
- 3 Boots the Chemist
- 4 Boots the Chemist
- 5 Ian McArdle
- 6 Withymoore Pharmacy
- 7 Lloyds Pharmacy
- 8 Boots the Chemist
- 9 Gibbs Chemist
- 10 Grange Pharmacy
- 11 Hawne Chemist
- 12 Modi Chemist
- 13 C G Murray & Son Ltd
- 14 Co-operative Chemist Ltd
- 15 J R Smith (Chemists) Ltd
- 16 C G Murray & Son Ltd
- 17 Turners Pharmacy
- 18 Rajja Ltd
- 19 Lloyds Pharmacy
- 20 Boots the Chemist
- 21 Lad Chemist
- 22 Lloyds Pharmacy
- 23 Lloyds Pharmacy
- 24 C G Murray & Son Ltd
- 25 Safeway Pharmacy
- 26 Wall Heath Pharmacy
- 27 Lloyds Pharmacy
- 28 Lloyds Pharmacy
- 29 Lloyds Pharmacy
- 30 Boots the Chemist
- 31 C G Murray & Son Ltd
- 32 The Broadway Pharmacy
- 33 Swinford Pharmacy
- 34 Audnam Pharmacy
- 35 Lloyds Pharmacy
- 36 Moss Chemist
- 37 County Pharmacy
- 38 The Pharmacy Galleira
- 59 Lloyds Pharmacy

- 39 Millard & Bullock
- 40 Advance Pharmacy
- 41 Boots the Chemist
- 42 Boots the Chemist
- 43 Boots the Chemist
- 44 Dispharma
- 45 C G Murray & Son Ltd
- 46 Tesco Instore Pharmacy
- 47 H Rumsey-Williams
- 48 Co-op Pharmacy
- 49 Eggington
- 50 J T Egginton Ltd
- 51 Co-op Pharmacy
- 52 Lloyds Pharmacy
- 53 Milan Chemist
- 54 Lloyds Pharmacy
- 55 Lloyds Pharmacy
- 56 Northway Pharmacy
- 57 C G Murray & Son Ltd
- 58 Co-op Pharmacy



Demography

Opticians

- 1 4 Sight
- 2 AJ Moore
- 3 Chapman Opticians Ltd
- 4 David Wright Opticians
- 5 Dollond & Aitchison
- 6 JS Edmunds
- 7 Knight Opticians
- 8 Peter Bainbridge Opticians
- 9 Specs Direct
- 10 Specsavers Opticians
- 11 The Eyecare Centre Ltd
- 12 Boots Opticians & Hearing Care
- 13 C Cacoullis
- 14 Chapman & Myers Opticians
- 15 Docker & Wilson Opticians
- 16 Dollond & Aitchison
- 17 Dollond & Aitchison
- 18 Dollond & Aitchison
- 19 Eye Society Opticians
- 20 Eyewise Opticians
- 21 JS Edmunds
- 22 John Hamer Opticians
- 23 Julian Hill Opticians
- 24 Krystal Vision
- 25 LA Mayne

- 26 LG Ellis
- 27 Optical Express Southern Ltd
- 28 Pickford Opticians
- 29 Pinder & Moore Optometrists
- 30 RA Lawley Ltd
- 31 Robert Hill Opticians
- 32 Scrivens Ltd
- 33 Specsavers
- 34 Specsavers Opticians
- 35 The Eyecare Centre Ltd
- 36 Vision Express (UK) Ltd



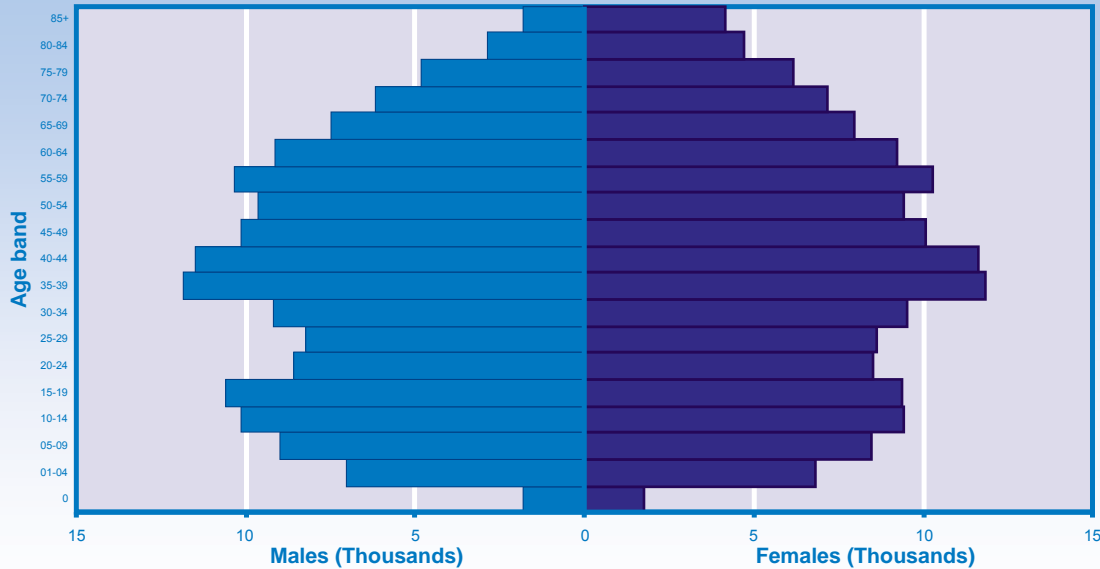
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Demography

Population estimate 2006

- For the age groups 0-24 and 45-59 years there are more males than females with the opposite true for the ages 25-34 and 60+ years. The latter due to higher premature mortality in males.
- The population pyramid is wide across all age groups and only narrows from age 65+.

Dudley Borough Residents

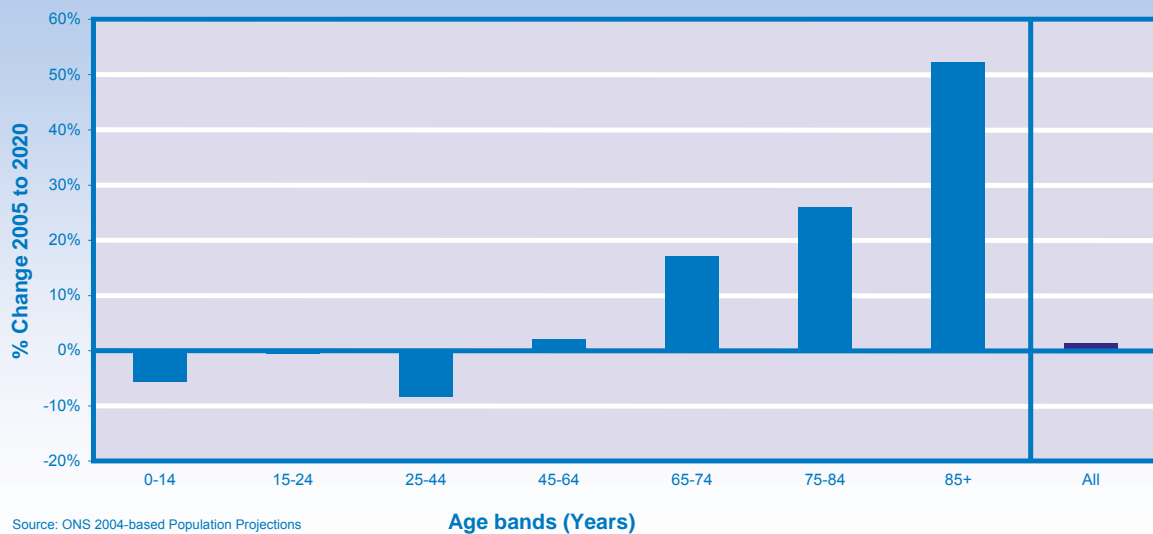


Source: ONS Mid-year Population estimate 2006

Projected population change 2005-2020

- The population is projected to rise in the older age groups over the next 15 years.
- The overall population is not projected to increase significantly.

Projected percentage population change for Dudley 2005-2020



Source: ONS 2004-based Population Projections

Census Indicators, 1991 and 2001

- The number of single people and number of one-person households has increased since 1991.
- The percentage of people in Dudley with no qualifications is higher than for England & Wales.
- The percentage of households without central heating and without their own bathroom facilities has decreased since 1991.

Census Indicator	Dudley 2001		England & Wales 2001	Dudley 1991	
	Number	%	%	%	Change from 1991 to 2001
People, places & families					
People who are 'white'	285930	93.7	91.3	95.9	▼
Single people	124918	40.9	30.1	38.3	▲
Married or re-married people	135961	44.6	50.9	50.4	▼
Separated or divorced people	22461	7.4	10.6	7.3	▲
Widowed people	21187	7.1	8.4	4	▲
Households without car/van	31665	25.3	26.8	30.9	▼
One-person households	33806	27	30	23.3	▲
Lone-parent households (with dependent children)	6874	5.5	6.5	2.7	▲
Health					
Limiting long-term illness	56089	18.5	18.2	12	▲
General health 'not good'	29685	9.8	9.2	n/a	
People providing unpaid care	35002	11.6	10	n/a	
Providing unpaid care 50+ hours/week	7244	2.4	2.1	n/a	
Work & qualifications					
Employed	136019	61.3	60.6	n/a	
Unemployed	8743	3.9	3.4	n/a	
Long-term unemployed	6350	2.9	1	n/a	
Student (economically active)	4525	2	2.6	n/a	
Retired	33286	15	13.6	n/a	
Student (economically inactive)	6347	2.9	4.7	n/a	
Looking after home/family	14397	6.5	6.5	n/a	
Permanently sick or disabled	11803	5.3	5.5	n/a	
Other inactive	6600	3	3.1	n/a	
Travel to work by car	99193	70.9	61.5	n/a	
Travel to work by Public transport	14182	10.1	14.5	n/a	
Qualifications at degree level or higher	28250	12.7	19.8	n/a	
No Qualifications	82905	37.4	29.1	n/a	
Housing					
Average household size	2.4		2.4	n/a	
Owner-occupied	88494	70.8	68.9	68.6	▲
Without central heating	18412	14.7	8.5	29.4	▼
Without own bath/shower and toilet	280	0.2	0.5	0.9	▼
Overcrowding indicator	5781	4.6	7	1.8	▲

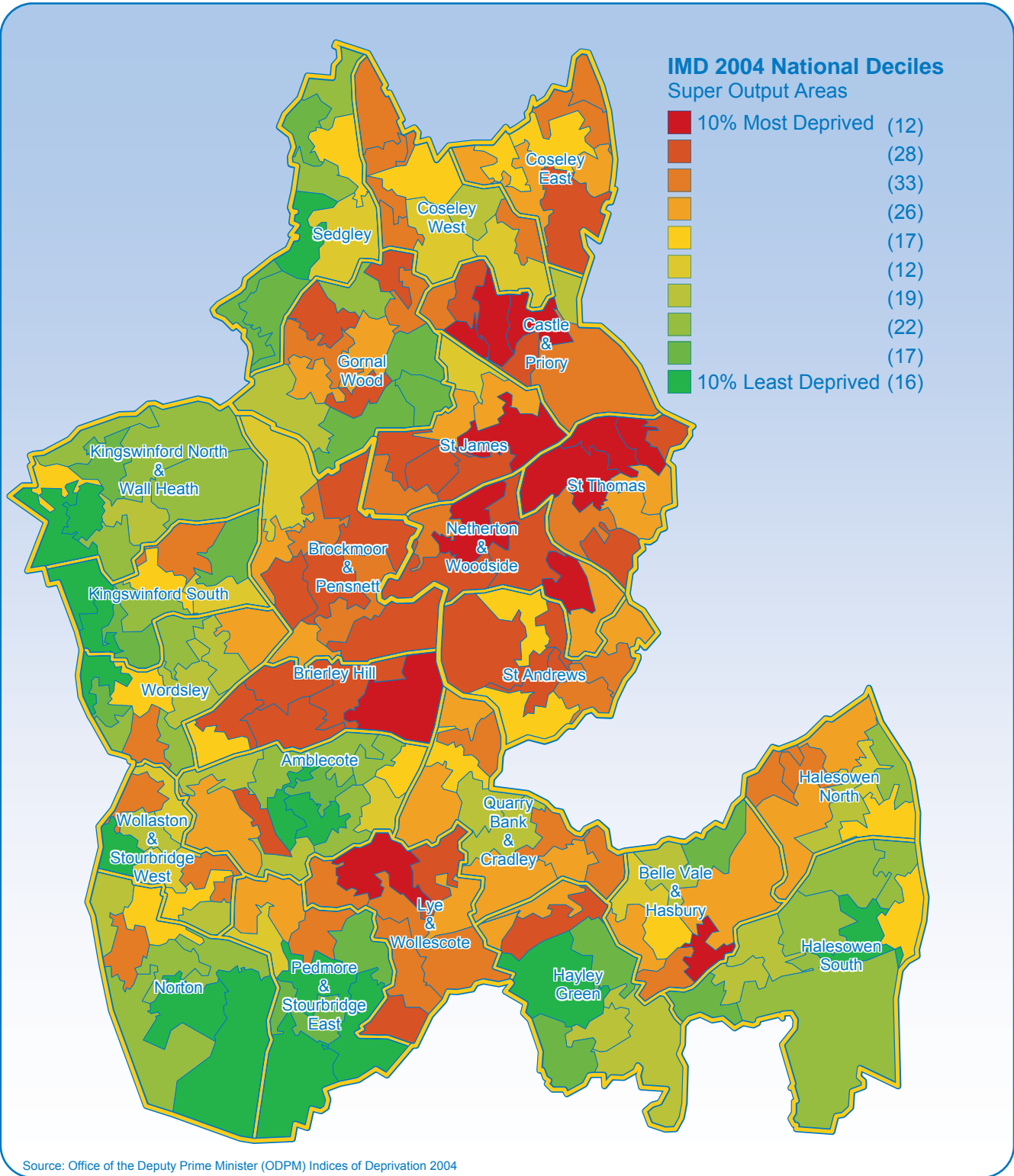
n/a—not available

Source: 1991 and 2001 Census, Nomisweb

Demography

Index of Multiple Deprivation (IMD) 2004 by Super Output Area

- There are 202 Super Output Areas within Dudley borough with 12 of these falling into the 10% most deprived Super Output Areas nationally.
- Overall, the north of the borough has more deprived Super Output Areas than the south, but there are pockets of deprivation throughout the borough.



Demography

Ranking of Dudley wards on Indices of Multiple Deprivation (IMD) 2004

- Three of the wards in Dudley are in the 10% most deprived wards nationally and 16 wards are among the 50% most deprived nationally.
- Eight wards in Dudley are in the 10% most deprived nationally for the education, skills and training domain and for the health and disability domain all but one ward in Dudley falls into the top 50% most deprived wards nationally.

Ward Name	IMD 2004 National Rank 1 = Most Deprived 7932 = Least Deprived)	IMD 2004	Income	Employment	Health & Disability	Education, Skills & Training	Barriers to Housing and Services	Living Environment	Crime
Castle & Priory	523	Red	Red	Red	Yellow	Red	Grey	Yellow	Yellow
St. Thomas	679	Red	Red	Red	Yellow	Red	Grey	Red	Yellow
Netherton & Woodside	694	Red	Red	Red	Yellow	Red	Grey	Red	Yellow
Brierley Hill	794	Yellow	Red	Yellow	Yellow	Red	Grey	Red	Red
Lye & Wollescote	992	Yellow	Red	Yellow	Yellow	Red	Grey	Yellow	Yellow
St. James	1019	Yellow	Yellow	Red	Yellow	Yellow	Grey	Red	Yellow
Brockmoor & Pensnett	1154	Yellow	Yellow	Yellow	Yellow	Red	Grey	Yellow	Yellow
St. Andrews	1274	Yellow	Yellow	Yellow	Yellow	Red	Grey	Red	Yellow
Coseley East	1669	Yellow	Yellow	Yellow	Yellow	Red	Grey	Yellow	Yellow
Belle Vale & Hasbury	2049	Yellow	Yellow	Yellow	Yellow	Yellow	Grey	Yellow	Yellow
Quarry Bank & Cradley	2115	Yellow	Yellow	Yellow	Yellow	Yellow	Grey	Yellow	Yellow
Coseley West	2312	Yellow	Yellow	Yellow	Yellow	Yellow	Grey	Yellow	Yellow
Gornal Wood	2353	Yellow	Yellow	Yellow	Yellow	Yellow	Grey	Yellow	Yellow
Halesowen North	2519	Yellow	Yellow	Yellow	Yellow	Yellow	Grey	Yellow	Yellow
Wollaston & Stourbridge West	2902	Yellow	Yellow	Yellow	Yellow	Yellow	Grey	Yellow	Yellow
Hayley Green	3786	Yellow	Yellow	Yellow	Yellow	Yellow	Grey	Yellow	Grey
Wordsley	4125	Grey	Yellow	Yellow	Yellow	Yellow	Grey	Yellow	Yellow
Amblecote	4153	Grey	Yellow	Yellow	Yellow	Yellow	Grey	Grey	Yellow
Pedmore & Stourbridge East	4608	Grey	Yellow	Yellow	Yellow	Yellow	Grey	Yellow	Yellow
Kingswinford South	4638	Grey	Yellow	Yellow	Yellow	Yellow	Grey	Yellow	Yellow
Norton	5098	Grey	Yellow	Yellow	Yellow	Yellow	Grey	Yellow	Grey
Halesowen South	5489	Grey	Yellow	Yellow	Yellow	Yellow	Grey	Yellow	Yellow
Sedgley	5690	Grey	Yellow	Yellow	Yellow	Yellow	Grey	Yellow	Grey
Kingswinford North & Wall Heath	5919	Grey	Yellow	Yellow	Yellow	Yellow	Grey	Yellow	Grey
Number of Wards in Dudley in the 10% most deprived wards nationally		3	5	4	0	8	0	5	1

- Among the 10% most deprived wards nationally
- Among the 10%-50% most deprived wards nationally
- Among the 50% least deprived wards nationally

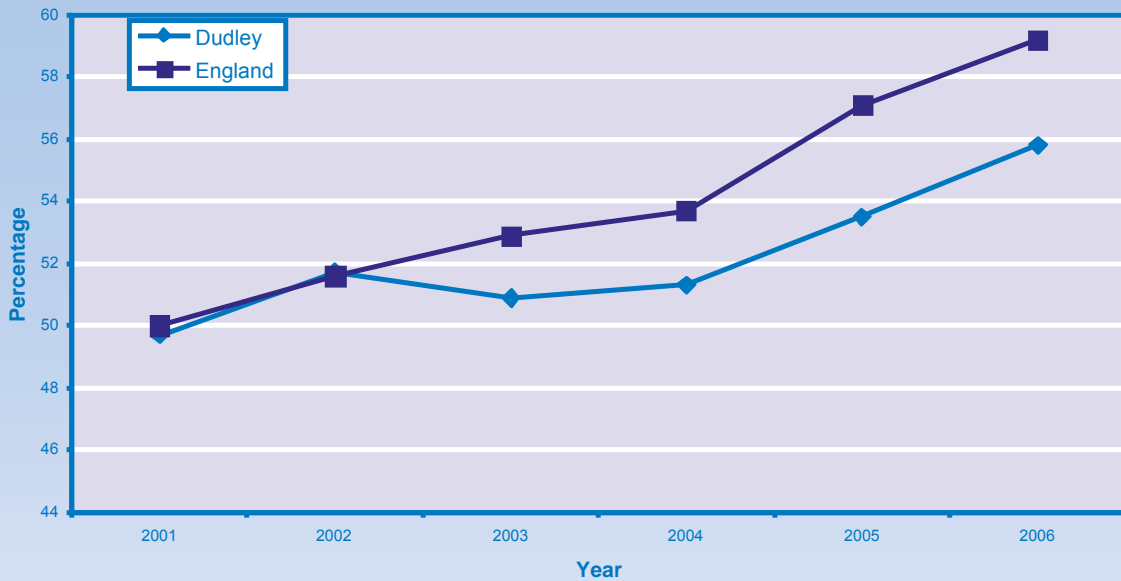
Source: Office of the Deputy Prime Minister (ODPM) Indices of Deprivation 2004

Demography

Low educational attainment and unemployment

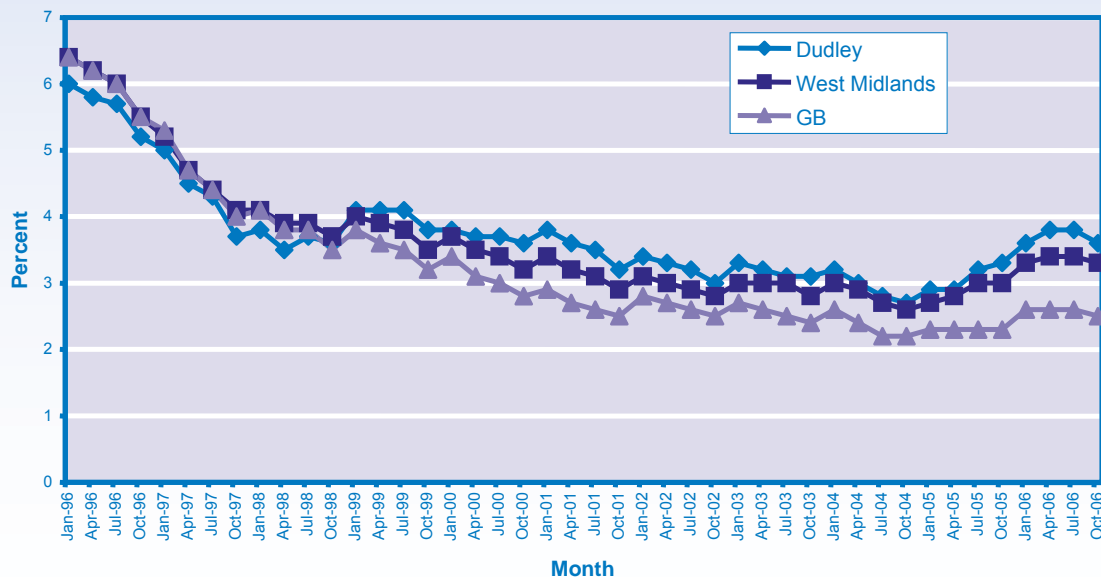
- The proportion of pupils gaining at least 5 GCSE grades A*-C is lower in Dudley than England.
- In 2006 Dudley for the first time since 2002 had a greater improvement in proportion of pupils gaining at least 5 GCSE grades A*-C than England.
- The proportion of people claiming job seekers allowance (JSA) is higher in Dudley than the national average and this difference has widened in the last five years.
- The rates for all areas have fallen over the last decade and are falling again after a rise in 2005.

Percentage of pupils gaining 5 or more GCSE grade A* - C, 2001-2006



Source: DfES

People claiming Job Seekers Allowance as a percentage of the working-age population, 1996 - 2006



Source: Office of National Statistics (ONS) Claimant counts



General Fertility Rates

Conceptions

Under 16 Conception Rate

Under 18 Conception Rate

Under 18 Conception Rate by Ward

Abortion Rates

Birth Rates

Low Birth Weight Births

Still Birth Rates

Perinatal Mortality

Infant Mortality

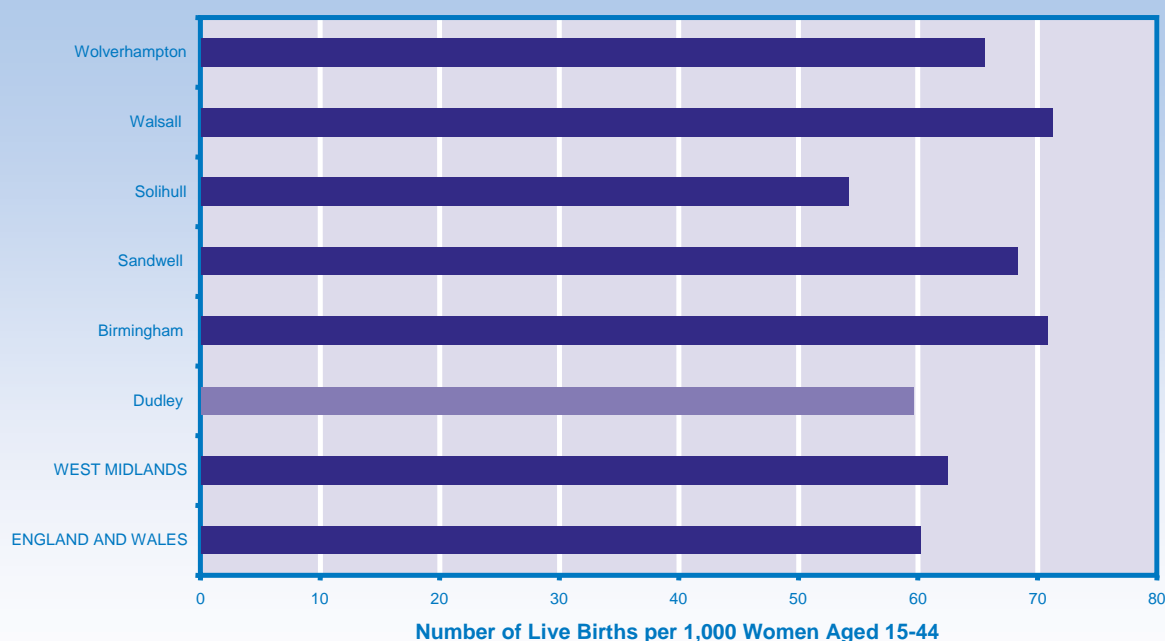
CONCEPTION POSITION WOMEN

Conception to One

General Fertility Rates, 2006

- The number of live births per 1,000 women aged 15-44 in Dudley during 2006 was 59.7; slightly lower than the general fertility rate in the West Midlands and than that for England & Wales.
- Of the boroughs in Birmingham and the Black Country, Dudley was second only to Solihull for the lowest general fertility rate in 2006.

General Fertility Rates, 2006



Source: National Centre for Health Outcomes Development (NCHOD) Compendium of Clinical and Health Indicators

General Fertility Rates by Year, 2006

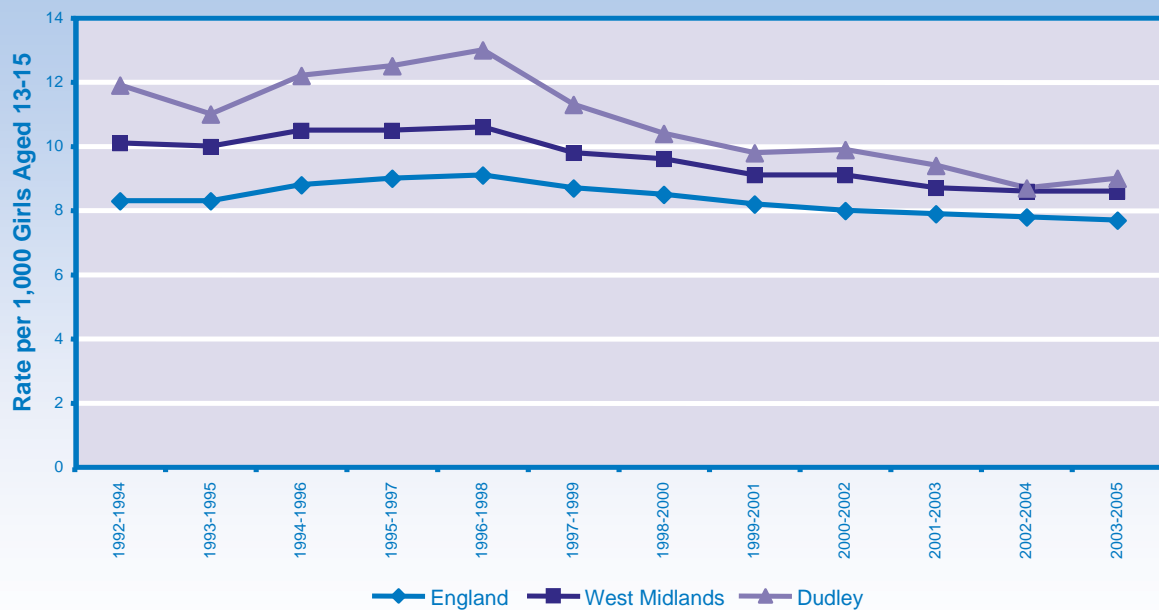
Area	Number of Live Births per 1,000 Women Aged 15-44
ENGLAND & WALES	60.2
WEST MIDLANDS	62.5
Dudley	59.7
Birmingham	70.9
Sandwell	68.4
Solihull	54.2
Walsall	71.3
Wolverhampton	65.6

Conception to One

Under 16 Conception rate trend, 1992-2005

- The under 16 conception rate has continued to decline in Dudley and the gap between Dudley and the West Midlands and England is closing, although the latest figure shows a slight increase.
- There were 156 under 16 conceptions in Dudley over the period of 2003-2005.
- The Dudley rate for 2003-2005 was comparable with Birmingham & Walsall but higher than the West Midlands rate.

Conception Rates Below Age 16 by Year
3-Year Rate, 1992-1994 to 2003-2005



Source: National Centre for Health Outcomes Development (NCHOD) Compendium of Clinical and Health Indicators

Conception Rates Below Age 16, 3-Year Rate 2003-2005

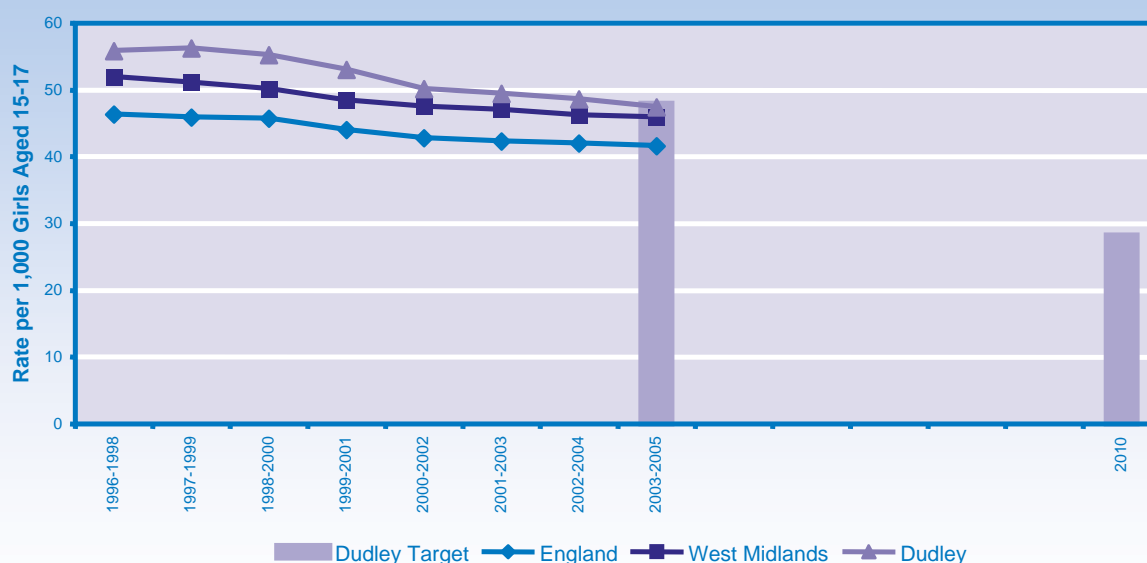
Area	Rate per 1,000 Girls Aged 13-15	Number
ENGLAND	7.7	22,212
WEST MIDLANDS	8.6	2,762
Dudley	9.0	156
Birmingham	9.0	577
Sandwell	13.5	235
Solihull	5.9	75
Walsall	9.0	140
Wolverhampton	13.6	192

Conception to One

Under 18 Conception rate trend, 1996-2005

- The under 18 conception rate has continued to decrease in Dudley and the gap between Dudley and the West Midlands and England is gradually closing.
- The under 18 conception rate for 2005 in Dudley was 46.6, which is below the target for 2004, but not by enough for the trajectory to meet the 2010 target.
- The 2010 target of 28.3 per 1,000 girls aged 15-17 remains challenging.

Conception Rates Below Age 18 by Year,
3-Year Rate, 1996-1998 to 2003-2005



Source: National Centre for Health Outcomes Development (NCHOD) Compendium of Clinical and Health Indicators

Conception Rates Below Age 18, 2005

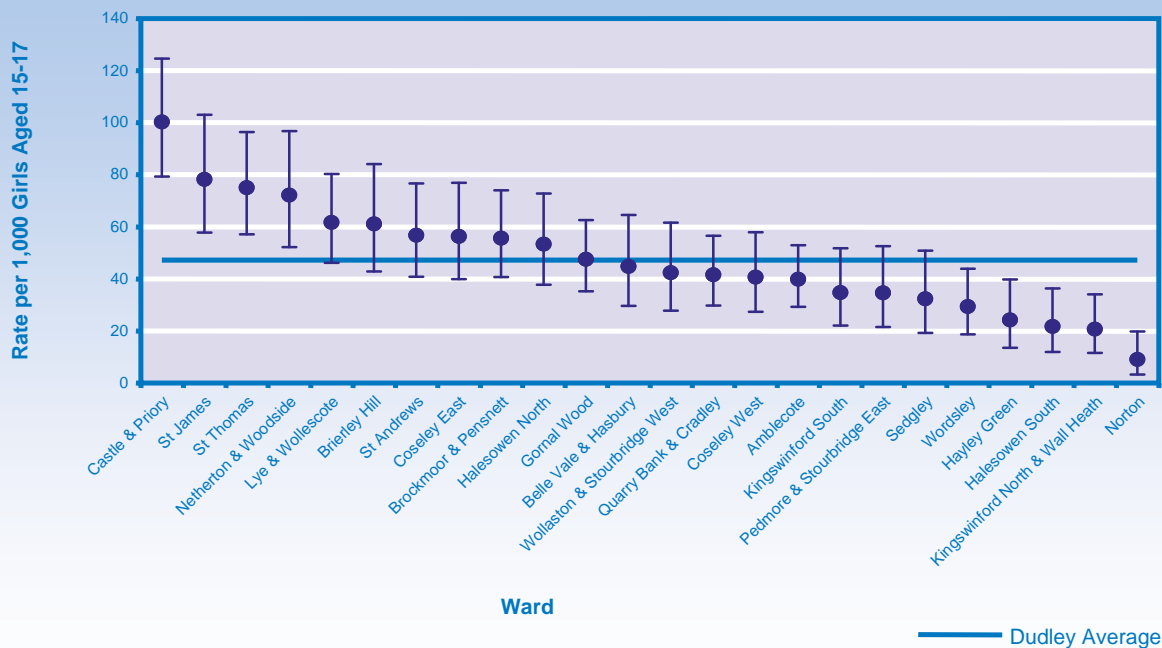
Area	Rate per 1,000 Girls Aged	Number
ENGLAND	41.3	39,804
WEST MIDLANDS	45.5	4,871
Dudley	46.6	266
Birmingham	50.7	1,095
Sandwell	61.9	356
Solihull	35.9	150
Walsall	57.7	297
Wolverhampton	62.4	293

Conception to One

Under 18 Conception rates by Ward, 2003-2005

- The under 18 conception rate is significantly higher than the Dudley average of 47.5 in four of the 24 Dudley wards and significantly lower in 5 wards.
- Castle & Priory ward had the highest under 18 conception rate; more than 10 times the rate for the ward with the lowest rate, over twice the Dudley average and significantly higher than any other ward.
- Norton has a significantly lower rate than any other ward.

**Conception Rates Below Age 18 with 95% Confidence Intervals
3-Year Rates, by Ward in Dudley, 2003-2005**



Source: National Centre for Health Outcomes Development (NCHOD) Compendium of Clinical and Health Indicators

Conception Rates Below Age 18 by Ward, 3-Year Rate, 2003-2005

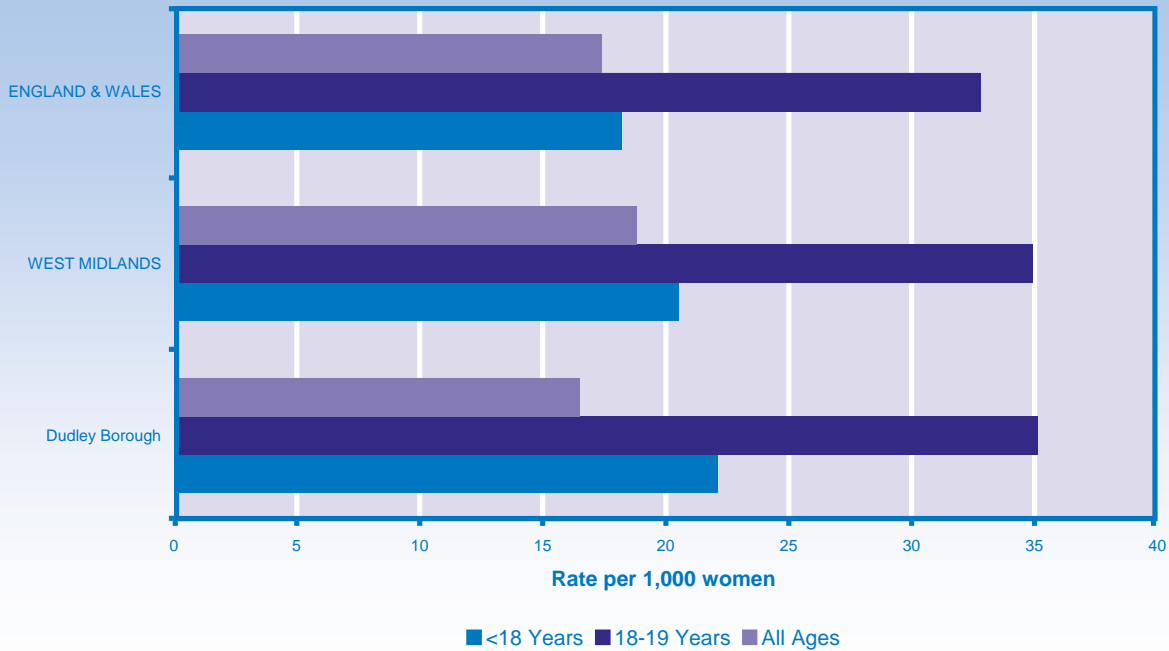
Ward	Rate per 1,000 Girls Aged 15-17 (95% Confidence Intervals)
Amblecote	40.1 (29.5,53.2)
Belle Vale & Hasbury	45.0 (29.9,64.8)
Brierley Hill	61.4 (43.1,84.4)
Brockmoor & Pensnett	55.8 (40.9,74.2)
Castle & Priory	100.6 (79.5,125.0)
Coseley East	56.6 (40.1,77.1)
Coseley West	40.9 (27.6,58.2)
Gornal Wood	47.8 (35.4,62.8)
Halesowen North	53.5 (38.0,73.1)
Halesowen South	22.0 (12.1,36.6)
Hayley Green	24.5 (13.8,40.0)
Kingswinford North & Wall Heath	20.9 (11.8,34.3)
Kingswinford South	35.0 (22.3,52.0)
Lye & Wollescote	61.9 (46.4,80.6)
Netherton & Woodside	72.4 (52.5,97.0)
Norton	9.2 (3.4,20.0)
Pedmore & Stourbridge East	34.9 (21.7,52.8)
Quarry Bank & Cradley	41.8 (29.9,56.8)
Sedgley	57.1 (41.1,76.9)
St. Andrews	78.5 (58.0,103.3)
St. James	75.3 (57.4,96.6)
St. Thomas	32.6 (19.4,51.0)
Wollaston & Stourbridge West	42.6 (28.0,61.8)
Wordsley	29.6 (18.9,44.1)

Conception to One

Abortion rates by maternal age group, 2006

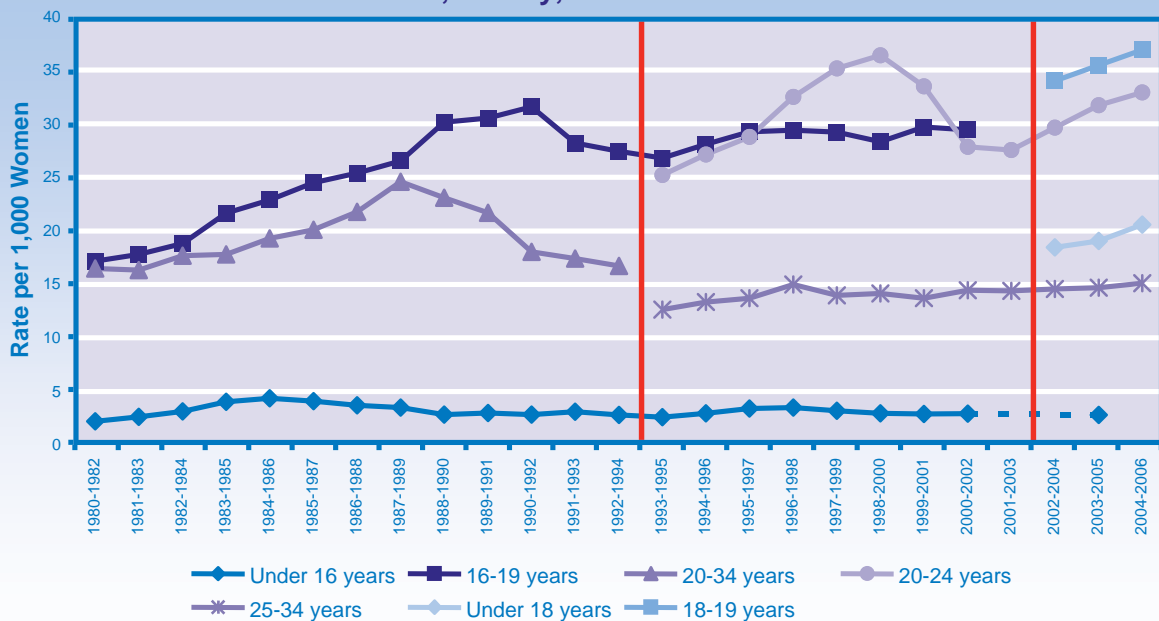
- In Dudley in 2006 there were 981 abortions, 128 of which were in the under 18 maternal age group and a further 126 were in the 18-19 maternal age group.
- Overall Dudley had a slightly lower abortion rate than both England & Wales and the West Midlands, but for the under 25 age group Dudley had a higher abortion rate.
- The abortion rate has increased in Dudley in the last few years in all age groups under 25 except in the under 16s.

Abortion Rates by Maternal Age Group, 2006



Source: National Centre for Health Outcomes Development (NCHOD) Compendium of Clinical and Health Indicators

Abortion Rates by Maternal Age by Year 3-Year Rates, Dudley, 1980-1982 to 2004-2006



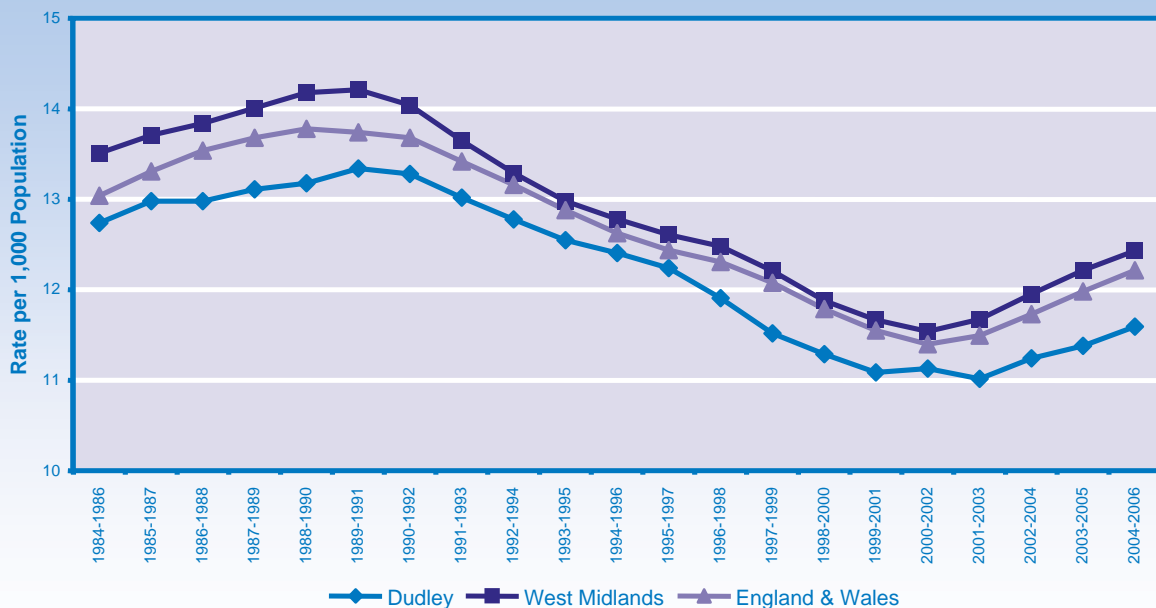
Source: National Centre for Health Outcomes Development (NCHOD) Compendium of Clinical and Health Indicators

Conception to One

Birth Rates, 1984-2006

- The birth rate per 1,000 population for all areas peaked in the period 1989-1991 then decreased until the start of the millennium from when they have risen again.
- The birth rate reached its lowest for England and Wales and the West Midlands in the period 2000-2002 and for Dudley this was during the period 2001-2003.
- The Dudley birth rate is rising at a slower rate than in England & Wales and the West Midlands.

Birth Rates by Year
3-Year Rates, 1984-1986 to 2004-2006



Source: National Centre for Health Outcomes Development (NCHOD) Compendium of Clinical and Health Indicators

Birth Rates, 2006

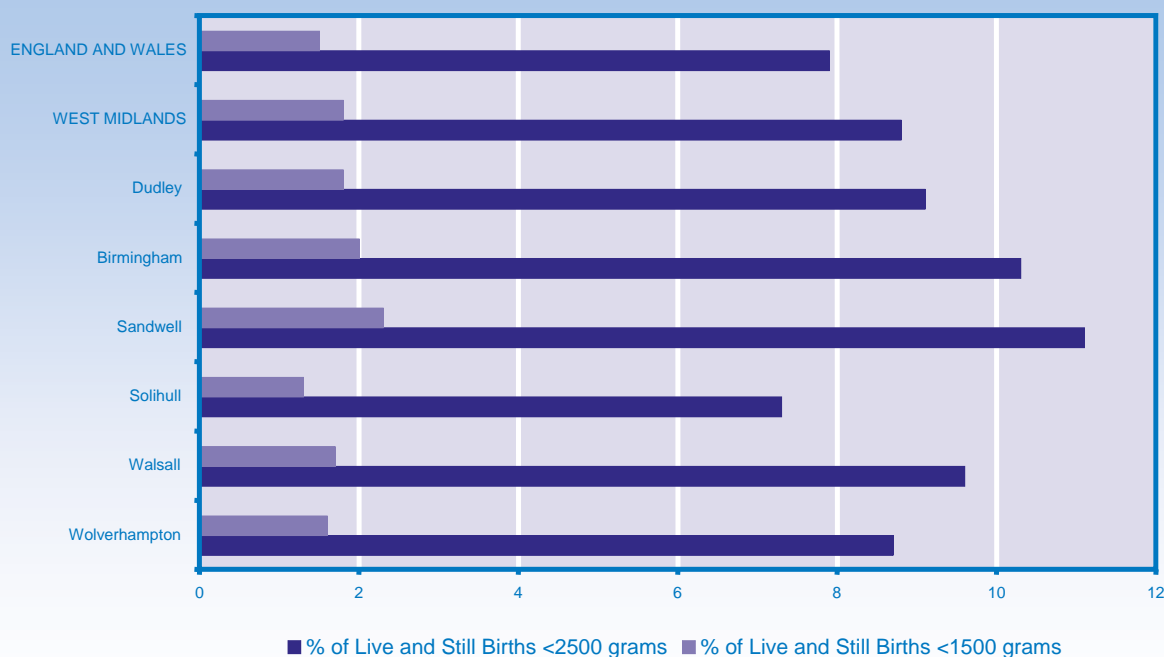
Area	Rate per 1,000 Population	Number of Births
ENGLAND & WALES	12.5	672,966
WEST MIDLANDS	12.7	68,067
Dudley	11.7	3,569
Birmingham	16.3	16,396
Sandwell	14.6	4,192
Solihull	10.4	2,120
Walsall	14.2	3,627
Wolverhampton	13.6	3,217

Conception to One

Low Birth Weight Births, 2006

- The percent of live and still births under 1,500 grams and under 2,500 grams in Dudley was higher than the figure for England and Wales.
- The proportion under 2,500 grams was higher than for West Midlands as a whole
- Dudley's rate increased over the previous year, both in absolute terms and compared to other areas.
- Dudley is no longer one of the lowest in the Birmingham and Black Country area.

Low Birth Weight Births, All Maternal Ages, 2006



Source: National Centre for Health Outcomes Development (NCHOD) Compendium of Clinical and Health Indicators

Low Birth Weight Births, all Maternal Ages, 2006

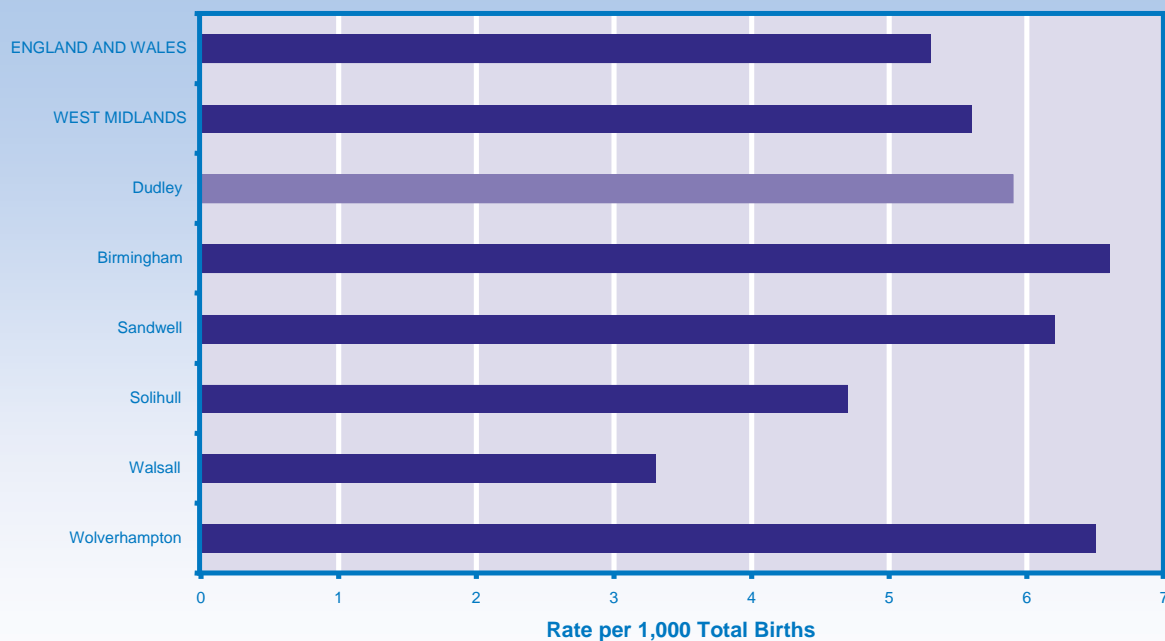
Area	% of Live and Still Births <1500 grams	% of Live and Still Births <2500 grams
ENGLAND & WALES	1.5	7.9
WEST MIDLANDS	1.8	8.8
Dudley	1.8	9.1
Birmingham	2	10.3
Sandwell	2.3	11.1
Solihull	1.3	7.3
Walsall	1.7	9.6
Wolverhampton	1.6	8.7

Conception to One

Still Birth Rates, 2006

- The still birth rate in Dudley in 2006 was 5.9 per 1,000 total births and was higher than the rate for both England & Wales and the West Midlands
- The stillbirth rate in Dudley in the previous year was the highest in the Birmingham and the Black Country area, but in 2006 it was lower than 3 other Boroughs in the Black Country.

Still Birth Rates, 2006



Source: National Centre for Health Outcomes Development (NCHOD) Compendium of Clinical and Health Indicators

Still Birth Rates, 2006

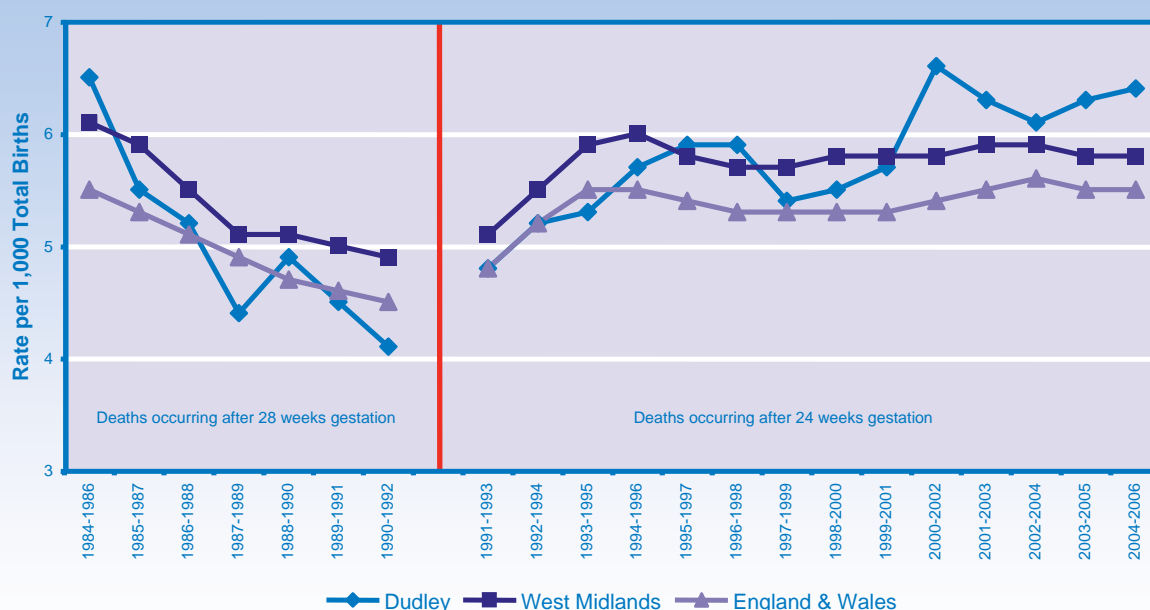
Area	Number of Still Births per 1,000 Total Births
ENGLAND & WALES	5.3
WEST MIDLANDS	5.6
Dudley	5.9
Birmingham	6.6
Sandwell	6.2
Solihull	4.7
Walsall	3.3
Wolverhampton	6.5

Conception to One

Still Birth Rates, 1984-2006

- The still birth rate per 1,000 total births nationally and regionally peaked in the period 1994-1996 and has shown a fairly static trend since then.
- The still birth rate for Dudley followed that trend until 1999-2001, but then increased and now exceeds that for England & Wales and the West Midlands.
- The rise in the Dudley still birth rate showed some signs of slowing but has risen again in 2005 and 2006.

Still Birth Rates by Year
3- Year Rates, 1984-1986 to 2004-2006



Source: National Centre for Health Outcomes Development (NCHOD) Compendium of Clinical and Health Indicators

Number of Still Births by Maternal Age, 2004-2006

AREA	AGE						
	11-15	16-19	20-24	25-34	35-39	40+	11+
ENGLAND AND WALES	27	864	2035	5371	1868	568	10733
WEST MIDLANDS	0	110	263	579	157	46	1155
Dudley	0	7	14	37	10	0	68
Birmingham	0	25	104	172	39	12	352
Sandwell	0	14	16	32	9	7	78
Solihull	0	*	11	12	*	*	29
Walsall	0	6	11	22	*	*	46
Wolverhampton	0	*	14	25	10	*	53

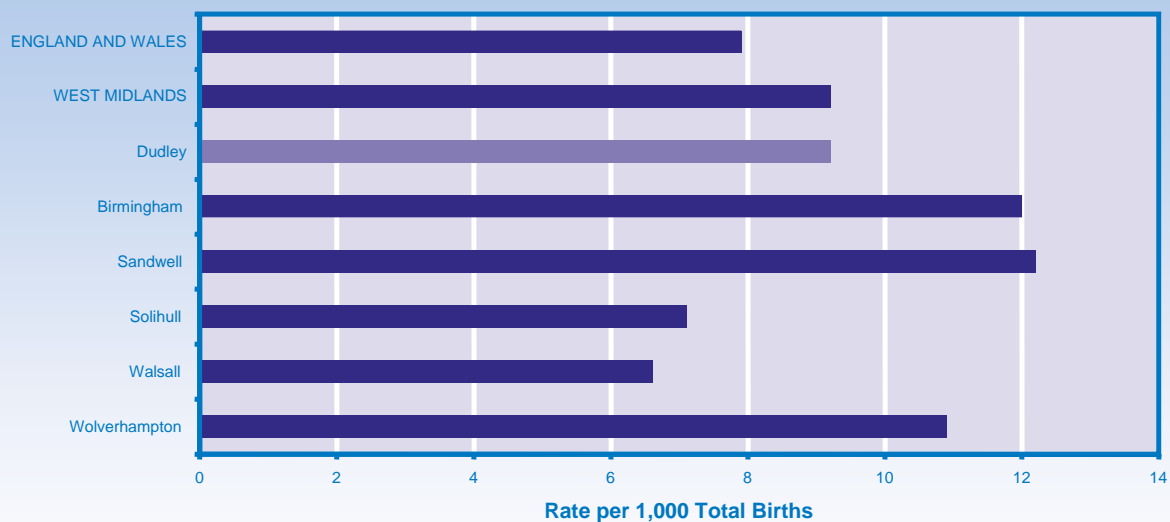
* Data that may potentially identify an individual have been removed

Conception to One

Perinatal Mortality rates, 2006

- The perinatal mortality rate in Dudley was higher than that recorded for England & Wales
- In 2006 it was the same as the West Midlands rate.
- Compared to other areas in Birmingham and the Black Country Dudley is in the middle of the group.

Perinatal Mortality Rates by Year
Number of Still Births and Deaths of Infants Aged Under 7 Days, 2006



Source: National Centre for Health Outcomes Development (NCHOD) Compendium of Clinical and Health Indicators

Perinatal Mortality Rates (Stillbirths and Deaths of Infants Aged Under 7 days), 2006

Area	Rate per 1,000 Total Births	Number
ENGLAND & WALES	7.9	5340
WEST MIDLANDS	9.2	623
Dudley	9.2	33
Birmingham	12.0	197
Sandwell	12.2	51
Solihull	7.1	15
Walsall	6.6	24
Wolverhampton	10.9	35

Conception to One

Perinatal Mortality rates trend, 1980-2006

- The perinatal mortality rate in Dudley has fairly consistently fallen between the England & Wales and the West Midlands rate over the last 20 years.
- The latest years show a slight increase, but it is too early to say if this is anything other than random variation.
- The Dudley perinatal mortality rate trend closely follows the still birth rate trend.

Perinatal Mortality Rates by Year
Still Births and Deaths Under 7 days Combined,
3-Year Rates, 1980-1982 to 2004-2006



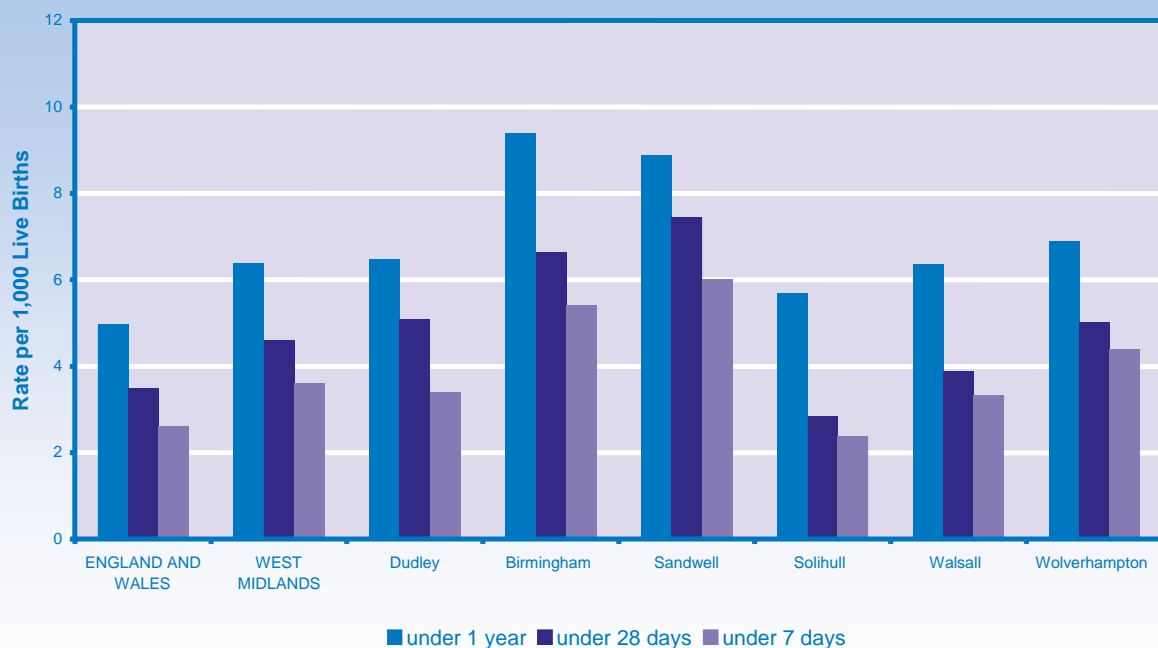
Source: National Centre for Health Outcomes Development (NCHOD) Compendium of Clinical and Health Indicators

Conception to One

Infant Mortality, 2006

- The infant mortality rate in the under 1 age group was higher in Dudley than both England & Wales and the West Midlands.
- Dudley is around the average for all groups in the Birmingham and the Black Country area.

Mortality Rates in Infancy, 2006



Source: National Centre for Health Outcomes Development (NCHOD) Compendium of Clinical and Health Indicators

Mortality Rates in Infancy, 2006

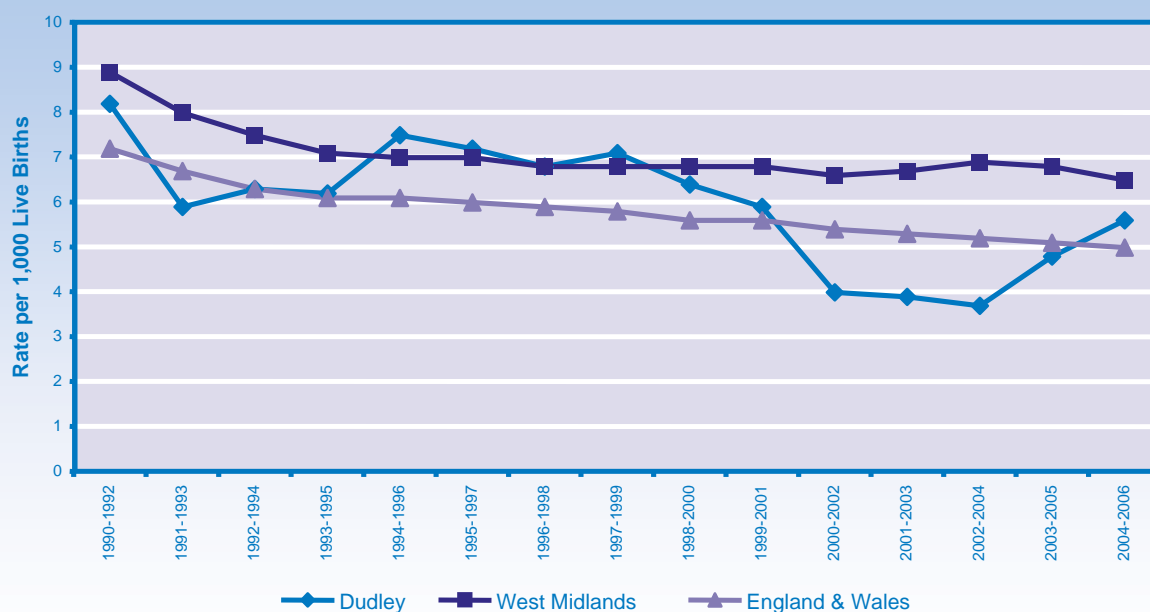
Area	Aged Under 1 year		Aged Under 28 days		Aged Under 7 days	
	Number	Rate per 1,000 Live Births	Number	Rate per 1,000 Live Births	Number	Rate per 1,000 Live Births
ENGLAND AND WALES	3,329	5.0	2,331	3.5	1,750	2.6
WEST MIDLANDS	432	6.4	311	4.6	244	3.6
Dudley	23	6.5	18	5.1	12	3.4
Birmingham	153	9.4	108	6.6	88	5.4
Sandwell	37	8.9	31	7.4	25	6.0
Solihull	12	5.7	6	2.8	5	2.4
Walsall	23	6.4	14	3.9	12	3.3
Wolverhampton	22	6.9	16	5.0	14	4.4

Conception to One

Infant Mortality rate trends, 1990-2006

- The general trend over the last two decades has been downwards.
- Rates dropped below the national average in the early part of the millennium, but have since returned to be in between national and regional rates.

Mortality Rates in Infancy (Aged Under 1) by Year
3-Year Rates, 1990-1992 to 2004-2006



Source: National Centre for Health Outcomes Development (NCHOD) Compendium of Clinical and Health Indicators

Mortality Rates in Infancy (Aged Under 1), 2004-2006

Area	Rate per 1,000 Live Births	Number
ENGLAND & WALES	5.0	9,780
WEST MIDLANDS	6.5	1,302
Dudley	5.6	59
Birmingham	8.6	411
Sandwell	7.8	97
Solihull	4.7	29
Walsall	8.5	89
Wolverhampton	7.3	68



Incidence of Cancers

All Cancers <75
Lung Cancer <75
Colorectal Cancer <75
Female Breast Cancer <75
Cervical Cancer <75
Prostate Cancer <75
Skin Cancer All Ages

Emergency Admissions

Chronic Conditions All Ages
Neuroses All Ages
Schizophrenia All Ages

Hospital Admissions

Accidents All Ages
Accidents 65+
Primary Hip Replacement 65+
Acute Myocardial Infarction 65+
Heart Failure 65+

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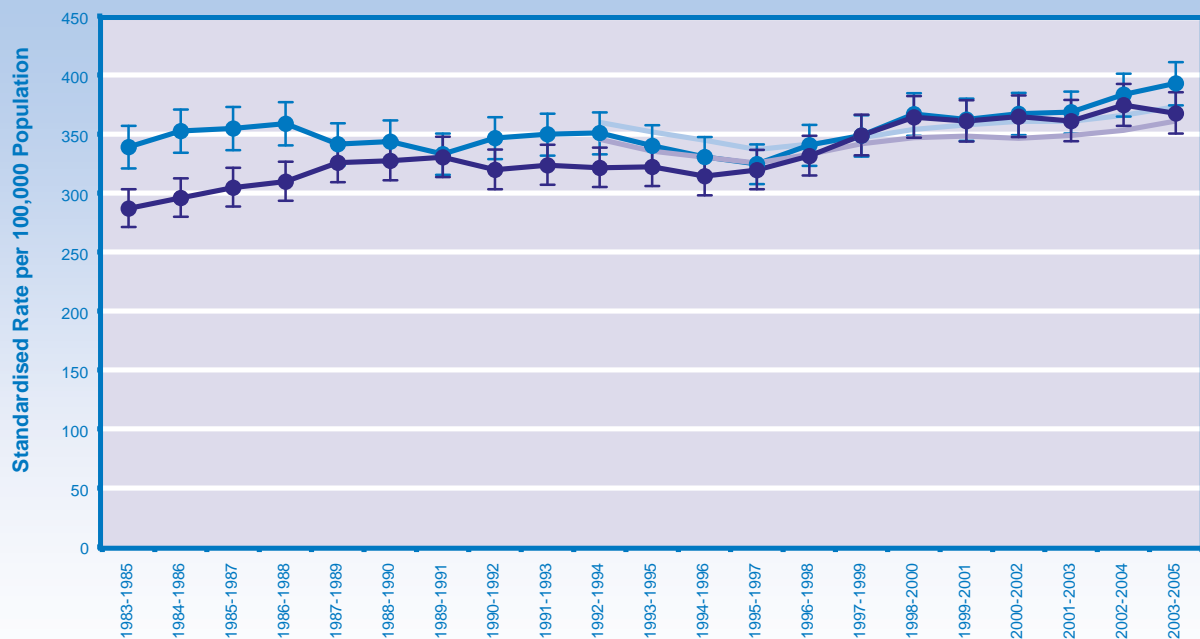
Morbidity

All Cancers — Aged Under 75

(ICD10 C00 to C97)

- The chart shows that the directly standardised incidence rates (DSIR) for all cancers, have been increasing since 1983-1985.
- The gap in incidence rate between males and females has narrowed and all but disappeared in the last ten years, although the most recent years show a slight re-opening of the gap.
- The DSIRs for all cancers in women in Dudley are close to those for England, but the latest years show men in Dudley have significantly higher rates than in England.

Directly Standardised Incidence Rates from All Cancers by Year
3-Year Rates, Dudley, Males & Females Aged Under 75, 1983-1985 to 2003-2005



Source: West Midlands Cancer Intelligence Service
Office for National Statistics (ONS) Cancer Registrations
Office for National Statistics (ONS) Mid-Year Population Estimates

■ Rate with 95% Confidence Interval (Males)
■ Rate with 95% Confidence Interval (Females)
— England Average (Females)
— England Average (Males)

Incidence of All Cancers in people aged under 75

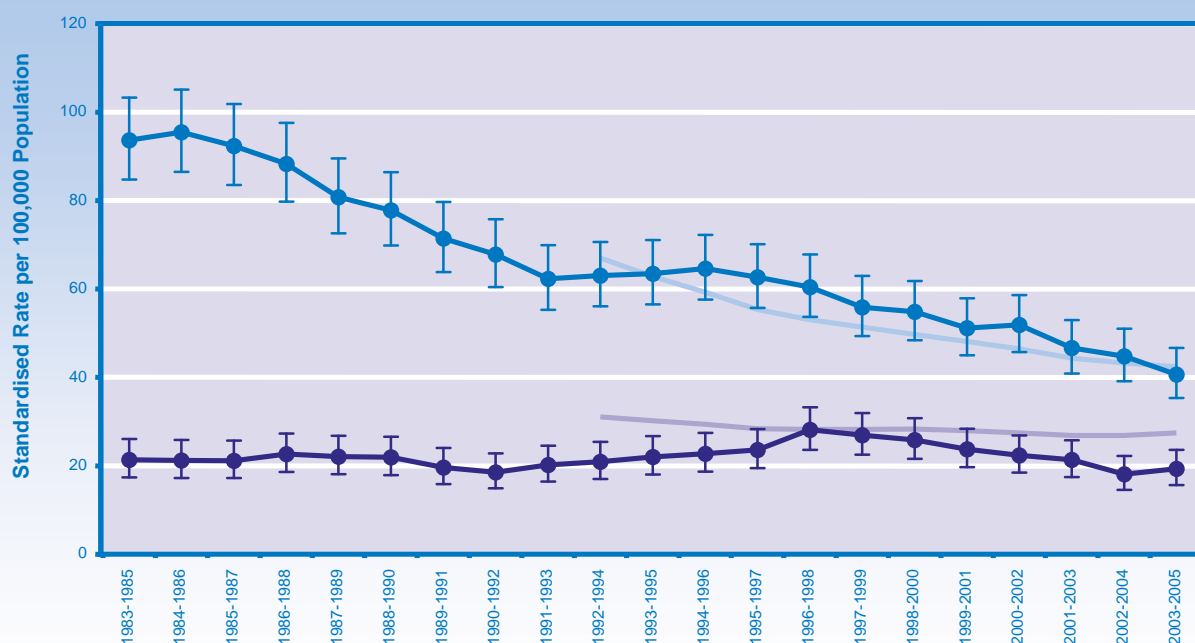
	Number of New Cases			Dudley DSR per 100,000 Population			England DSR per 100,000 Population		
	Males	Females	Total	Males	Females	Total	Males	Females	Total
95-97	1,545	1,488	3,033	324.6 (307.6,341.3)	319.6 (303.3,336.5)	339.3 (327.2,351.7)	336.9	325.6	366.0
96-98	1,619	1,549	3,168	340.6 (323,357.7)	331.4 (314.8,348.5)	354.5 (342.1,367.2)	341.4	332.8	370.9
97-99	1,662	1,643	3,305	348.8 (330.9,366)	348.8 (331.9,366.4)	368.8 (356.2,381.7)	347.1	341.8	377.4
98-00	1,757	1,717	3,474	366.9 (348.5,384.5)	364.2 (347,382.1)	386.7 (373.8,399.9)	354.0	347.0	382.9
99-01	1,751	1,704	3,455	362.5 (344.3,379.9)	360.9 (343.8,378.7)	382.7 (369.9,395.8)	357.7	348.2	384.8
00-02	1,797	1,718	3,515	367.3 (349.1,384.8)	364.7 (347.5,382.6)	386.9 (374.1,400)	360.8	346.3	384.8
01-03	1,813	1,707	3,520	368.5 (350.3,386)	361.1 (343.9,378.9)	385.8 (373,398.9)	360.8	348.7	385.4
02-04	1,898	1,776	3,674	383.6 (364.9,401.3)	374.5 (357,392.5)	400.9 (387.9,414.2)	366.0	353.0	389.2
03-05	1,954	1,757	3,711	393.1 (374.3,411)	367.6 (350.4,385.4)	402.4 (389.4,415.7)	373.1	361.1	396.1

Lung Cancer — Aged Under 75

(ICD10 C33 to C34)

- Lung cancer incidence rates for men have more than halved over the last two decades and continue to decline.
- Incidence rates for women have not changed significantly for twenty years.
- Incidence rates for men are around the national average, but rates for women are significantly lower.

Directly Standardised Incidence Rates from Lung Cancer by Year
3-Year Rates, Dudley, Males & Females Aged Under 75, 1983-1985 to 2003-2005



Source: West Midlands Cancer Intelligence Service
Office for National Statistics (ONS) Cancer Registrations
Office for National Statistics (ONS) Mid-Year Population Estimates

Rate with 95% Confidence Interval — England Average (Females)
 Rate with 95% Confidence Interval — England Average (Males)

Incidence of Lung Cancer in people aged under 75

	Number of New Cases			Dudley DSR per 100,000 Population			England DSR per 100,000 Population		
	Males	Females	Total	Males	Females	Total	Males	Females	Total
95-97	301	116	417	62.3 (55.4,69.8)	23.3 (19.2,28)	44.7 (40.5,49.3)	55.1	28.0	47.1
96-98	290	140	430	60.1 (53.4,67.5)	27.8 (23.3,32.9)	46.3 (41.9,50.9)	52.7	27.9	45.8
97-99	269	134	403	55.6 (49.1,62.6)	26.6 (22.2,31.6)	43.3 (39.2,47.8)	51.1	27.9	44.8
98-00	266	130	396	54.5 (48.1,61.5)	25.6 (21.3,30.4)	42.3 (38.2,46.7)	49.4	28.0	43.9
99-01	252	121	373	50.8 (44.7,57.6)	23.5 (19.4,28.1)	39.2 (35.3,43.4)	47.8	27.6	42.7
00-02	259	114	373	51.6 (45.4,58.3)	22.0 (18.1,26.6)	38.8 (34.9,43)	46.1	27.1	41.3
01-03	234	107	341	46.3 (40.5,52.7)	21.0 (17.2,25.5)	35.5 (31.8,39.5)	44.0	26.6	39.7
02-04	227	90	317	44.5 (38.9,50.7)	17.8 (14.2,21.9)	32.8 (29.2,36.6)	43.0	26.6	38.9
03-05	206	97	303	40.4 (35.4,46.3)	19.0 (15.4,23.3)	31.4 (27.9,35.2)	42.1	27.1	38.5

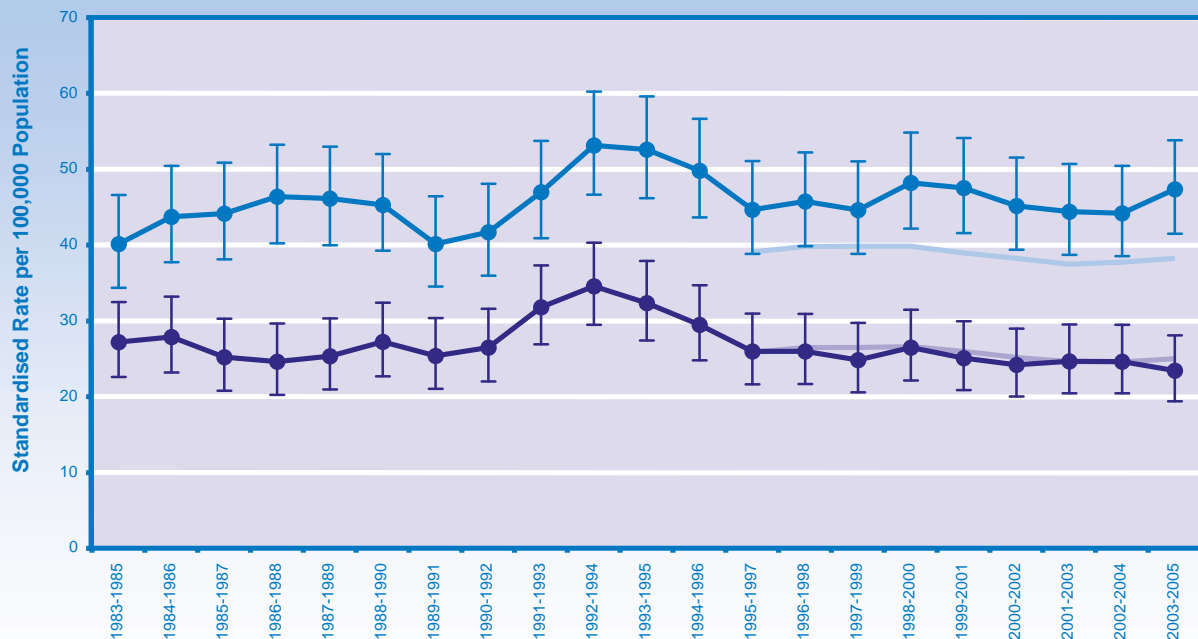
Morbidity

Colorectal Cancer — Aged Under 75

(ICD10 C18 to C20)

- The incidence rate for colorectal cancer in Dudley has remained relatively constant over the last two decades.
- Incidence rates for men are higher than those for women.
- Incidence rates are higher than national rates for men and around the national average for women.

Directly Standardised Incidence Rates from Colorectal Cancer by Year
3-Year Rates, Dudley, Males & Females Aged Under 75, 1983-1985 to 2003-2005



Source: West Midlands Cancer Intelligence Service
Office for National Statistics (ONS) Cancer Registrations
Office for National Statistics (ONS) Mid-Year Population Estimates

● Rate with 95% Confidence Interval (Females) — England Average (Females)
● Rate with 95% Confidence Interval (Males) — England Average (Males)

Incidence of Colorectal Cancer in people aged under 75

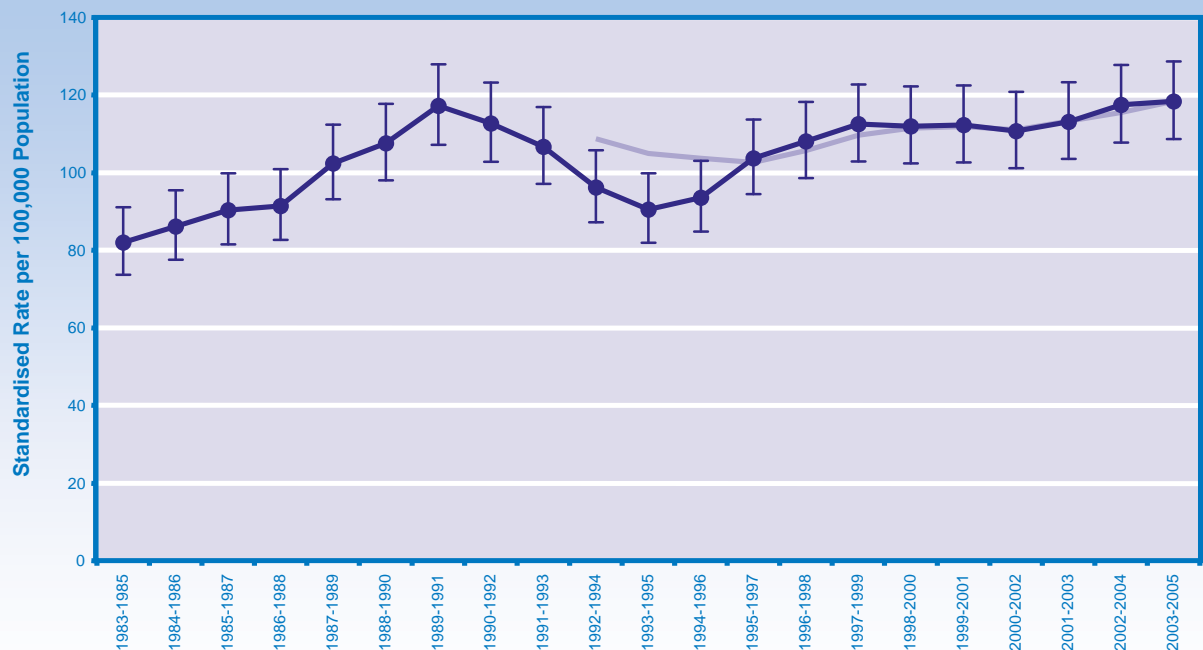
	Number of New Cases			Dudley DSR per 100,000 Population			England DSR per 100,000 Population		
	Males	Females	Total	Males	Females	Total	Males	Females	Total
95-97	213	128	341	44.5 (38.7,51)	25.9 (21.5,30.9)	37.0 (33.2,41.2)	39.0	25.7	36.9
96-98	219	130	349	45.6 (39.8,52.1)	25.9 (21.6,30.8)	37.7 (33.8,41.9)	39.7	26.4	37.4
97-99	214	122	336	44.5 (38.7,50.9)	24.7 (20.5,29.6)	36.6 (32.7,40.7)	39.8	26.4	37.2
98-00	232	133	365	48.1 (42.1,54.7)	26.4 (22,31.3)	39.5 (35.5,43.8)	39.8	26.5	37.2
99-01	230	126	356	47.4 (41.5,54)	25.0 (20.7,29.8)	38.4 (34.5,42.6)	38.9	25.8	36.3
00-02	221	121	342	45.0 (39.3,51.4)	24.1 (19.9,28.9)	36.6 (32.8,40.8)	38.1	25.1	35.4
01-03	220	122	342	44.3 (38.6,50.6)	24.6 (20.3,29.4)	36.4 (32.6,40.5)	37.4	24.5	34.8
02-04	221	123	344	44.1 (38.4,50.3)	24.5 (20.3,29.4)	36.4 (32.6,40.5)	37.7	24.5	34.9
03-05	238	120	358	47.2 (41.4,53.7)	23.3 (19.3,28)	37.4 (33.6,41.5)	38.1	24.9	35.3

Female Breast Cancer — Aged Under 75

(ICD10 C50)

- Amongst women, the incidence of breast cancer is higher in Dudley than any other cancer.
- Overall the incidence of breast cancer has increased steadily over the last two decades. The decline in incidence rates between 1990-1992 and 1993-1995 halted in 1994-1996 and there has been a subsequent increase.
- Incidence rates are very close to the average for England as a whole.

Directly Standardised Incidence Rates from Breast Cancer by Year
3-Year Rates, Dudley, Females Aged Under 75, 1983-1985 to 2003-2005



Source: West Midlands Cancer Intelligence Service
Office for National Statistics (ONS) Cancer Registrations
Office for National Statistics (ONS) Mid-Year Population Estimates

● Rate with 95% Confidence Interval — England Average

Incidence of Breast Cancer in women aged under 75

	Number of New Cases	Dudley	England
		DSR per 100,000 Population	DSR per 100,000 Population
95-97	457	102.6 (93.3,112.6)	102.4
96-98	477	107.3 (97.8,117.5)	105.5
97-99	501	111.6 (102,122)	109.5
98-00	500	111.2 (101.6,121.5)	111.3
99-01	500	111.0 (101.4,121.3)	111.8
00-02	496	109.6 (100,119.8)	110.9
01-03	512	111.3 (101.8,121.5)	113.2
02-04	534	115.0 (105.4,125.3)	115.4
03-05	551	118.3 (108.5,128.7)	118.3

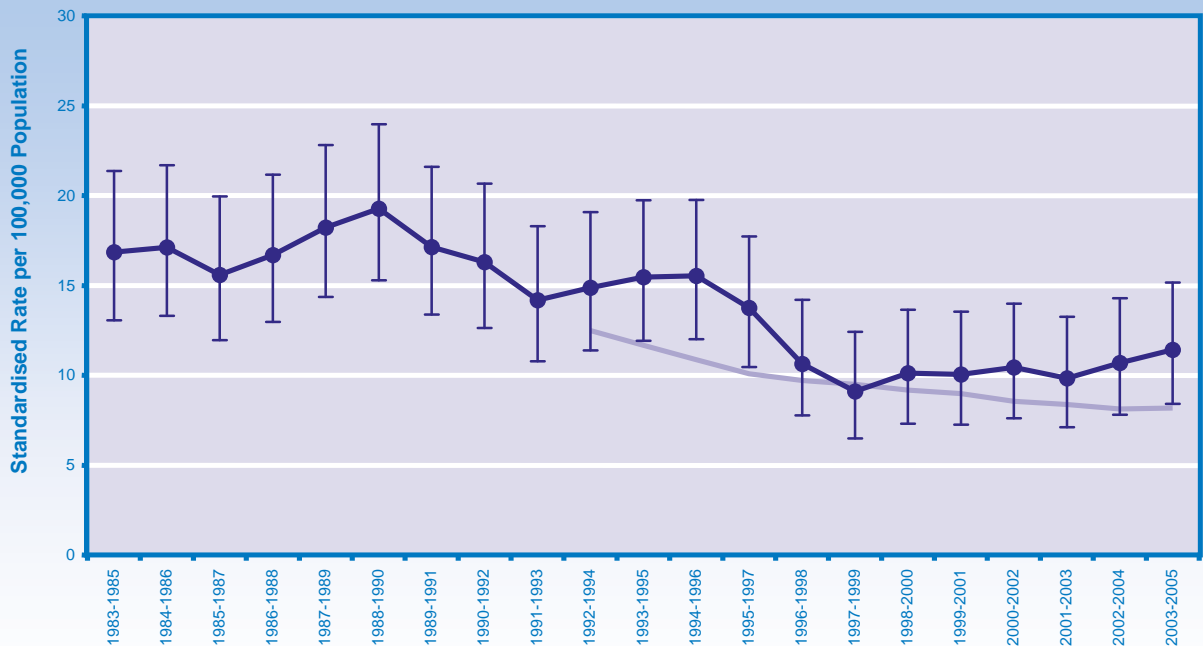
Morbidity

Cervical Cancer — Aged Under 75

(ICD10 C53)

- Incidence rates have decreased in the last twenty years.
- Incidence rates in England continue to decline at a steady rate but this has not been mirrored in Dudley.
- The incidence rate for Dudley came down to that of England five years ago but Dudley now has higher rates.

Directly Standardised Incidence Rates from Cervical Cancer by Year
3-Year Rates, Dudley, Females Aged Under 75, 1983-1985 to 2003-2005



Source: West Midlands Cancer Intelligence Service
Office for National Statistics (ONS) Cancer Registrations
Office for National Statistics (ONS) Mid-Year Population Estimates

● Rate with 95% Confidence Interval — England Average

Incidence of Cervical Cancer in women aged under 75

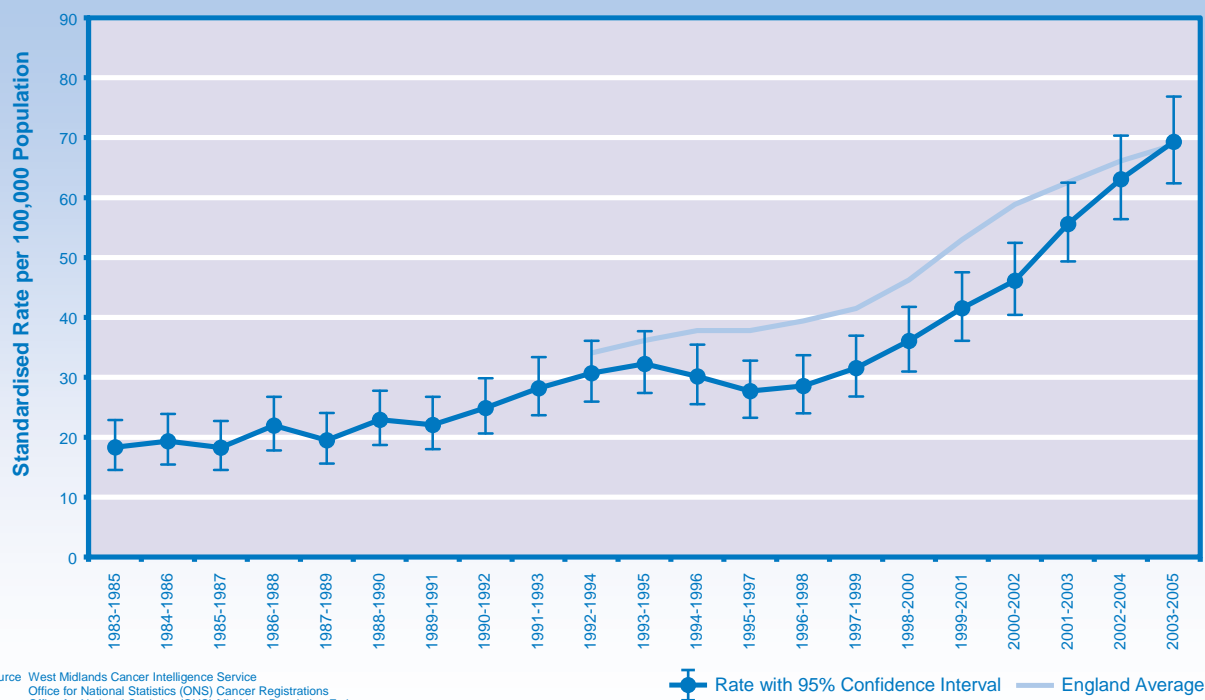
	Number of New Cases	Dudley	England
		DSR per 100,000 Population	DSR per 100,000 Population
95-97	61	13.8 (10.5,17.8)	10.1
96-98	47	10.7 (7.8,14.2)	9.8
97-99	41	9.2 (6.5,12.5)	9.5
98-00	44	10.2 (7.3,13.7)	9.2
99-01	44	10.1 (7.3,13.6)	9.0
00-02	45	10.2 (7.4,13.7)	8.6
01-03	43	9.6 (6.9,13)	8.4
02-04	44	10.0 (7.2,13.5)	8.2
03-05	49	11.5 (8.5,15.2)	8.2

Prostate Cancer — Aged Under 75

(ICD10 C61)

- Prostate cancer now has the highest incidence rate of all the cancers for men under 75.
- Incidence rates are significantly higher than twenty years ago, and have increased rapidly over the last ten years.
- Incidence rates in Dudley are now not significantly different to the England rate, having been lower than average until the last three years.

Directly Standardised Incidence Rates from Prostate Cancer by Year
3-Year Rates, Dudley, Males Aged Under 75, 1983-1985 to 2003-2005



Source: West Midlands Cancer Intelligence Service
Office for National Statistics (ONS) Cancer Registrations
Office for National Statistics (ONS) Mid-Year Population Estimates

● Rate with 95% Confidence Interval — England Average

Incidence of Prostate Cancer in men aged under 75

	Number of New Cases	Dudley	England
		DSR per 100,000 Population	DSR per 100,000 Population
95-97	137	27.7 (23.2,32.8)	37.8
96-98	140	28.6 (24,33.7)	39.4
97-99	156	31.6 (26.8,37)	41.5
98-00	179	35.9 (30.8,41.6)	46.3
99-01	207	40.7 (35.3,46.7)	53.0
00-02	233	45.6 (39.9,51.8)	58.9
01-03	274	53.2 (47.1,59.9)	62.5
02-04	279	54.1 (47.9,60.9)	66.1
03-05	364	69.3 (62.4,76.9)	68.8

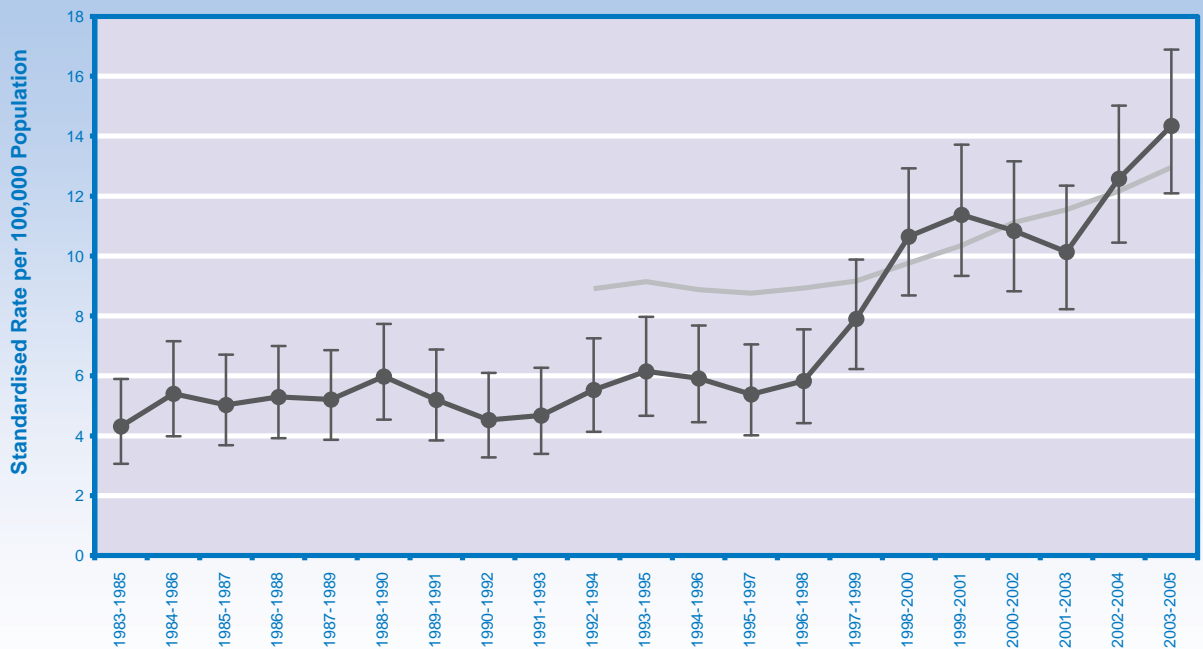
Morbidity

Malignant Melanoma (Skin Cancer) — All Ages

(ICD10 C43)

- Incidence rates from skin cancer have increased by more than 2½ times in Dudley over the last two decades.
- There has been a sharp upturn in the last 8 years data following a relatively constant trend.
- Rates for the latest eight years have oscillated around the England average.

Directly Standardised Incidence Rates from Skin Cancer by Year
3-Year Rates, Dudley, Both Sexes Aged All Ages, 1983-1985 to 2003-2005



Source: West Midlands Cancer Intelligence Service
Office for National Statistics (ONS) Cancer Registrations
Office for National Statistics (ONS) Mid-Year Population Estimates

● Rate with 95% Confidence Interval — England Average

Incidence of Skin Cancer in people of all ages

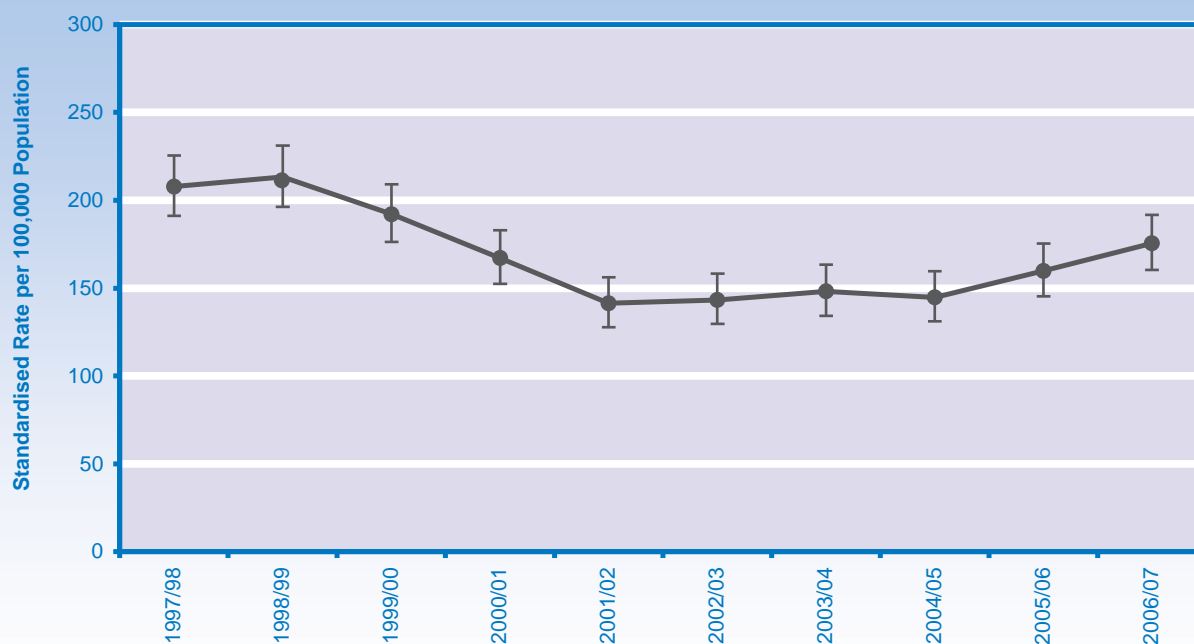
	Number of New Cases	Dudley	England
		DSR per 100,000 Population	DSR per 100,000 Population
95-97	54	5.4 (4,7.1)	8.8
96-98	60	5.8 (4.4,7.6)	8.9
97-99	81	7.9 (6.2,9.9)	9.2
98-00	108	10.7 (8.7,12.9)	9.8
99-01	115	11.4 (9.3,13.7)	10.4
00-02	107	10.8 (8.8,13.2)	11.1
01-03	103	10.1 (8.2,12.3)	11.6
02-04	130	12.6 (10.4,15)	12.2
03-05	153	14.3 (12.1,16.9)	13.0

Emergency Admissions for Chronic Conditions usually managed in Primary Care — All Ages

(ICD10 E10 to E14, J45 to J46)

- The chart shows that the directly standardised rates for emergency admissions for chronic conditions usually managed in primary care, have been declining since 1998/99.
- The rates from 2000/2001 are significantly lower than those for 1998/99 and 1999/00.
- There has been an upturn in the last two years.

Directly Standardised Rates of Emergency Admissions for Chronic Conditions usually managed in Primary Care by Year
Dudley MBC, Both Sexes All Ages, 1997/98 to 2006/07



Source: Hospital Admissions Contract Dataset (CDS)
Office for National Statistics (ONS) Mid-Year Population Estimates

—●— Rate with 95% Confidence Interval

Emergency Admissions for Chronic Conditions usually managed in Primary Care in people of all ages

	Dudley	
	Number of Admissions	DSR per 100,000 Population
97/98	604	207.8 (191.2,225.5)
98/99	618	213.2 (196.3,231.1)
99/00	564	192.2 (176.2,209.1)
00/01	497	167.2 (152.4,183)
01/02	413	141.5 (127.8,156.2)
02/03	424	143.3 (129.5,158.1)
03/04	435	148.2 (134.1,163.3)
04/05	433	144.8 (131,159.6)
05/06	481	159.8 (145.4,175.3)
06/07	525	175.5 (160.4,191.7)

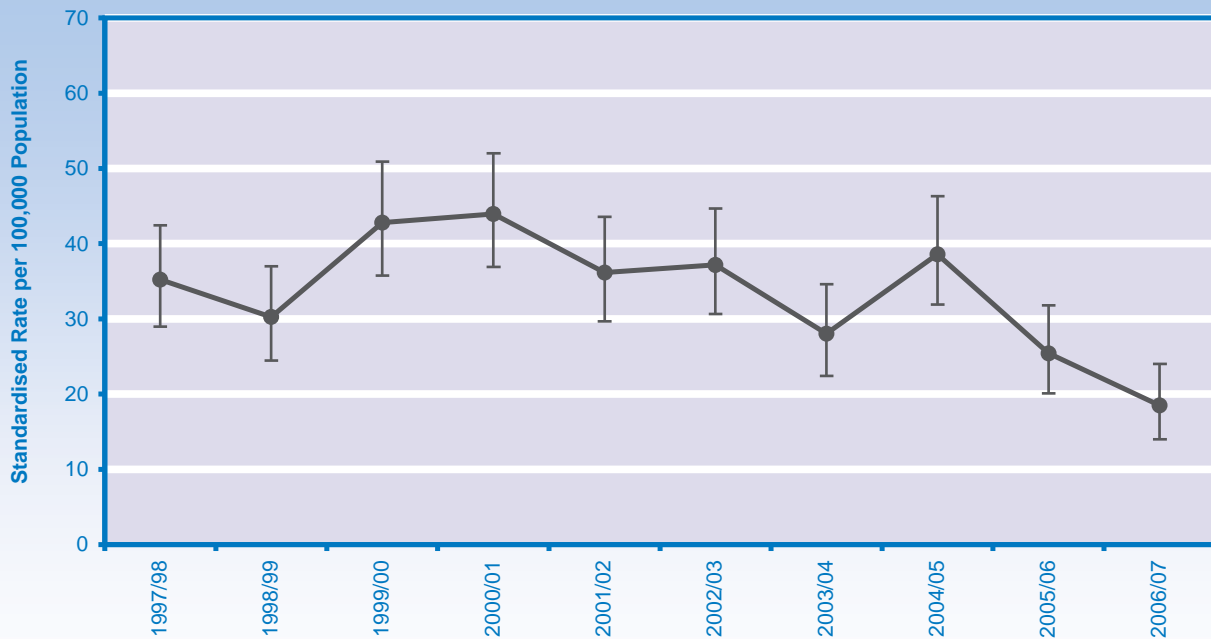
Morbidity

Emergency Admissions for Neuroses* — All Ages (ICD10 F40 to F48)

- The chart shows that the directly standardised rates for emergency admissions for neuroses, were increasing from 1997/98 to 2000/01 when they peaked.
- The rates from 2000/01 to date have declined, and the rate for the 2006/07 year is now significantly lower than the rates recorded from 1997/98 to 2004/05.

* See Glossary

Directly Standardised Rates of Emergency Admissions for Neuroses by Year
Dudley MBC, Both Sexes All Ages, 1997/98 to 2006/07



Source: Hospital Admissions Contract Dataset (CDS)
Office for National Statistics (ONS) Mid-Year Population Estimates

—●— Rate with 95% Confidence Interval

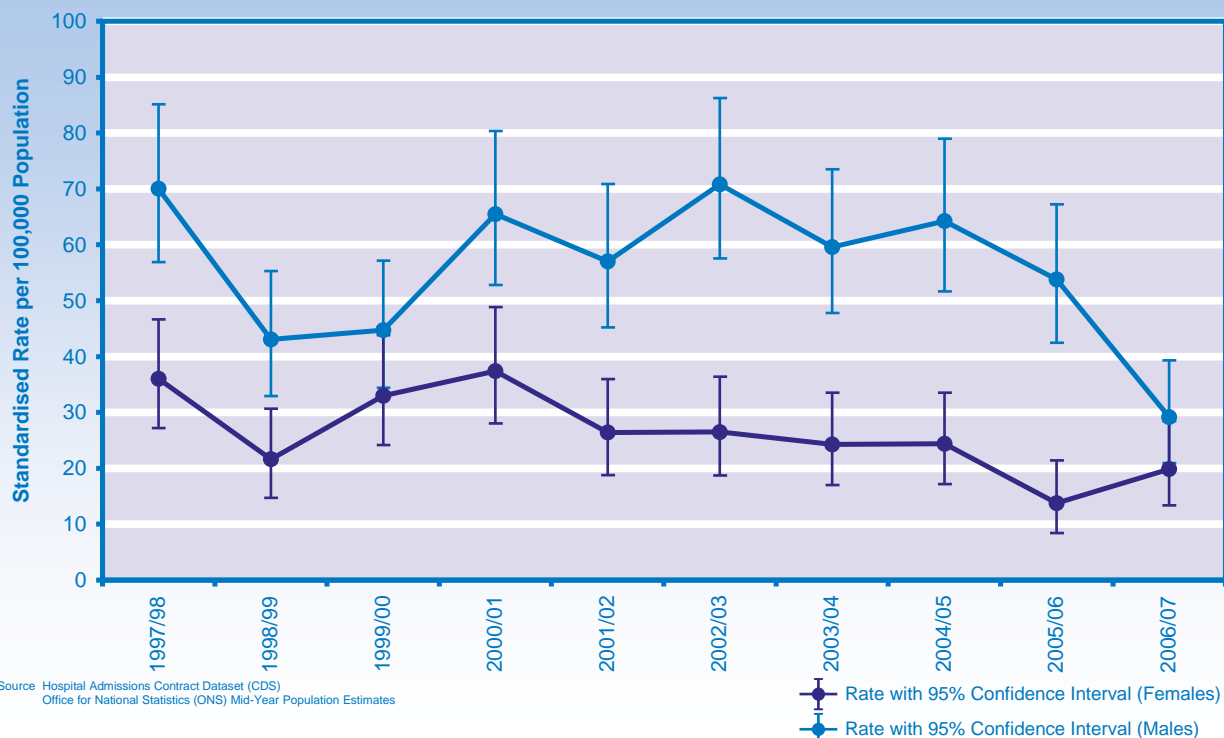
Emergency Admissions for Neuroses in people of all ages

	Dudley	
	Number of Admissions	DSR per 100,000 Population
97/98	115	35.2 (29,42.5)
98/99	99	30.3 (24.5,37)
99/00	136	42.8 (35.7,50.9)
00/01	142	44.0 (36.9,52)
01/02	115	36.2 (29.7,43.6)
02/03	119	37.2 (30.7,44.7)
03/04	91	28.0 (22.4,34.6)
04/05	121	38.6 (31.9,46.3)
05/06	81	25.5 (20.1,31.8)
06/07	60	18.5 (14,24)

Emergency Admissions for Schizophrenia — All Ages (ICD10 F20, F21, F23.2, F25)

- The directly standardised rates for emergency admissions for schizophrenia are significantly higher for males than females across the period shown.
- The rates for females have remained fairly stable over the period.
- The rates for males have decreased in the last two years, leading to a closing of the gap between males and females.

Directly Standardised Rates of Emergency Admissions for Schizophrenia by Year
Dudley MBC, Males & Females All Ages, 1997/98 to 2006/07



Emergency Admissions for Schizophrenia in people of all ages

	Dudley					
	Number of Admissions			DSR per 100,000 Population		
	Males	Females	Total	Males	Females	Total
97/98	103	60	163	70.0 (56.9,85.2)	36.0 (27.2,46.7)	53.3 (45.2,62.3)
98/99	63	33	96	43.1 (32.9,55.3)	21.6 (14.7,30.6)	32.5 (26.2,39.8)
99/00	66	49	115	44.7 (34.4,57.1)	33.0 (24.2,43.9)	38.7 (31.8,46.7)
00/01	95	56	151	65.5 (52.8,80.3)	37.4 (28.1,48.8)	51.2 (43.2,60.2)
01/02	82	41	123	57.0 (45.3,70.9)	26.4 (18.8,36)	41.7 (34.6,49.9)
02/03	101	39	140	70.8 (57.5,86.2)	26.5 (18.7,36.3)	48.5 (40.7,57.3)
03/04	89	37	126	59.6 (47.8,73.5)	24.3 (17,33.6)	41.8 (34.8,49.9)
04/05	92	39	131	64.3 (51.7,79)	24.4 (17.2,33.5)	44.3 (37,52.7)
05/06	79	20	99	53.8 (42.5,67.3)	13.8 (8.4,21.4)	33.8 (27.4,41.2)
06/07	43	30	73	29.1 (21,39.3)	19.9 (13.3,28.5)	24.4 (19.1,30.7)

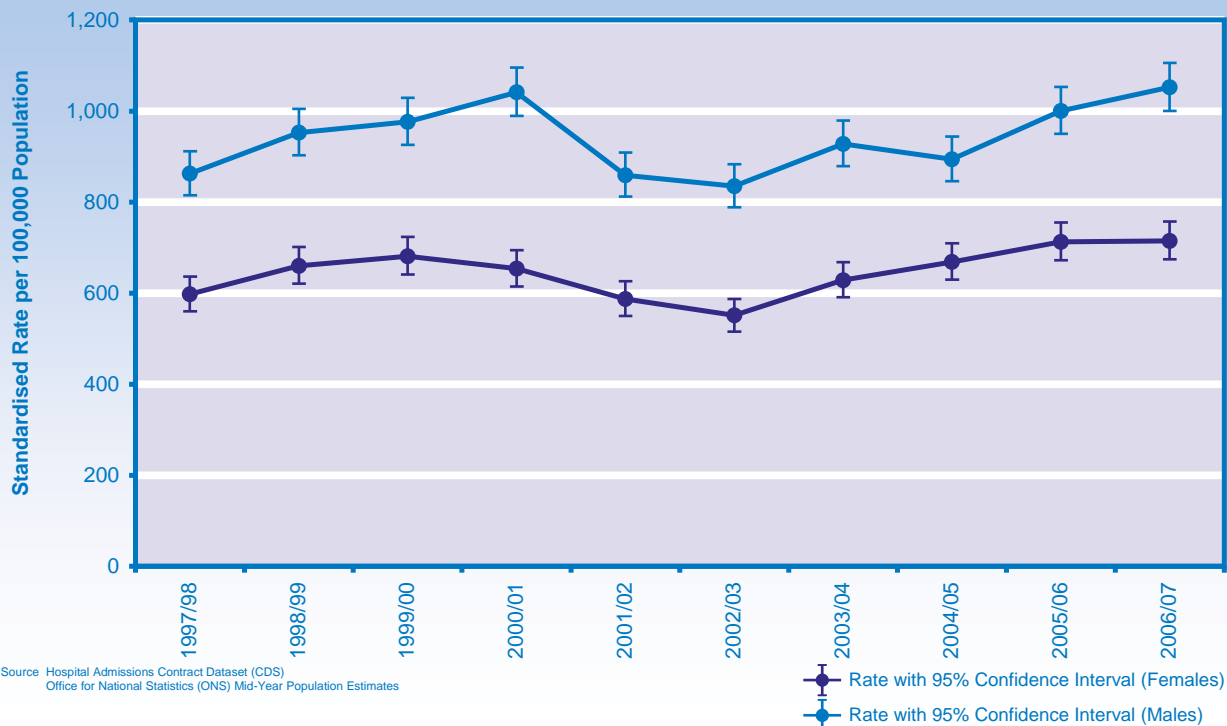
Morbidity

Admissions for Accidents — All Ages

(ICD10 S00 to T98
AND V01 to X59, Y40 to Y84)

- Males have significantly higher directly standardised rates than females for all ages for admissions from accidents.
- The trend over time has remained relatively constant over the period with the exception of the last two years where the rate for males has increased significantly with a resultant widening of the gap between males and females.

Directly Standardised Rates of All Admissions for Accidents by Year
Dudley MBC, Males & Females All Ages, 1997/98 to 2006/07



All Admissions for Accidents in people of all ages

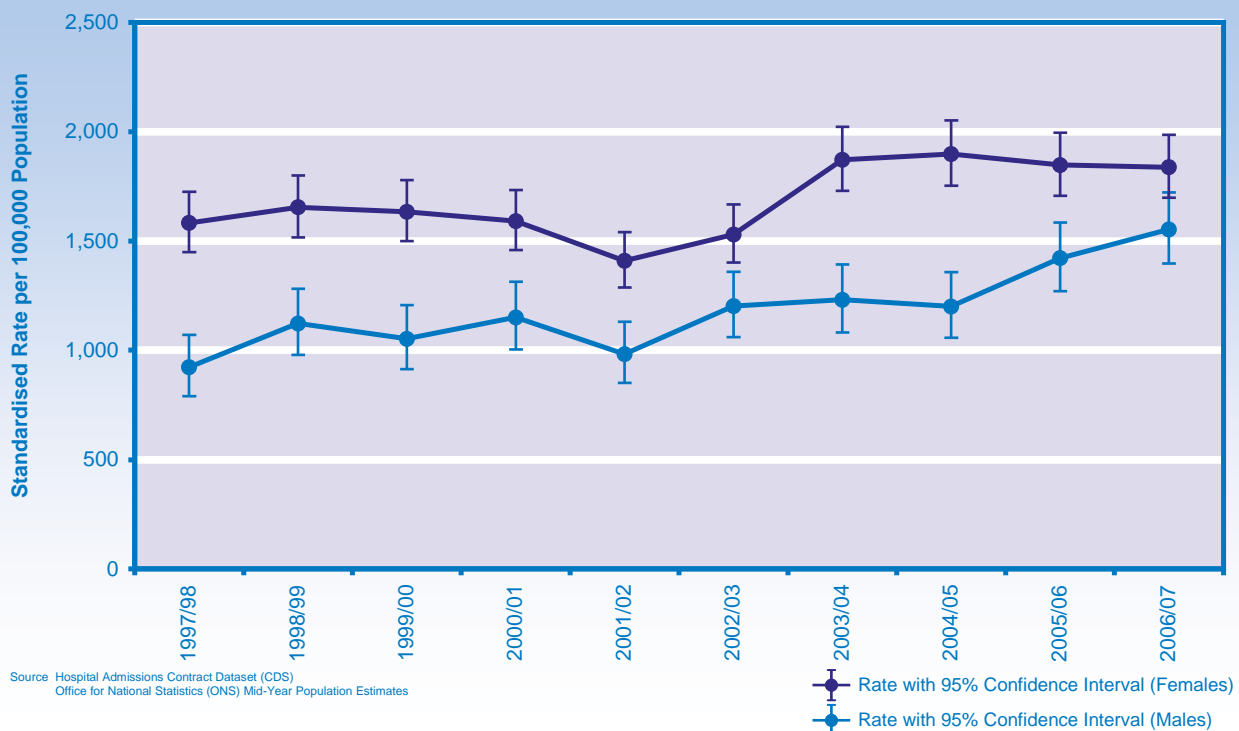
	Dudley						
	Number of Admissions			DSR per 100,000 Population			
	Males	Females	Total	Males	Females	Total	
97/98	1,254	1,130	2,384	862.5 (814.9,912)	597.2 (560.636.1)	743.4 (712.9,774.9)	
98/99	1,393	1,219	2,612	952.4 (902.5,1004.3)	660.4 (620.8,701.7)	817.7 (785.5,850.7)	
99/00	1,420	1,252	2,672	976.6 (925.9,1029.2)	681.5 (641.3,723.5)	842.1 (809.5,875.7)	
00/01	1,517	1,211	2,728	1,041.0 (988.8,1095.2)	653.4 (614.1,694.4)	856.8 (823.9,890.6)	
01/02	1,257	1,107	2,364	859.3 (811.9,908.7)	587.1 (549.8,626.1)	733.1 (702.7,764.5)	
02/03	1,256	1,089	2,345	835.0 (788.7,883.2)	550.9 (515.4,587.9)	703.1 (673.7,733.4)	
03/04	1,370	1,261	2,631	928.2 (879.9,979.4)	628.6 (590.9,667.9)	789.2 (757.9,821.3)	
04/05	1,325	1,313	2,638	894.0 (845.7,944.3)	668.8 (629.6,709.6)	792.0 (760.7,824.3)	
05/06	1,498	1,381	2,879	1,000.4 (949.4,1053.3)	712.7 (671.9,755)	865.4 (832.6,899.1)	
06/07	1,593	1,394	2,987	1,052.1 (1000.1,1106)	714.9 (674.7,757.4)	891.7 (858.4,925.9)	

Admissions for Accidents — Aged 65+

(ICD10 S00 to T98
AND V01 to X59, Y40 to Y84)

- Females have significantly higher directly standardised rates than males in the 65 and over age group for admissions from accidents.
- The trend over time is upward, and the gap between males and females appears to be closing due to the increase in admissions for males.

Directly Standardised Rates of All Admissions for Accidents by Year
Dudley MBC, Males & Females Aged 65+, 1997/98 to 2006/07



All Admissions for Accidents in people Aged 65+

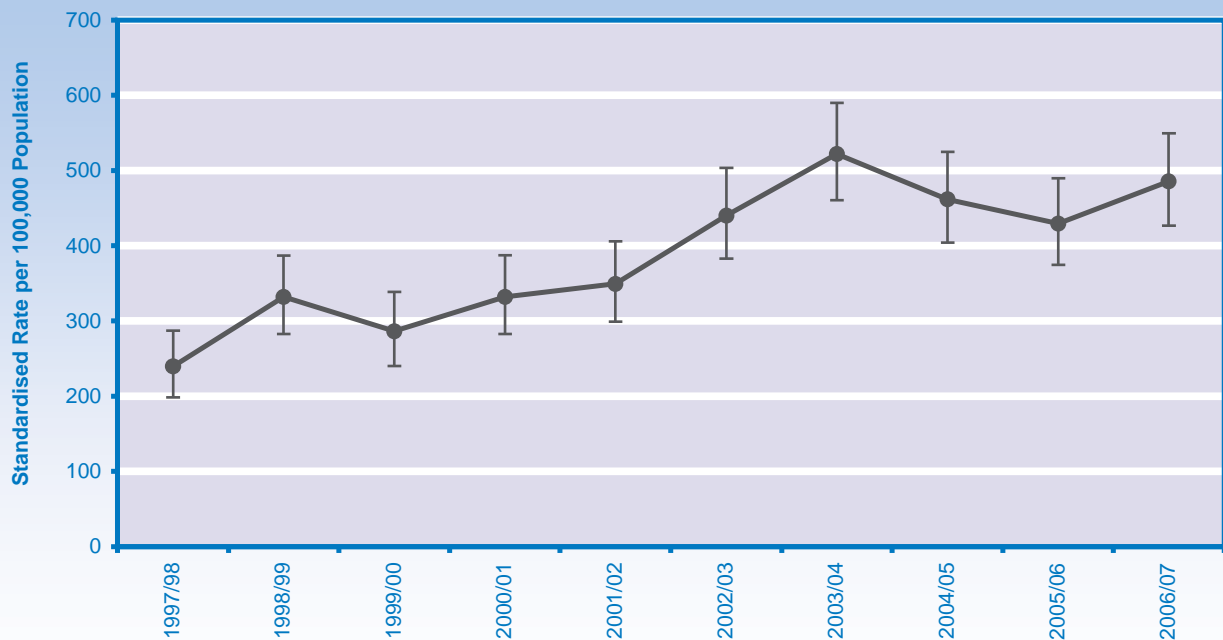
	Dudley						
	Number of Admissions			DSR per 100,000 Population			
	Males	Females	Total	Males	Females	Total	
97/98	182	550	732	923.3 (791.2,1070.7)	1,583.3 (1450,1725)	1,351.1 (1254.3,1453.3)	
98/99	228	569	797	1,123.0 (979.3,1281.4)	1,654.8 (1517.7,1800.5)	1,470.9 (1369.9,1577.2)	
99/00	211	564	775	1,053.0 (913.9,1206.9)	1,635.1 (1499.1,1779.6)	1,439.2 (1338.9,1544.9)	
00/01	230	555	785	1,151.8 (1005.3,1313.1)	1,591.4 (1458.1,1733.1)	1,434.6 (1335.2,1539.3)	
01/02	204	519	723	983.1 (850.3,1130.2)	1,410.5 (1288.1,1540.9)	1,272.8 (1180.7,1370.1)	
02/03	265	559	824	1,202.7 (1060,1358.7)	1,530.8 (1402.1,1667.6)	1,439.3 (1341.4,1542.3)	
03/04	260	678	938	1,231.0 (1083,1393)	1,872.2 (1729.5,2022.9)	1,633.1 (1529,1742.2)	
04/05	264	679	943	1,201.2 (1058.1,1357.8)	1,898.1 (1753,2051.3)	1,625.3 (1521.8,1733.8)	
05/06	328	681	1,009	1,421.5 (1270.5,1585.2)	1,848.2 (1707.5,1996.8)	1,705.6 (1600.7,1815.3)	
06/07	364	692	1,056	1,553.5 (1397.1,1722.1)	1,837.8 (1698,1985.5)	1,752.3 (1646.5,1862.9)	

Morbidity

Admissions for Primary Hip Replacement — Aged 65+ (OPCS 4.3 W37.1,8,9, W38.1,8,9, W39.1,8,9)

- The directly standardised rates for all admissions for primary hip replacements have more than doubled over the last 9 years.
- The trend in rates has levelled in the last three years.

Directly Standardised Rates of All Admissions for Primary Hip Replacement by Year
Dudley MBC, Both Sexes Aged 65+, 1997/98 to 2006/07



Source: Hospital Admissions Contract Dataset (CDS)
Office for National Statistics (ONS) Mid-Year Population Estimates

—●— Rate with 95% Confidence Interval

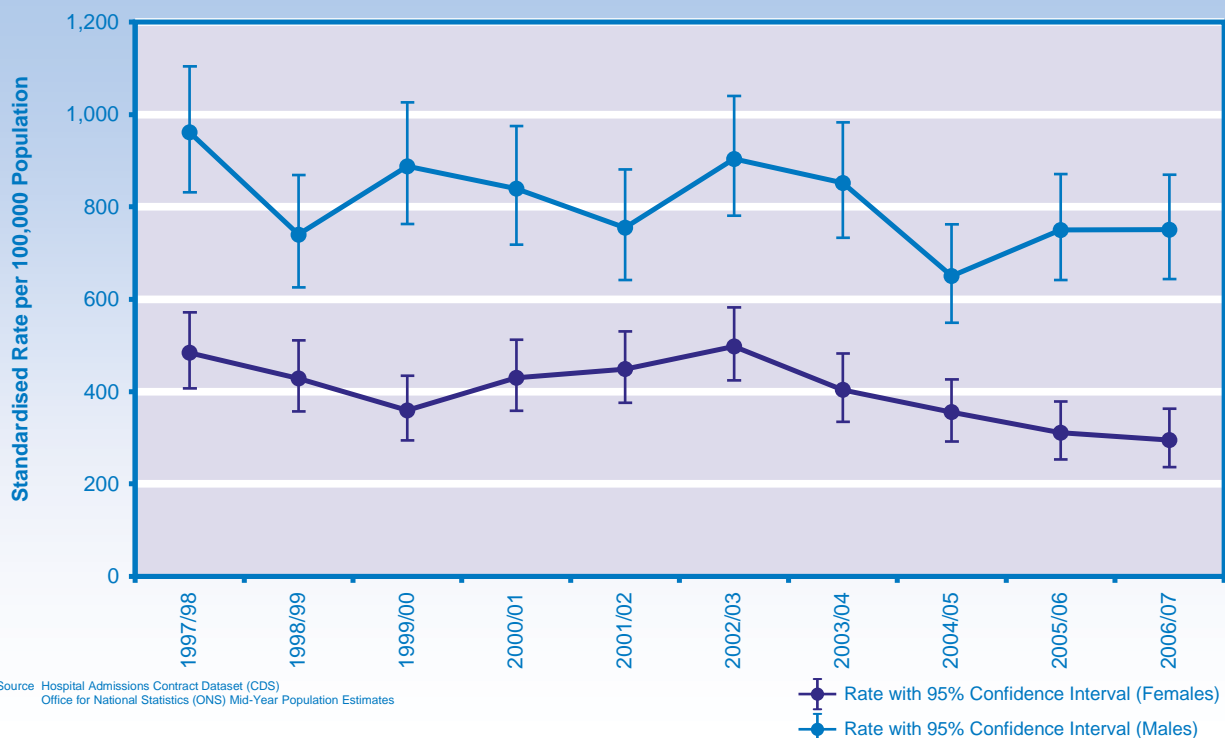
All Admissions for Primary Hip Replacement in people Aged 65+

	Dudley	
	Number of Admissions	DSR per 100,000 Population
97/98	120	239.7 (198.1,287.3)
98/99	167	331.8 (282.7,386.7)
99/00	139	286.3 (240.338.7)
00/01	165	331.9 (282.5,387.4)
01/02	175	349.5 (298.9,406.1)
02/03	220	440.2 (382.9,503.4)
03/04	266	522.3 (460.5,590)
04/05	242	461.7 (404.3,524.9)
05/06	228	429.2 (374.4,489.7)
06/07	255	485.5 (426.6,550)

Admissions for Acute Myocardial Infarction — Aged 65+ (ICD10 I21 to I22)

- The directly standardised rates for all admissions for acute myocardial infarction have significantly declined for males and females over the last two decades.
- The rates for females have remained lower than males over the same period.

Directly Standardised Rates of All Admissions for Acute Myocardial Infarction by Year
Dudley MBC, Males & Females Aged 65+, 1997/98 to 2006/07



All Admissions for Acute Myocardial Infarction in people Aged 65+

	Dudley						
	Number of Admissions			DSR per 100,000 Population			
	Males	Females	Total	Males	Females	Total	
97/98	199	149	348	960.8 (831.1,1104.7)	484.1 (406.7,571.5)	689.4 (618,766.7)	
98/99	153	134	287	739.9 (625.6,868.6)	429.0 (357,510.9)	552.3 (489.4,620.8)	
99/00	184	114	298	887.2 (762.8,1025.8)	359.8 (294.6,434.7)	590.0 (524,661.8)	
00/01	174	136	310	839.2 (717.9,974.7)	430.6 (358.7,512.2)	604.6 (538.2,676.8)	
01/02	163	148	311	754.6 (641.9,881.2)	448.7 (376.5,530.3)	584.1 (519.9,653.8)	
02/03	200	173	373	903.5 (780.7,1039.7)	498.4 (423.9,581.8)	670.0 (602.4,743)	
03/04	189	130	319	851.2 (732.7,983.1)	404.1 (334.9,482.8)	593.6 (529.2,663.6)	
04/05	153	123	276	649.7 (549.6,762.4)	355.1 (292.7,426.4)	488.5 (431.3,551)	
05/06	175	107	282	749.8 (641.7,870.6)	311.2 (252.6,378.8)	498.4 (440.7,561.3)	
06/07	179	99	278	750.2 (643.4,869.3)	295.4 (237.1,363.1)	493.0 (435.4,555.9)	

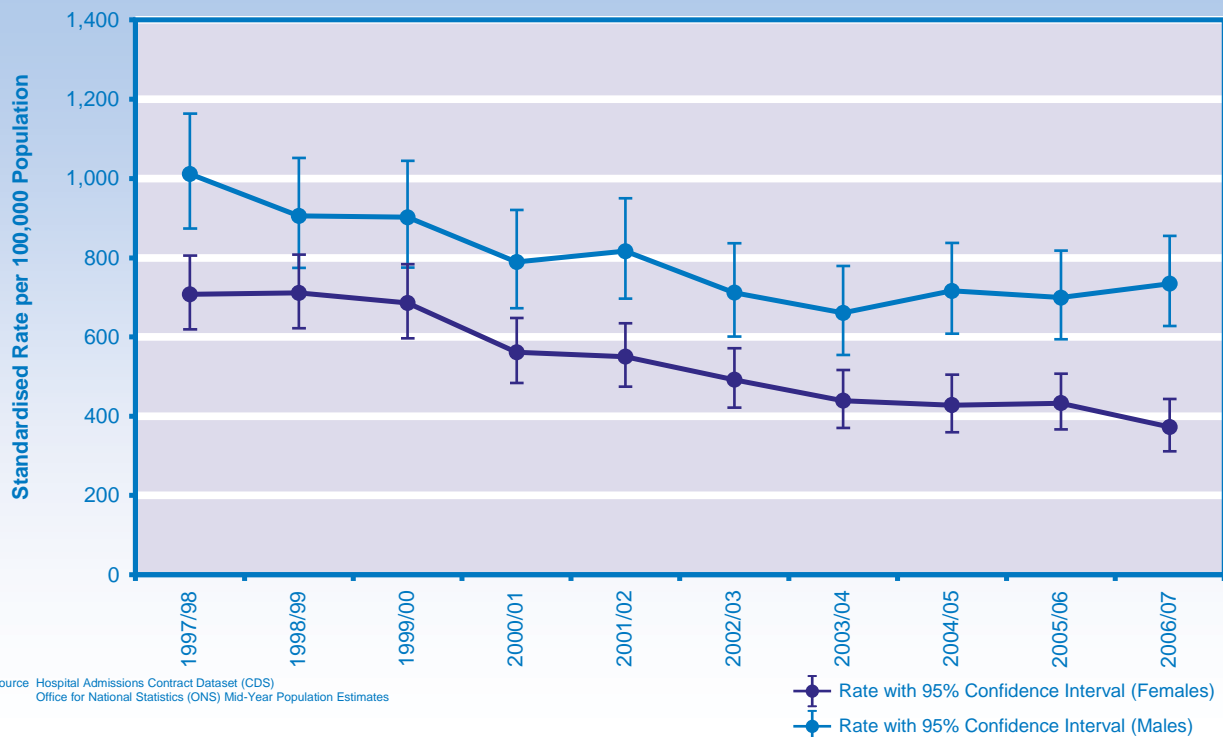
Morbidity

Admissions for Heart Failure — Aged 65+

(ICD10 I50)

- The directly standardised rates for all admissions for heart failure show that rates are higher for males than females.
- The rates for both males and females have declined over the period 1997/98 to 2003/04 and have levelled over the remaining period for men, whilst continuing to decline for women.

Directly Standardised Rates of All Admissions for Heart Failure by Year
Dudley MBC, Males & Females Aged 65+, 1997/98 to 2006/07



All Admissions for Heart Failure in people Aged 65+

	Dudley						
	Number of Admissions			DSR per 100,000 Population			
	Males	Females	Total	Males	Females	Total	
97/98	202	243	445	1,011.2 (873.5, 1,163.8)	708.0 (619.3, 805.5)	814.9 (740.2, 895)	
98/99	179	245	424	905.3 (774.2, 1,051.5)	710.6 (621.9, 808.1)	768.8 (696.6, 846.3)	
99/00	184	228	412	902.5 (774.7, 1,044.9)	685.8 (596.8, 783.9)	761.4 (688.9, 839.3)	
00/01	166	198	364	789.5 (672.2, 920.8)	561.7 (483.7, 648.3)	665.9 (598.4, 738.8)	
01/02	175	203	378	816.8 (697.5, 950.1)	550.2 (474.7, 633.9)	658.1 (592.5, 728.8)	
02/03	154	185	339	711.6 (600.9, 836.2)	492.2 (421.4, 571)	577.0 (516.2, 642.9)	
03/04	147	155	302	660.5 (555.1, 779.6)	439.3 (370.2, 517.1)	519.8 (461.7, 583)	
04/05	164	150	314	716.5 (608.6, 837.5)	427.8 (359.5, 504.8)	541.4 (482.1, 605.8)	
05/06	159	163	322	699.5 (593.7, 818.4)	433.3 (367.1, 507.6)	551.6 (492.6, 616.3)	
06/07	171	140	311	734.6 (627.5, 854.5)	373.2 (311.2, 443.4)	515.8 (458.8, 577.7)	



Life Expectancy at Birth

Mortality from Circulatory Diseases

All Circulatory Diseases <75

CHD <75

Stroke <75

Mortality from Cancers

All Cancers <75

Lung Cancer <75

Colorectal Cancer <75

Female Breast Cancer <75

Cervical Cancer <75

Prostate Cancer <75

Skin Cancer All Ages

Mortality from Accidents

Accidents All Ages

Accidents <15

Accidents 15-24

Accidents 65+

Mortality from Suicides & Undetermined Injury

Mortality from Alcohol Related Diseases

Directly Standardised Rates by Cause

Standardised Mortality Ratios by Cause

Years of Life Lost by Cause

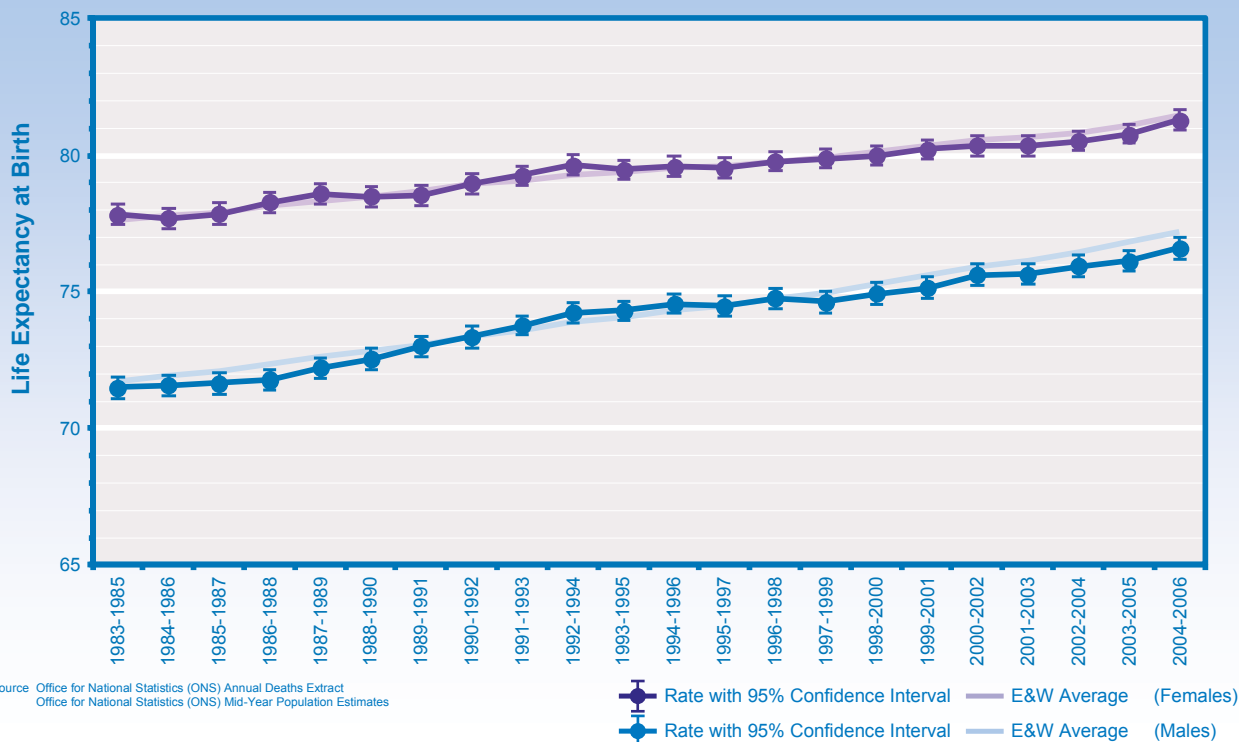
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Mortality

Life Expectancy at Birth

- Life expectancy at birth has risen steadily over the last 20 years and life expectancy at birth is now 4.1 years longer than in 1983-1985.
- The life expectancy for men is 4.8 years lower than that for women and has been so for the last decade.
- The gap to the England & Wales figure has widened slightly in the last few years and Dudley is now just below the national average. This seems to be particularly true for men.

Life Expectancy at Birth by 3-Year Rates, Dudley, Males & Females, 1983-1985 to 2004-2006



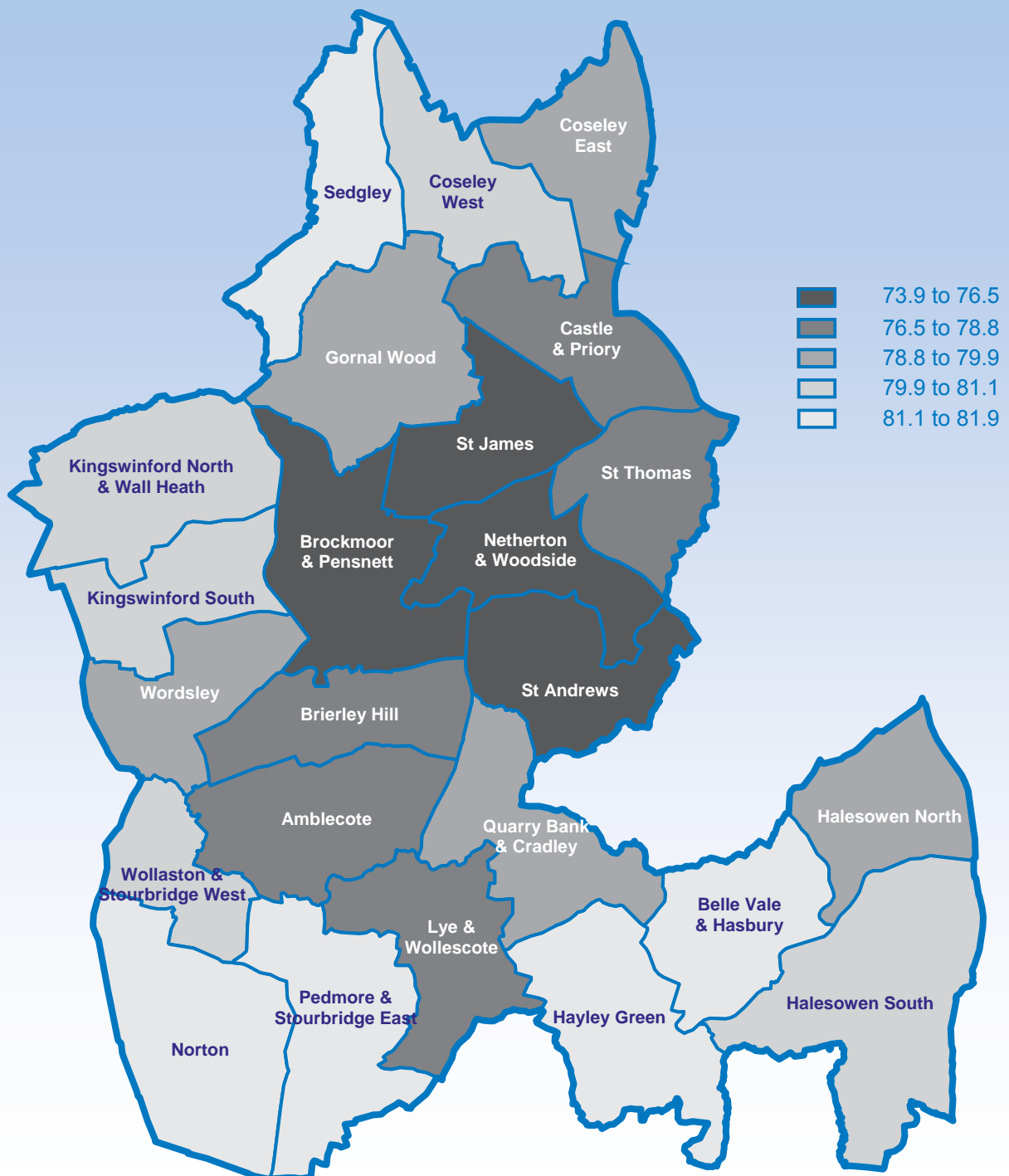
Life Expectancy at Birth

	Dudley			England & Wales		
	Males	Females	Total	Males	Females	Total
95-97	74.5 (74.1,74.9)	79.5 (79.2,79.9)	77.1 (76.8,77.3)	74.5	79.6	77.1
96-98	74.8 (74.4,75.1)	79.8 (79.4,80.2)	77.3 (77.1,77.6)	74.7	79.8	77.3
97-99	74.6 (74.3,75.0)	79.9 (79.5,80.2)	77.3 (77.0,77.6)	75.0	79.9	77.5
98-00	74.9 (74.5,75.3)	80.0 (79.6,80.4)	77.5 (77.2,77.8)	75.3	80.1	77.8
99-01	75.1 (74.8,75.5)	80.2 (79.9,80.6)	77.7 (77.5,78.0)	75.6	80.3	78.0
00-02	75.6 (75.3,76.0)	80.3 (80.0,80.7)	78.0 (77.8,78.3)	75.9	80.6	78.3
01-03	75.7 (75.3,76.1)	80.4 (80.0,80.7)	78.1 (77.8,78.3)	76.1	80.7	78.5
02-04	76.0 (75.6,76.4)	80.5 (80.2,80.9)	78.3 (78.0,78.5)	76.4	80.8	78.7
03-05	76.2 (75.8,76.6)	80.8 (80.4,81.1)	78.5 (78.2,78.8)	76.8	81.1	79.0
04-06	76.6 (76.2,77.0)	81.3 (80.9,81.6)	79.0 (78.7,79.3)	77.2	81.5	79.4

Life Expectancy at Birth by Ward

- Life expectancy at birth varies considerably between wards.
- The lowest life expectancy (St James) is 8.0 years lower than the highest (Norton).
- The life expectancy in the north of the borough is generally lower than in the south.
- St James, Netherton & Woodside, St. Andrews, Castle & Priory, Brierley Hill and Brockmoor & Pensnett and St. Thomas, Amblecote and Lye & Wollescote all have significantly lower life expectancy at birth than the Dudley average.

Life Expectancy at Birth by Ward
3-Year Rates, Dudley, Both Sexes, 2004-2006



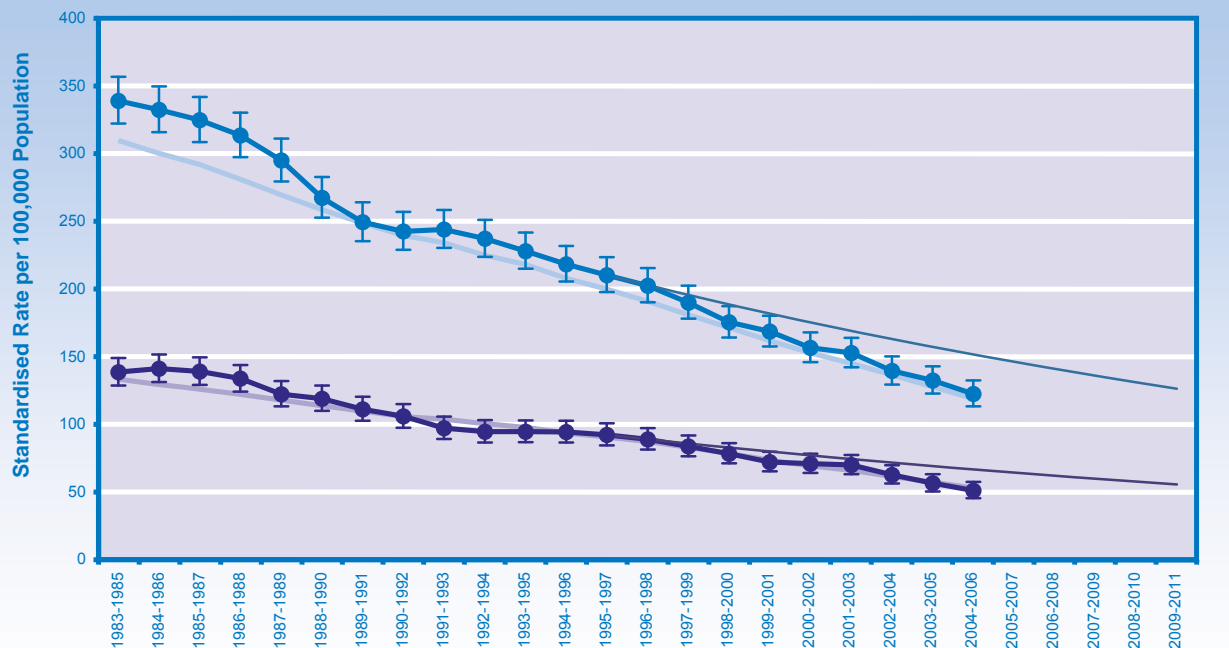
Mortality

All Circulatory Diseases — Aged Under 75

(ICD10 I00 to I99)

- Rates have fallen steadily over the last 20 years and are now 37% of the 1983-1985 rate.
- The rate for men is more than double that for women and has been for the last two decades.
- The gap to the England & Wales rate has been closed and Dudley is now about on the average.
- **The rates for 2004-2006 are already below the target for 2009-2011.**

Directly Standardised Mortality Rates from All Circulatory Diseases by Year
3-Year Rates, Dudley, Males & Females Aged Under 75, 1983-1985 to 2009-2011
Target: Reduce mortality from All Circulatory Diseases by 40% by 2010 from 1996



Source: Office for National Statistics (ONS) Annual Deaths Extract
Office for National Statistics (ONS) Mid-Year Population Estimates

● Rate with 95% Confidence Interval (Males)
 ● Rate with 95% Confidence Interval (Females)
 — Target Trajectory
 — E&W Average (Males)
 — E&W Average (Females)

Mortality from All Circulatory Diseases in people aged under 75

	Number of Deaths			Dudley DSR per 100,000 Population			England & Wales DSR per 100,000 Population		
	Males	Females	Total	Males	Females	Total	Males	Females	Total
95-97	1,045	529	1,574	210.0 (197.4,223.2)	91.9 (84.1,100.2)	148.6 (141.2,156.2)	199.5	90.1	142.1
96-98	1,011	504	1,515	202.2 (189.8,215.1)	88.6 (80.9,96.8)	143.1 (135.9,150.5)	190.5	86.9	136.3
97-99	959	473	1,432	189.6 (177.7,202.0)	83.4 (75.9,91.4)	134.3 (127.4,141.5)	180.7	82.6	129.5
98-00	895	445	1,339	175.1 (163.8,187.1)	77.9 (70.7,85.6)	124.7 (118.0,131.6)	171.2	78.0	122.6
99-01	866	410	1,276	168.3 (157.2,179.9)	71.8 (64.9,79.2)	118.4 (111.9,125.1)	161.4	73.1	115.5
00-02	806	401	1,207	156.3 (145.7,167.6)	70.6 (63.7,77.9)	112.0 (105.7,118.6)	152.4	68.9	109.0
01-03	783	395	1,178	152.4 (141.9,163.6)	69.6 (62.8,77.0)	109.9 (103.6,116.4)	144.6	65.5	103.6
02-04	717	357	1,074	139.1 (129.0,149.7)	62.3 (55.9,69.3)	99.8 (93.9,106.0)	136.1	61.1	97.3
03-05	686	321	1,007	132.1 (122.3,142.5)	56.0 (50.0,62.6)	93.2 (87.4,99.2)	127.3	56.8	90.9
04-06	637	293	930	122.2 (112.8,132.2)	50.7 (44.9,56.9)	85.6 (80.2,91.4)	118.6	52.5	84.5
2010 Target				126.0	55.1	89.1			

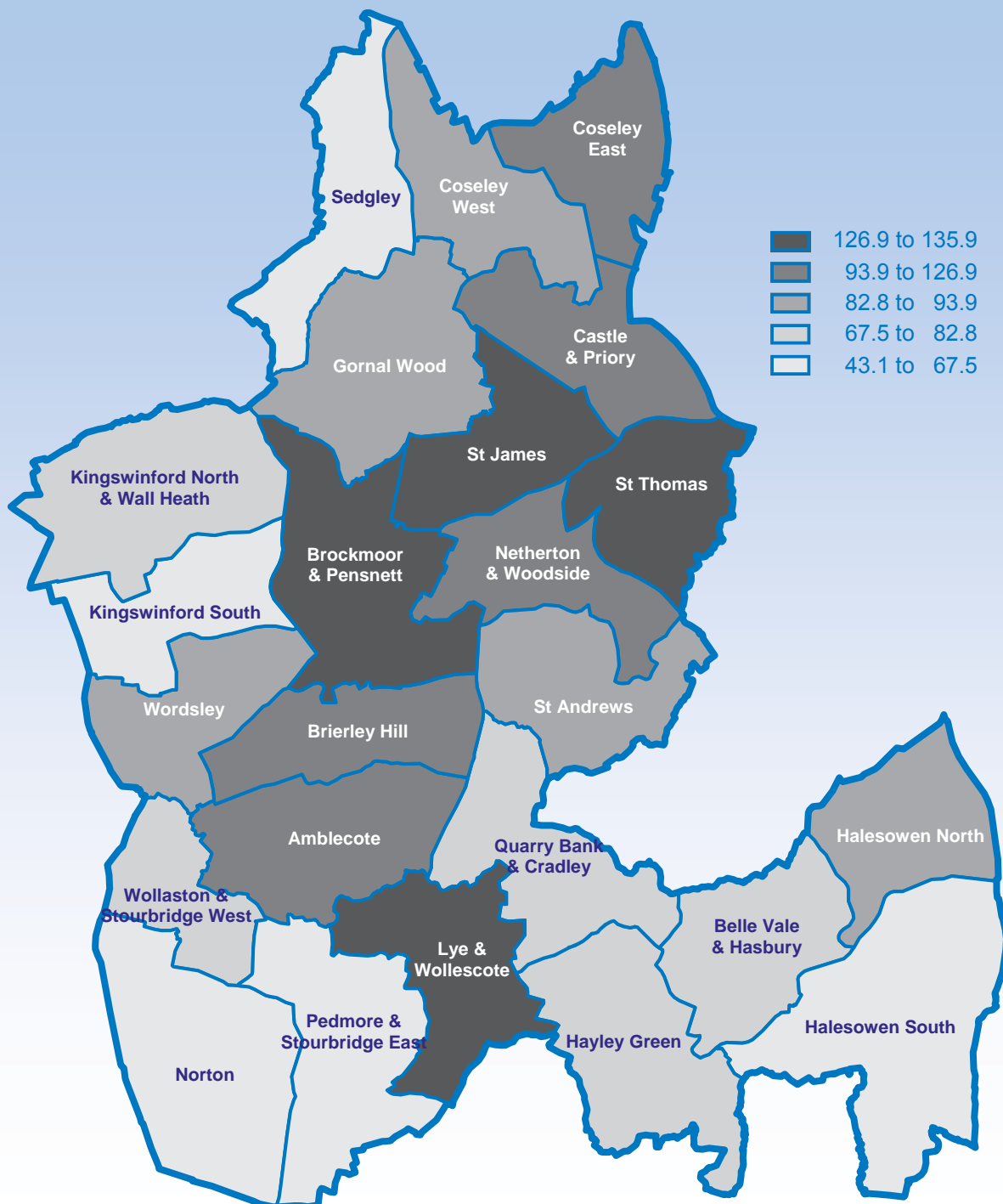
Mortality

All Circulatory Diseases — Aged Under 75

(ICD10 I00 to I99)

- Rates vary considerably between wards.
- The highest rate (Lye & Wollescote) is more than 3 times the lowest (Sedgley).
- The rates in the north of the borough are generally higher than in the south.
- Lye & Wollescote, St Thomas, Brockmoor & Pensnett and St James all have significantly higher rates than the Dudley average.
- The rates have fallen in all areas since the last three-year period

Directly Standardised Mortality Rates from All Circulatory Diseases by Ward
3-Year Rates, Dudley, Both Sexes Aged Under 75, 2004-2006



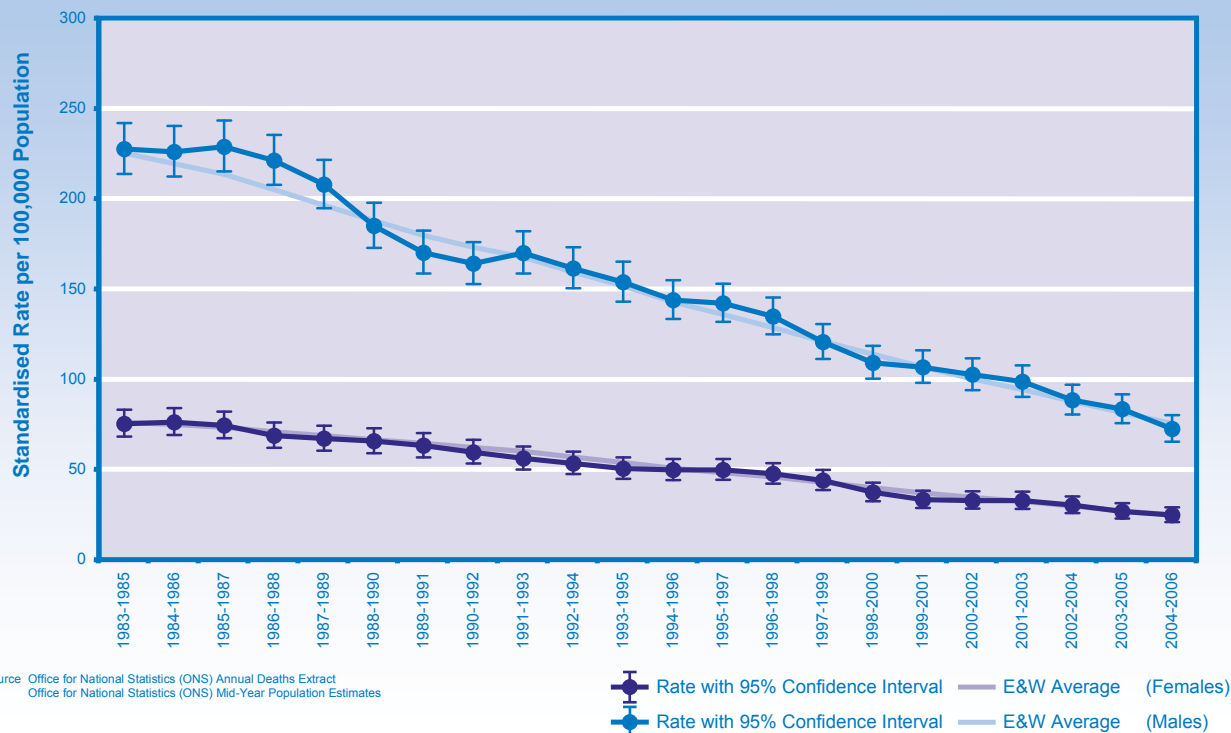
Mortality

Coronary Heart Disease (CHD) — Aged Under 75

(ICD10 I20 to I25)

- CHD is the biggest single cause of death within circulatory diseases.
- Rates have come down steadily and rapidly over the last two decades.
- Rates are now around 32% of what they were in 1983-1985.
- Rates for men have been consistently about 3 times the rates for women.
- Rates in Dudley have consistently been very close to the national average.

Directly Standardised Mortality Rates from CHD by Year
3-Year Rates, Dudley, Males & Females Aged Under 75, 1983-1985 to 2004-2006



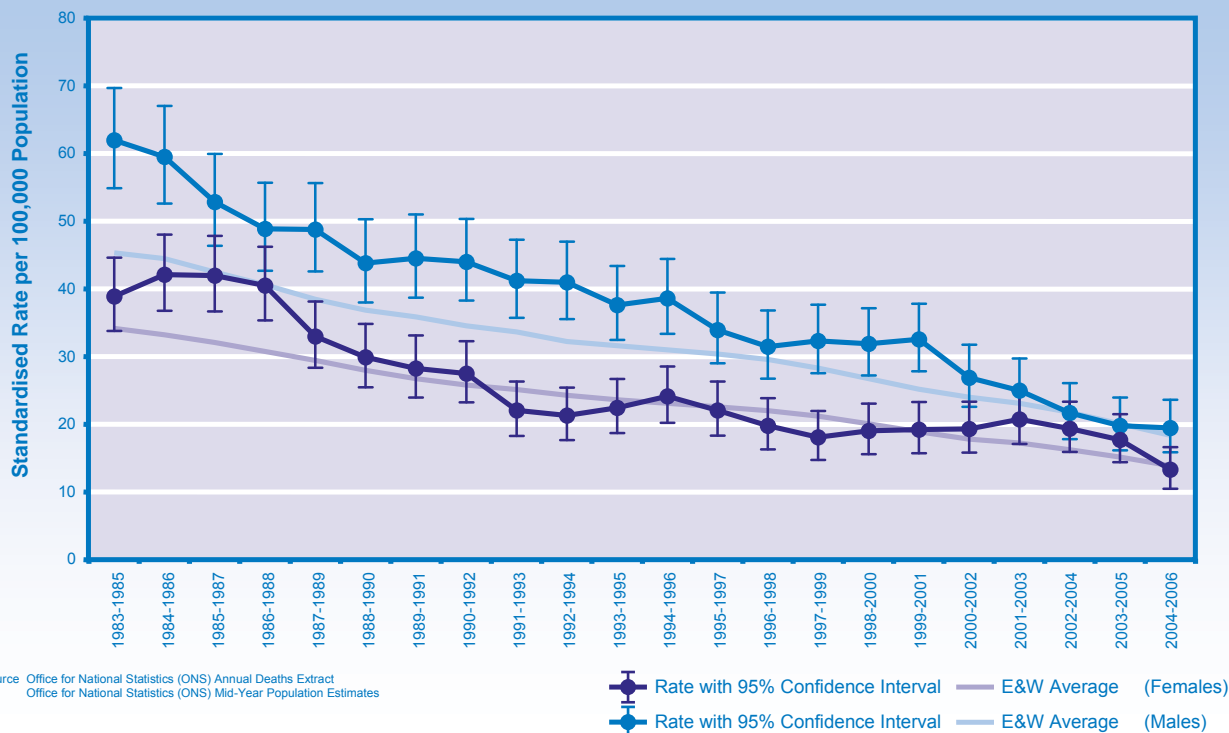
Mortality from CHD in people aged under 75

	Number of Deaths			Dudley DSR per 100,000 Population			England & Wales DSR per 100,000 Population		
	Males	Females	Total	Males	Females	Total	Males	Females	Total
95-97	706	290	996	141.9 (131.6,152.9)	49.2 (43.6,55.3)	93.7 (87.9,99.8)	135.7	47.5	89.5
96-98	674	272	946	134.6 (124.6,145.3)	47.0 (41.4,53.0)	89.0 (83.4,94.9)	128.5	45.2	85.0
97-99	611	247	859	120.4 (111.0,130.4)	43.3 (38.0,49.1)	80.3 (74.9,85.9)	120.8	42.2	79.8
98-00	555	212	768	108.8 (99.9,118.3)	36.6 (31.8,42.0)	71.4 (66.4,76.7)	113.6	39.3	74.9
99-01	545	188	733	106.4 (97.6,115.8)	32.5 (28.0,37.6)	68.3 (63.4,73.5)	106.5	36.3	70.0
00-02	524	185	709	102.2 (93.6,111.4)	32.1 (27.6,37.1)	66.1 (61.3,71.2)	99.8	33.9	65.6
01-03	502	184	686	98.3 (89.8,107.4)	32.0 (27.5,37.1)	64.4 (59.6,69.4)	93.8	31.7	61.7
02-04	452	170	622	88.0 (80.0,96.6)	29.5 (25.2,34.4)	58.1 (53.6,62.9)	87.3	29.0	57.2
03-05	428	150	578	83.0 (75.2,91.3)	26.1 (22.0,30.7)	53.9 (49.5,58.5)	81.1	26.3	52.8
04-06	376	139	515	72.0 (64.8,79.7)	24.0 (20.1,28.4)	47.4 (43.4,51.7)	74.9	24.0	48.6

Cerebrovascular Disease (Stroke) — Aged Under 75 (ICD10 I60 to I69)

- Rates have decreased by over two thirds since 1983-1985.
- Rates for men have come closer to those for women in the last 20 years.
- Compared to England & Wales, rates for both men and women in Dudley are now about the same, having been much higher previously.

Directly Standardised Mortality Rates from Stroke by Year
3-Year Rates, Dudley, Males & Females Aged Under 75, 1983-1985 to 2004-2006



Mortality from Stroke in people aged under 75

	Number of Deaths			Dudley DSR per 100,000 Population			England & Wales DSR per 100,000 Population		
	Males	Females	Total	Males	Females	Total	Males	Females	Total
95-97	170	126	296	33.8 (28.9,39.3)	21.9 (18.2,26.2)	27.6 (24.5,31.0)	30.3	22.5	26.1
96-98	157	114	271	31.3 (26.6,36.7)	19.7 (16.2,23.7)	25.4 (22.4,28.6)	29.5	21.9	25.5
97-99	164	103	267	32.2 (27.4,37.5)	18.0 (14.6,21.8)	24.8 (21.8,28.0)	28.2	21.1	24.4
98-00	166	108	274	31.8 (27.1,37.0)	18.9 (15.4,22.9)	25.0 (22.1,28.2)	26.6	19.9	23.1
99-01	171	108	279	32.4 (27.7,37.7)	19.1 (15.6,23.2)	25.4 (22.5,28.6)	25.0	18.8	21.8
00-02	139	109	248	26.8 (22.5,31.6)	19.2 (15.7,23.2)	22.8 (20.0,25.9)	23.9	17.7	20.6
01-03	129	116	245	24.9 (20.7,29.6)	20.6 (17.0,24.8)	22.6 (19.8,25.7)	23.0	17.1	19.9
02-04	112	111	223	21.5 (17.7,26.0)	19.2 (15.8,23.2)	20.4 (17.7,23.2)	21.7	16.1	18.8
03-05	105	102	207	19.7 (16.0,23.8)	17.6 (14.3,21.4)	18.6 (16.1,21.3)	20.0	15.1	17.4
04-06	103	78	181	19.3 (15.8,23.5)	13.2 (10.4,16.5)	16.2 (13.9,18.8)	18.2	13.8	15.9

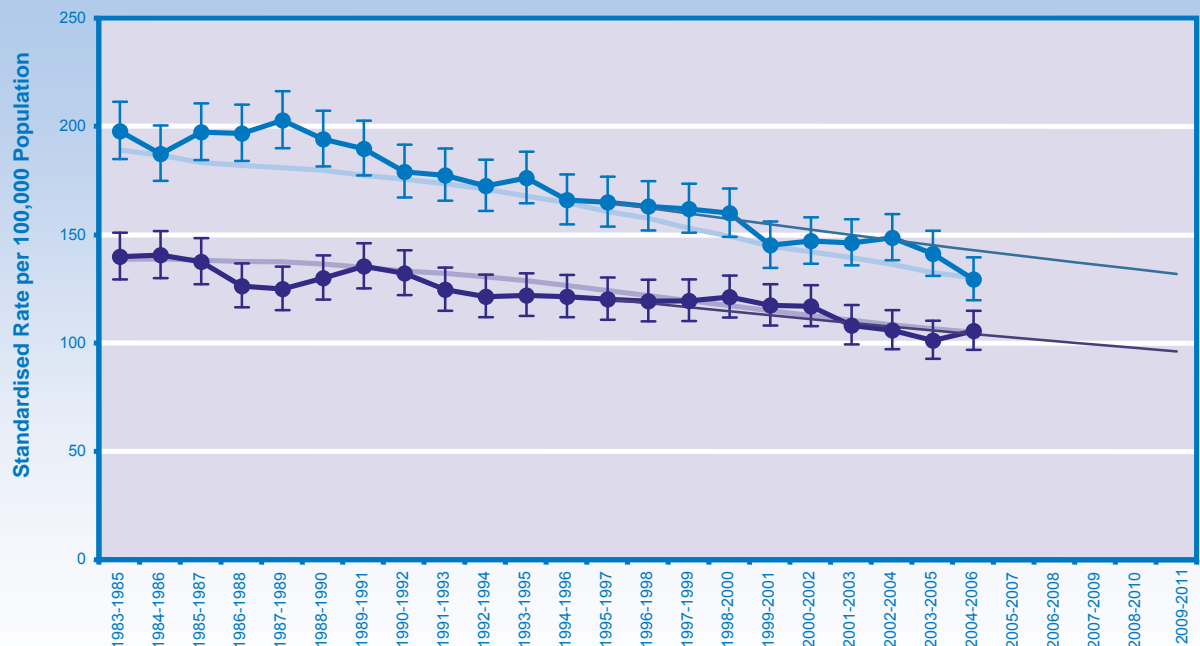
Mortality

All Cancers — Aged Under 75

(ICD10 C00 to C97)

- More people aged under 75 in Dudley now die of cancers than of circulatory diseases.
- Rates have fallen over the last 20 years but more slowly than for circulatory diseases.
- Rates for men have generally been slightly higher and for women slightly lower than nationally, but the latest year shows both very close to the national average.
- Since 1995-1997 rates have fallen at least in line with the target of a 20% reduction by 2010.
- **The current trajectory will achieve target before 2009-2011.**

Directly Standardised Mortality Rates from All Cancers by Year
3-Year Rates, Dudley, Males & Females Aged Under 75, 1983-1985 to 2009-2011
Target: Reduce mortality from All Cancers by 20% by 2010 from 1996



Source: Office for National Statistics (ONS) Annual Deaths Extract
Office for National Statistics (ONS) Mid-Year Population Estimates

● Rate with 95% Confidence Interval (Females) — Target Trajectory (Females) — E&W Average (Females)
● Rate with 95% Confidence Interval (Males) — Target Trajectory (Males) — E&W Average (Males)

Mortality from All Cancers in people aged under 75

	Number of Deaths			Dudley DSR per 100,000 Population			England & Wales DSR per 100,000 Population		
	Males	Females	Total	Males	Females	Total	Males	Females	Total
95-97	817	625	1,442	165.2 (154.0,176.9)	120.5 (111.0,130.5)	141.1 (133.8,148.6)	161.3	124.8	141.6
96-98	812	623	1,435	163.3 (152.2,175.0)	119.5 (110.2,129.5)	139.8 (132.6,147.3)	158.5	122.6	139.2
97-99	810	628	1,438	162.1 (151.1,173.7)	119.7 (110.4,129.6)	139.6 (132.4,147.1)	153.9	120.0	135.8
98-00	805	638	1,443	160.1 (149.2,171.6)	121.4 (112.1,131.4)	139.6 (132.4,147.1)	150.2	117.7	132.8
99-01	732	619	1,351	145.3 (134.9,156.3)	117.6 (108.3,127.3)	130.6 (123.7,137.8)	145.5	115.4	129.5
00-02	749	617	1,366	147.3 (136.9,158.3)	117.2 (108.0,126.9)	131.3 (124.3,138.5)	142.8	113.4	127.2
01-03	750	573	1,323	146.4 (136.0,157.3)	108.4 (99.5,117.8)	126.5 (119.7,133.5)	140.0	111.1	124.8
02-04	773	560	1,333	148.8 (138.4,159.7)	106.1 (97.4,115.4)	126.3 (119.5,133.3)	136.9	109.0	122.2
03-05	737	537	1,274	141.4 (131.3,152.0)	101.4 (92.9,110.5)	120.4 (113.8,127.3)	133.1	107.1	119.4
04-06	680	561	1,241	129.6 (120.0,139.8)	105.8 (97.1,115.1)	116.8 (110.4,123.6)	130.3	105.3	117.2
2010 Target				132.1	96.4	112.9			

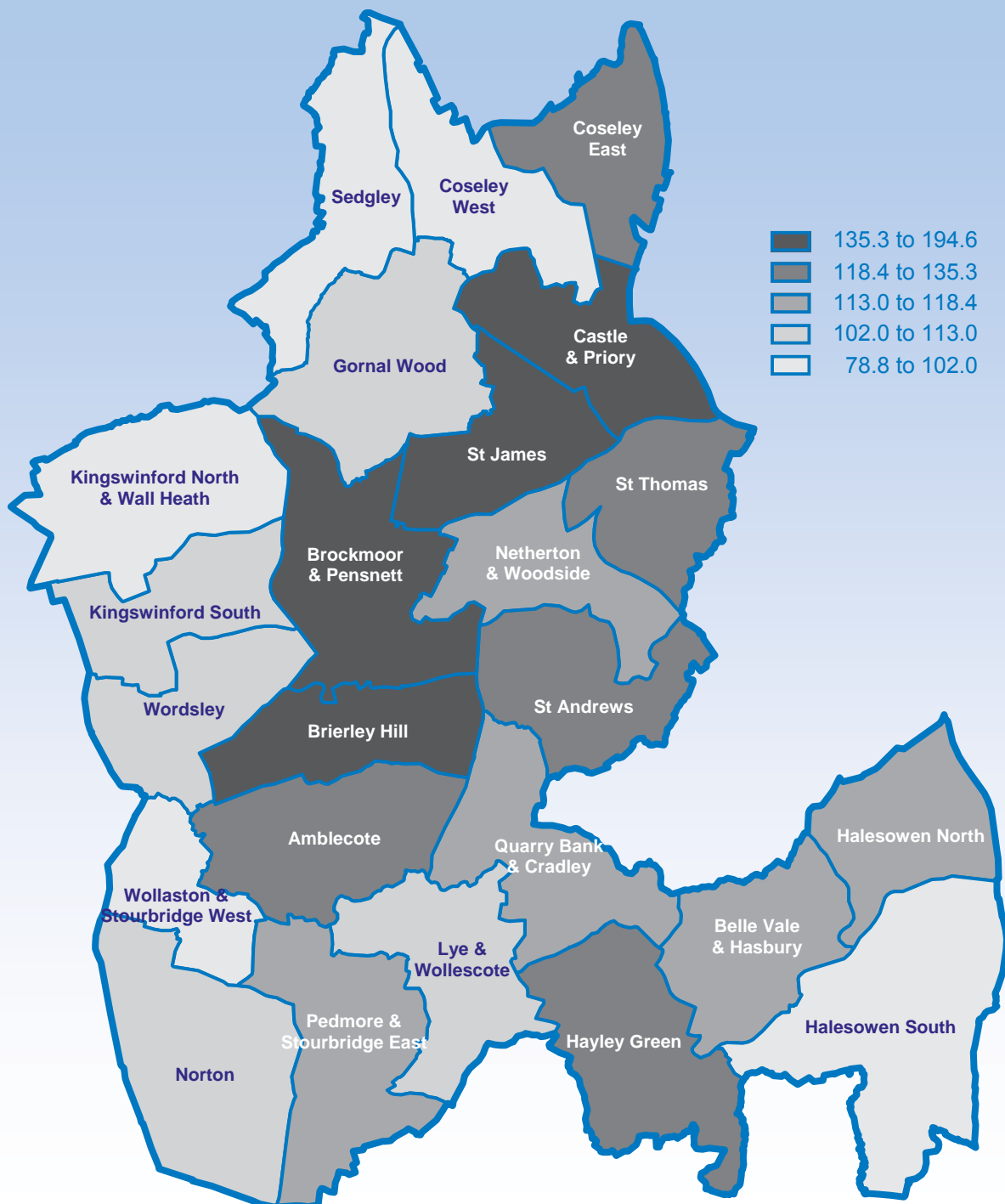
Mortality

All Cancers — Aged Under 75

(ICD10 C00 to C97)

- Variation in rates is less marked than for circulatory diseases.
- The highest rate (Brockmoor & Pensnett) is less than 2½ the lowest (Coseley West).
- Coseley West and Halesowen South have rates significantly lower than the Dudley average.
- The three wards with the highest rates (Brockmoor & Pensnett, Castle & Priory and Brierley Hill) are all significantly higher not just than the Dudley average, but than any other ward.

Directly Standardised Mortality Rates from All Cancers by Ward
3-Year Rates, Dudley, Both Sexes Aged Under 75, 2004-2006



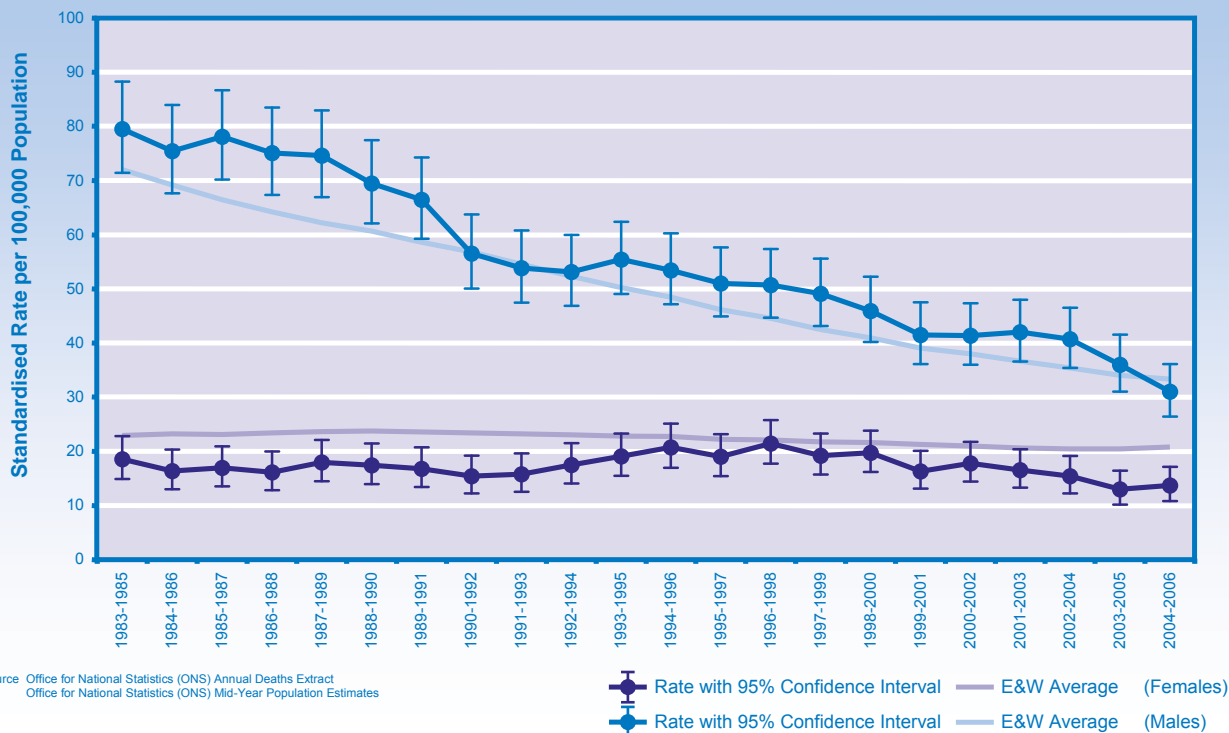
Mortality

Lung Cancer — Aged Under 75

(ICD10 C33 to C34)

- Of all cancers, lung cancer causes the most deaths in under 75s in Dudley.
- Rates for men have more than halved over the last two decades and have fallen considerably in the last three years.
- Rates for women have not changed significantly for twenty years.
- Rates for men are now in line with the national average.
- The rates for women are significantly lower than the national average.

Directly Standardised Mortality Rates from Lung Cancer by Year
3-Year Rates, Dudley, Males & Females Aged Under 75, 1983-1985 to 2004-2006



Mortality from Lung Cancer in people aged under 75

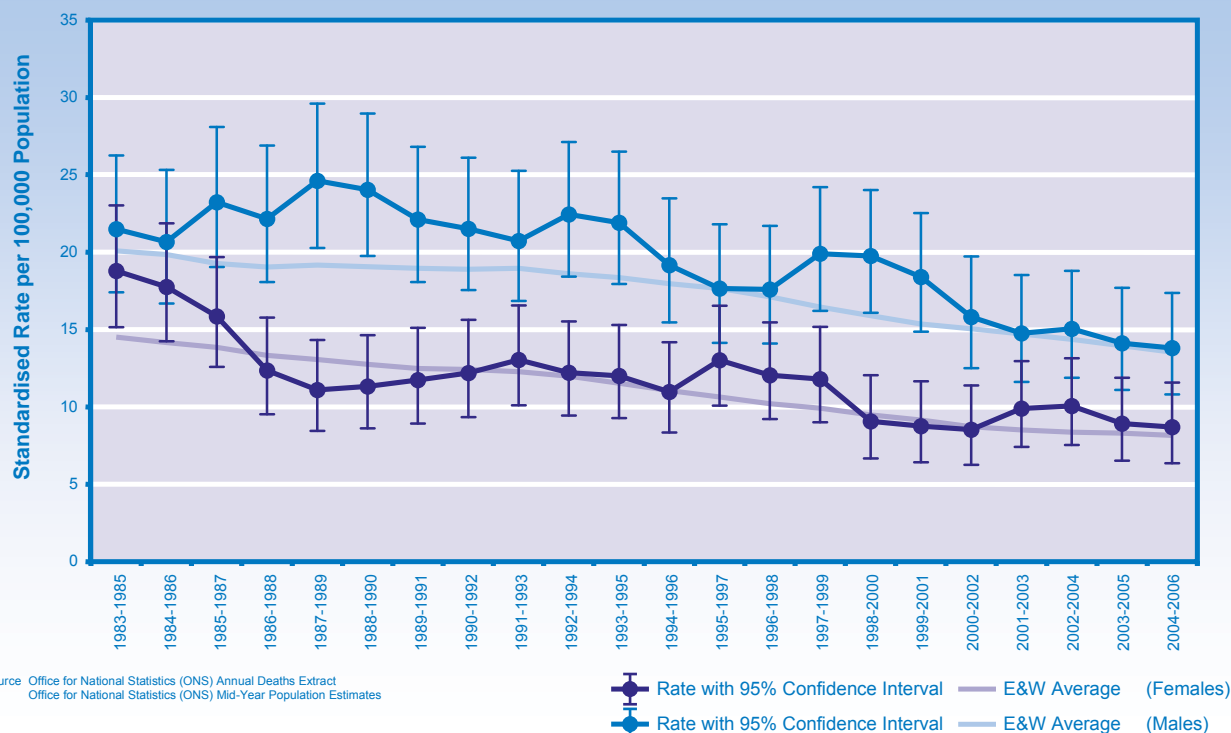
	Number of Deaths			Dudley DSR per 100,000 Population			England & Wales DSR per 100,000 Population		
	Males	Females	Total	Males	Females	Total	Males	Females	Total
95-97	254	100	354	50.8 (44.7,57.5)	18.8 (15.3,23.0)	34.0 (30.5,37.7)	46.1	22.1	33.4
96-98	254	117	371	50.5 (44.5,57.2)	21.3 (17.5,25.6)	35.2 (31.7,39.0)	44.5	22.0	32.6
97-99	246	105	351	48.9 (43.0,55.5)	19.0 (15.5,23.1)	33.4 (30.0,37.1)	42.5	21.6	31.5
98-00	232	109	341	45.8 (40.0,52.1)	19.5 (16.0,23.6)	32.2 (28.9,35.8)	40.9	21.5	30.7
99-01	211	90	301	41.3 (35.9,47.3)	16.2 (12.9,19.9)	28.3 (25.2,31.7)	39.0	21.2	29.6
00-02	214	98	312	41.2 (35.8,47.1)	17.6 (14.3,21.6)	29.0 (25.8,32.4)	37.9	20.8	29.0
01-03	217	89	306	41.8 (36.4,47.8)	16.4 (13.1,20.2)	28.7 (25.5,32.1)	36.5	20.5	28.2
02-04	214	82	296	40.5 (35.3,46.4)	15.2 (12.1,19.0)	27.4 (24.3,30.7)	35.3	20.3	27.5
03-05	189	71	260	35.8 (30.9,41.3)	12.8 (10.0,16.3)	24.0 (21.1,27.1)	33.9	20.3	26.8
04-06	164	77	241	30.8 (26.3,36.0)	13.6 (10.7,17.0)	21.9 (19.2,24.9)	33.2	20.7	26.7

Colorectal Cancer — Aged Under 75

(ICD10 C18 to C20)

- Colorectal cancer causes more deaths in under 75s than any cancer apart from lung cancer.
- There has been an overall downward trend in Dudley.
- Rates for men are higher than those for women.
- Rates are roughly in line with national rates, although there are fluctuations year-on-year.

Directly Standardised Mortality Rates from Colorectal Cancer by Year
3-Year Rates, Dudley, Males & Females Aged Under 75, 1983-1985 to 2004-2006



Mortality from Colorectal Cancer in people aged under 75

	Number of Deaths			Dudley DSR per 100,000 Population			England & Wales DSR per 100,000 Population		
	Males	Females	Total	Males	Females	Total	Males	Females	Total
95-97	87	69	156	17.6 (14.1,21.8)	13.0 (10.0,16.5)	15.1 (12.8,17.7)	17.6	10.6	13.9
96-98	88	63	151	17.6 (14.0,21.7)	12.0 (9.2,15.4)	14.6 (12.3,17.1)	17.1	10.2	13.5
97-99	101	62	163	19.9 (16.2,24.2)	11.7 (9.0,15.1)	15.5 (13.2,18.1)	16.5	9.9	13.0
98-00	101	48	149	19.7 (16.0,24.0)	9.0 (6.6,12.0)	14.1 (11.9,16.6)	15.9	9.5	12.5
99-01	94	47	141	18.4 (14.8,22.5)	8.7 (6.4,11.6)	13.3 (11.2,15.7)	15.4	9.1	12.1
00-02	79	47	126	15.8 (12.5,19.7)	8.5 (6.2,11.3)	12.0 (10.0,14.4)	15.0	8.7	11.7
01-03	75	54	129	14.7 (11.6,18.5)	9.9 (7.4,12.9)	12.2 (10.2,14.5)	14.7	8.5	11.5
02-04	78	54	132	15.0 (11.8,18.7)	10.0 (7.5,13.1)	12.4 (10.4,14.7)	14.3	8.3	11.2
03-05	75	47	122	14.1 (11.0,17.6)	8.9 (6.5,11.8)	11.3 (9.4,13.5)	13.9	8.3	11.0
04-06	73	47	120	13.8 (10.8,17.3)	8.6 (6.3,11.5)	11.1 (9.1,13.2)	13.5	8.1	10.7

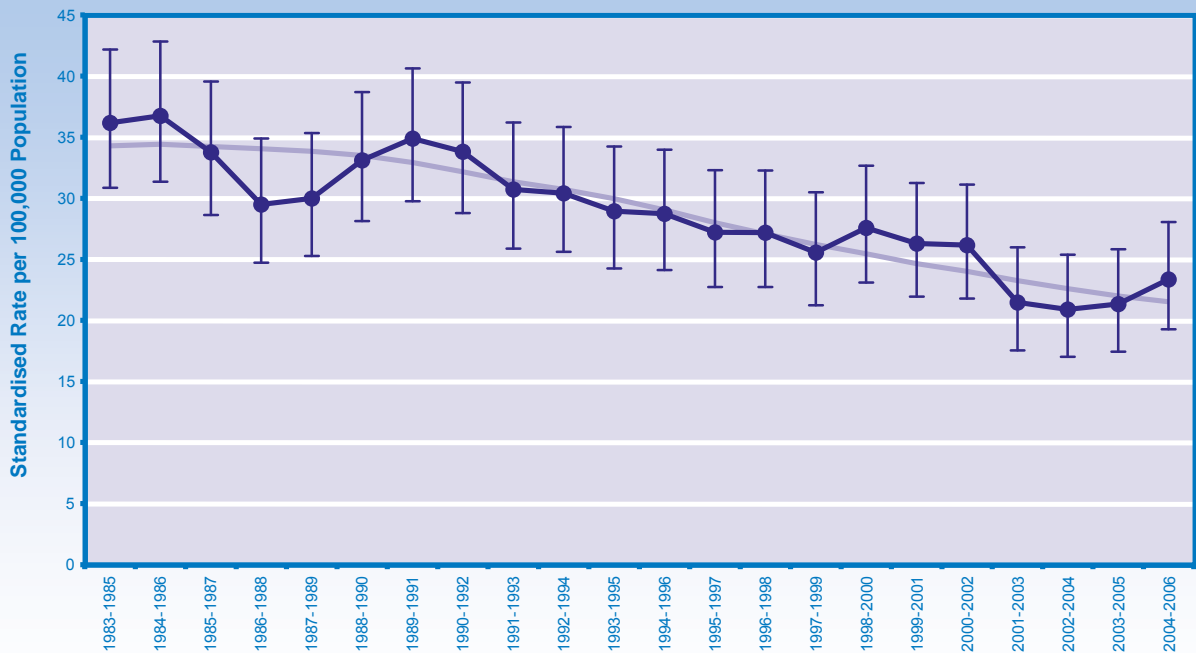
Mortality

Female Breast Cancer — Aged Under 75

(ICD10 C50)

- Amongst women, breast cancer causes more deaths in Dudley than any other cancer.
- Mortality rates have decreased steadily over the last two decades, but there has been a leveling off and possibly a slight increase in the last few years.
- Rates are not significantly different from those for England and Wales as a whole.

Directly Standardised Mortality Rates from Breast Cancer by Year
3-Year Rates, Dudley, Females Aged Under 75, 1983-1985 to 2004-2006



Source: Office for National Statistics (ONS) Annual Deaths Extract
Office for National Statistics (ONS) Mid-Year Population Estimates

Rate with 95% Confidence Interval E&W Average

Mortality from Breast Cancer in women aged under 75

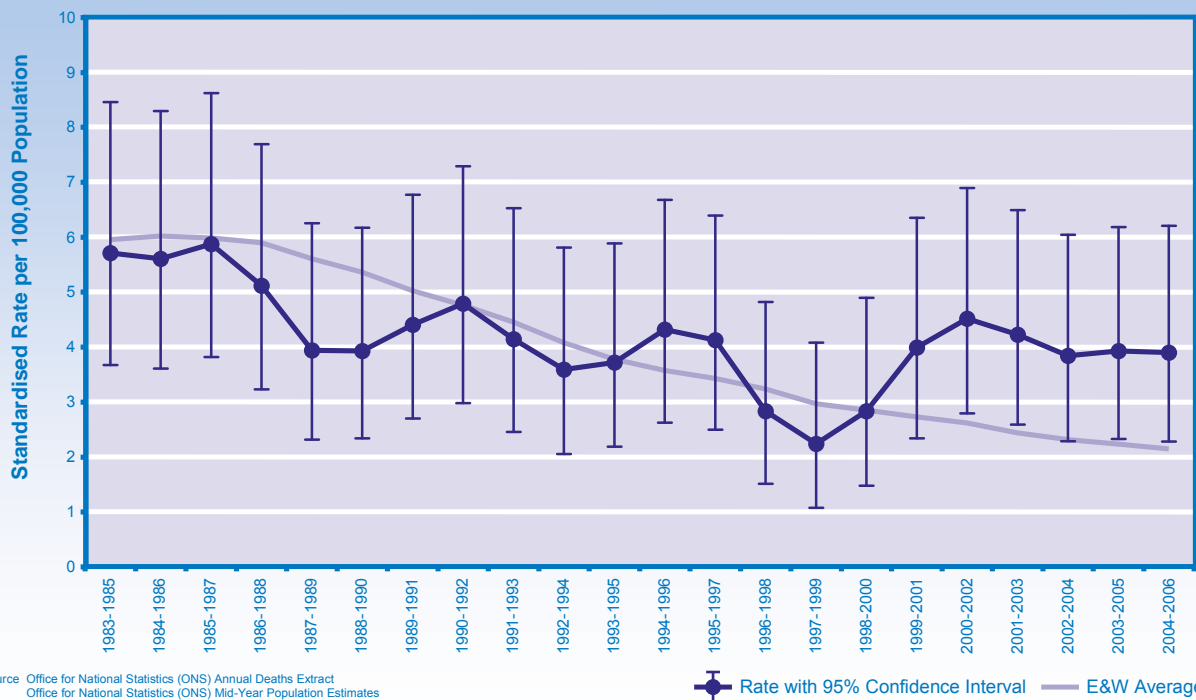
	Number of Deaths	Dudley		England & Wales DSR per 100,000 Population
		DSR per 100,000 Population		
95-97	135	27.2	(22.7,32.3)	28.1
96-98	135	27.2	(22.7,32.3)	27.1
97-99	127	25.6	(21.3,30.5)	26.3
98-00	137	27.6	(23.1,32.7)	25.5
99-01	132	26.3	(21.9,31.2)	24.7
00-02	130	26.2	(21.8,31.1)	24.1
01-03	107	21.5	(17.5,26.0)	23.3
02-04	104	20.9	(17.0,25.4)	22.7
03-05	108	21.3	(17.4,25.8)	22.1
04-06	118	23.4	(19.3,28.0)	21.5

Cervical Cancer — Aged Under 75

(ICD10 C53)

- Although cervical cancer accounts for relatively few deaths it is considered treatable and any deaths are therefore of concern.
- Rates have decreased nationally by about two thirds in twenty years.
- Rates over the same period have not fallen significantly in Dudley.
- From being about average ten years ago, Dudley now has significantly high rates.

Directly Standardised Mortality Rates from Cervical Cancer by Year
3-Year Rates, Dudley, Females Aged Under 75, 1983-1985 to 2004-2006



Source: Office for National Statistics (ONS) Annual Deaths Extract
Office for National Statistics (ONS) Mid-Year Population Estimates

Rate with 95% Confidence Interval E&W Average

Mortality from Cervical Cancer in women aged under 75

	Number of Deaths	Dudley DSR per 100,000 Population	England & Wales DSR per 100,000 Population
95-97	21	4.1 (2.5,6.4)	3.4
96-98	14	2.8 (1.5,4.8)	3.2
97-99	11	2.2 (1.1,4.1)	3.0
98-00	13	2.8 (1.5,4.9)	2.9
99-01	18	4.0 (2.3,6.4)	2.7
00-02	22	4.5 (2.8,6.9)	2.6
01-03	21	4.2 (2.6,6.5)	2.5
02-04	19	3.8 (2.3,6.0)	2.3
03-05	19	3.9 (2.3,6.2)	2.2
04-06	18	3.9 (2.3,6.2)	2.1

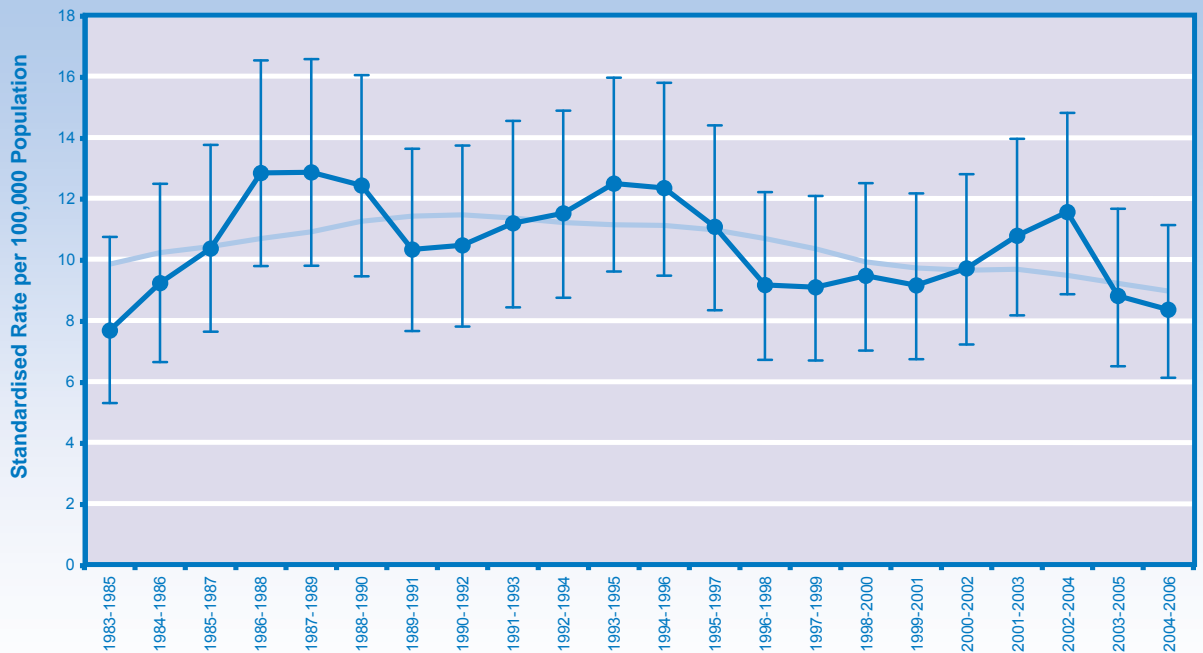
Mortality

Prostate Cancer — Aged Under 75

(ICD10 C61)

- Prostate cancer accounts for the third most deaths from cancer in men under 75 (after lung and colorectal cancer).
- Rates have not changed significantly for the last twenty years.
- Rates in Dudley are very close to the national rate.

Directly Standardised Mortality Rates from Prostate Cancer by Year
3-Year Rates, Dudley, Males Aged Under 75, 1983-1985 to 2004-2006



Source: Office for National Statistics (ONS) Annual Deaths Extract
Office for National Statistics (ONS) Mid-Year Population Estimates

● Rate with 95% Confidence Interval — E&W Average

Mortality from Prostate Cancer in men aged under 75

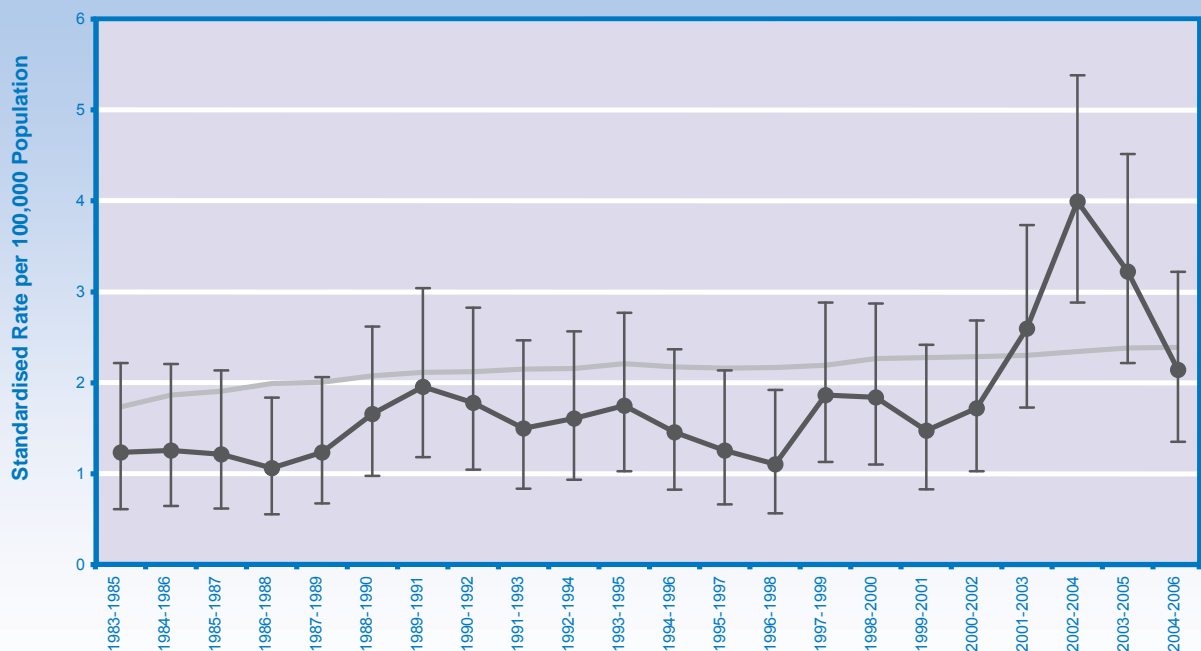
	Number of Deaths	Dudley		England & Wales DSR per 100,000 Population
		DSR per 100,000 Population		
95-97	56	11.1	(8.4,14.4)	11.0
96-98	47	9.2	(6.7,12.2)	10.7
97-99	48	9.1	(6.7,12.1)	10.4
98-00	50	9.5	(7.0,12.5)	10.0
99-01	48	9.2	(6.8,12.2)	9.8
00-02	51	9.7	(7.2,12.8)	9.7
01-03	58	10.8	(8.2,14.0)	9.7
02-04	63	11.6	(8.9,14.8)	9.5
03-05	49	8.8	(6.5,11.7)	9.3
04-06	47	8.4	(6.2,11.2)	9.0

Malignant Melanoma (Skin Cancer) — All Ages

(ICD10 C43)

- Death rates from skin cancer have doubled in Dudley over the last two decades.
- The sharp upturn between 1999-2001 and 2002-2004 has been followed by a drop back down to the national average.
- Rates however are still significantly above what they were twenty years ago.

Directly Standardised Mortality Rates from Skin Cancer by Year
3-Year Rates, Dudley, Both Sexes All Ages, 1983-1985 to 2004-2006



Source: Office for National Statistics (ONS) Annual Deaths Extract
Office for National Statistics (ONS) Mid-Year Population Estimates

Rate with 95% Confidence Interval — E&W Average

Mortality from Skin Cancer in people of all ages

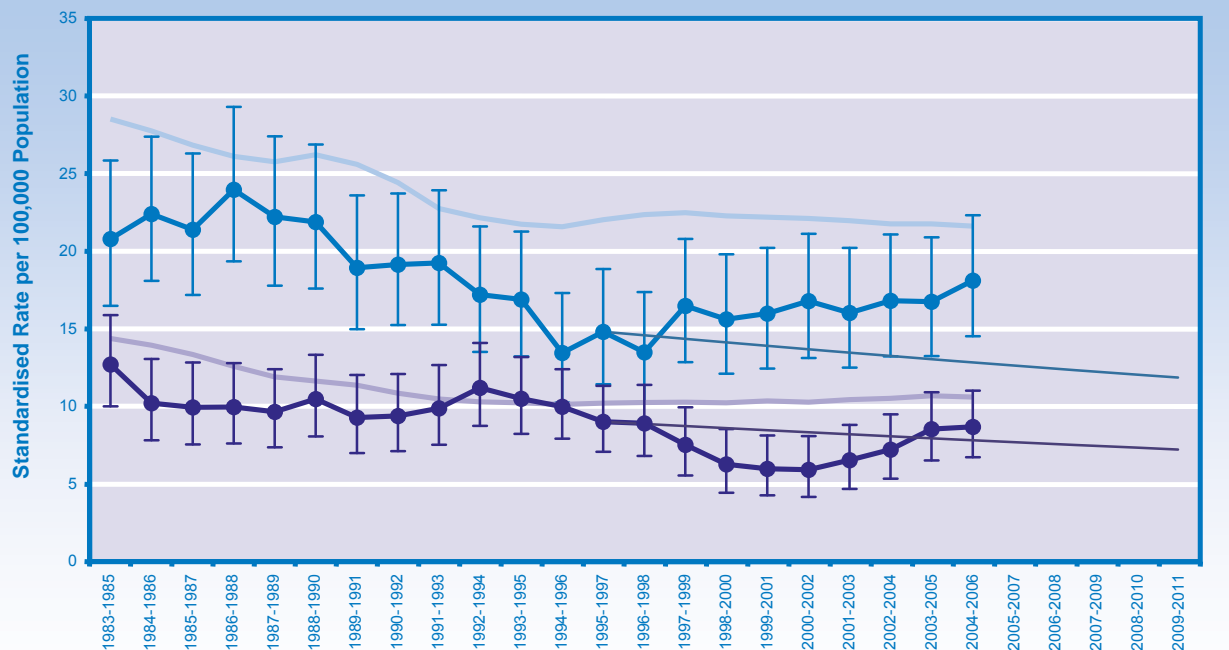
	Number of Deaths	Dudley		England & Wales DSR per 100,000 Population
		DSR per 100,000 Population		
95-97	14	1.3	(0.7,2.1)	2.2
96-98	13	1.1	(0.6,1.9)	2.2
97-99	21	1.9	(1.1,2.9)	2.2
98-00	20	1.8	(1.1,2.9)	2.3
99-01	16	1.5	(0.8,2.4)	2.3
00-02	21	1.7	(1.0,2.7)	2.3
01-03	31	2.6	(1.7,3.7)	2.4
02-04	46	4.0	(2.9,5.4)	2.4
03-05	35	3.2	(2.2,4.5)	2.4
04-06	24	2.1	(1.3,3.2)	2.4

Mortality

Accidents — All Ages, Under 15, 15-24 & 65+ (ICD10 V01 to X59)

- Death rates from accidents in Dudley are no longer significantly lower than the national average, having risen in the last few years and are also significantly higher for men than for women.
- Rates in the under 15s and 15-24s have decreased slightly overall. For under 15s they decreased to 94-96, but have since risen very slightly.
- Rates in the 65+ age group have risen over the last few years back above 1996 levels.
- **The current trajectory will not achieve target if the recent upward trend continues.**

Directly Standardised Mortality Rates from Accidents by Year
3-Year Rates, Dudley, Males & Females All Ages, 1983-1985 to 2009-2011
Target: Reduce mortality from Accidents by 20% by 2010 from 1996



Source: Office for National Statistics (ONS) Annual Deaths Extract
Office for National Statistics (ONS) Mid-Year Population Estimates

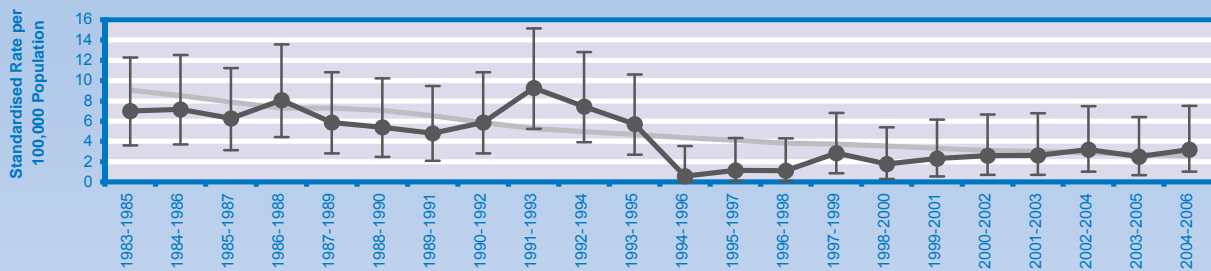
● Rate with 95% Confidence Interval (Males)
 ● Rate with 95% Confidence Interval (Females)
 — Target Trajectory (Males)
 — Target Trajectory (Females)
 — E&W Average (Males)
 — E&W Average (Females)

Mortality from Accidents in people of all ages

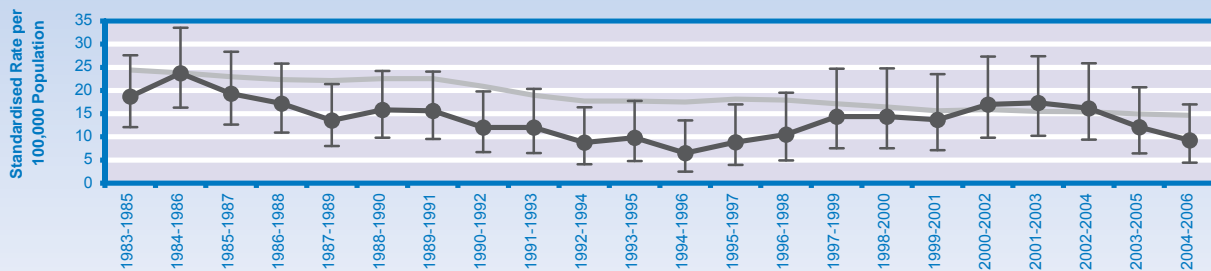
	Number of Deaths			Dudley DSR per 100,000 Population			England & Wales DSR per 100,000 Population		
	Males	Females	Total	Males	Females	Total	Males	Females	Total
95-97	68	83	151	14.8 (11.4,18.8)	9.0 (7.0,11.3)	12.2 (10.2,14.4)	22.2	10.2	16.1
96-98	62	75	137	13.4 (10.2,17.3)	8.9 (6.8,11.4)	11.4 (9.5,13.6)	22.6	10.3	16.4
97-99	74	59	133	16.4 (12.8,20.7)	7.5 (5.5,9.9)	12.0 (9.9,14.3)	22.7	10.3	16.4
98-00	71	47	118	15.6 (12.1,19.8)	6.2 (4.4,8.5)	10.8 (8.8,13.1)	22.5	10.3	16.3
99-01	73	49	122	15.9 (12.4,20.2)	5.9 (4.2,8.1)	10.6 (8.7,12.8)	22.7	10.8	16.7
00-02	76	47	123	16.7 (13.1,21.1)	5.9 (4.1,8.0)	10.9 (8.9,13.1)	23.0	11.2	17.0
01-03	75	52	127	16.0 (12.5,20.2)	6.5 (4.6,8.8)	10.9 (8.9,13.1)	23.3	12.2	17.8
02-04	79	62	141	16.8 (13.2,21.0)	7.2 (5.3,9.4)	11.7 (9.7,14.0)	22.6	11.6	17.1
03-05	82	79	161	16.7 (13.2,20.8)	8.5 (6.5,10.9)	12.6 (10.5,14.8)	22.3	11.2	16.7
04-06	92	84	176	18.1 (14.5,22.3)	8.6 (6.7,11.0)	13.3 (11.2,15.5)	21.6	10.6	16.0
2010 Target				11.8	7.2	9.7			

Mortality

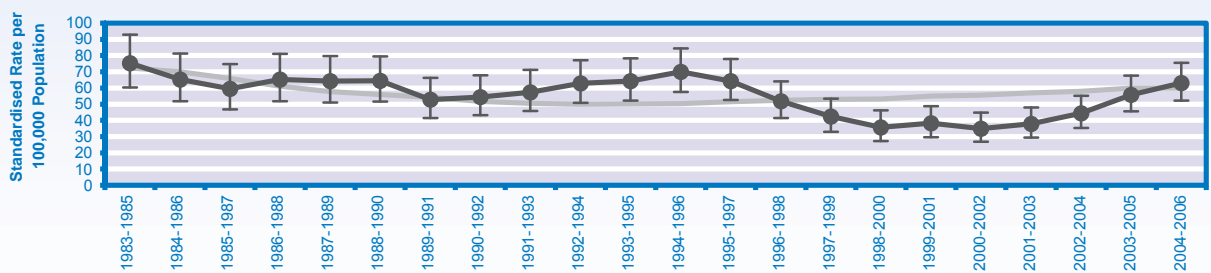
Mortality from Accidents by Year, 3-Year Rates, Dudley, Both Sexes, 1983-1985 to 2004-2006 Aged Under 15



Aged 15-24



Aged 65+



Source: Office for National Statistics (ONS) Annual Deaths Extract
Office for National Statistics (ONS) Mid-Year Population Estimates

—●— Rate with 95% Confidence Interval — E&W Average

Mortality from Accidents in people aged under 15, 15-24 & 65+

	Number of Deaths			Dudley DSR per 100,000 Population			England & Wales DSR per 100,000 Population		
	Under 15	15-24	65+	Under 15	15-24	65+	Under 15	15-24	65+
95-97	2	9	106	1.1 (0.1,4.3)	8.8 (3.9,17.0)	64.4 (52.6,78.0)	4.1	18.3	51.6
96-98	2	10	87	1.1 (0.1,4.3)	10.5 (4.9,19.5)	51.8 (41.4,64.0)	3.9	18.2	52.7
97-99	5	13	71	2.8 (0.8,6.8)	14.3 (7.5,24.7)	42.3 (32.9,53.5)	3.8	17.4	53.2
98-00	3	13	60	1.8 (0.3,5.4)	14.4 (7.5,24.8)	35.8 (27.2,46.2)	3.6	16.7	53.5
99-01	4	13	68	2.3 (0.5,6.1)	13.6 (7.1,23.5)	38.4 (29.7,48.8)	3.4	15.9	58.3
00-02	4	17	64	2.6 (0.7,6.7)	17.0 (9.8,27.3)	34.9 (26.8,44.7)	3.1	16.1	63.0
01-03	4	18	71	2.6 (0.7,6.8)	17.3 (10.2,27.4)	37.9 (29.5,47.9)	3.0	15.7	71.1
02-04	5	17	84	3.2 (1.0,7.5)	16.1 (9.4,25.9)	44.4 (35.3,55.2)	2.9	15.6	66.5
03-05	4	13	106	2.5 (0.7,6.4)	12.1 (6.4,20.7)	55.8 (45.5,67.7)	2.7	15.1	63.9
04-06	5	10	121	3.2 (1.0,7.5)	9.2 (4.4,17.0)	63.1 (52.2,75.6)	2.6	14.6	60.0

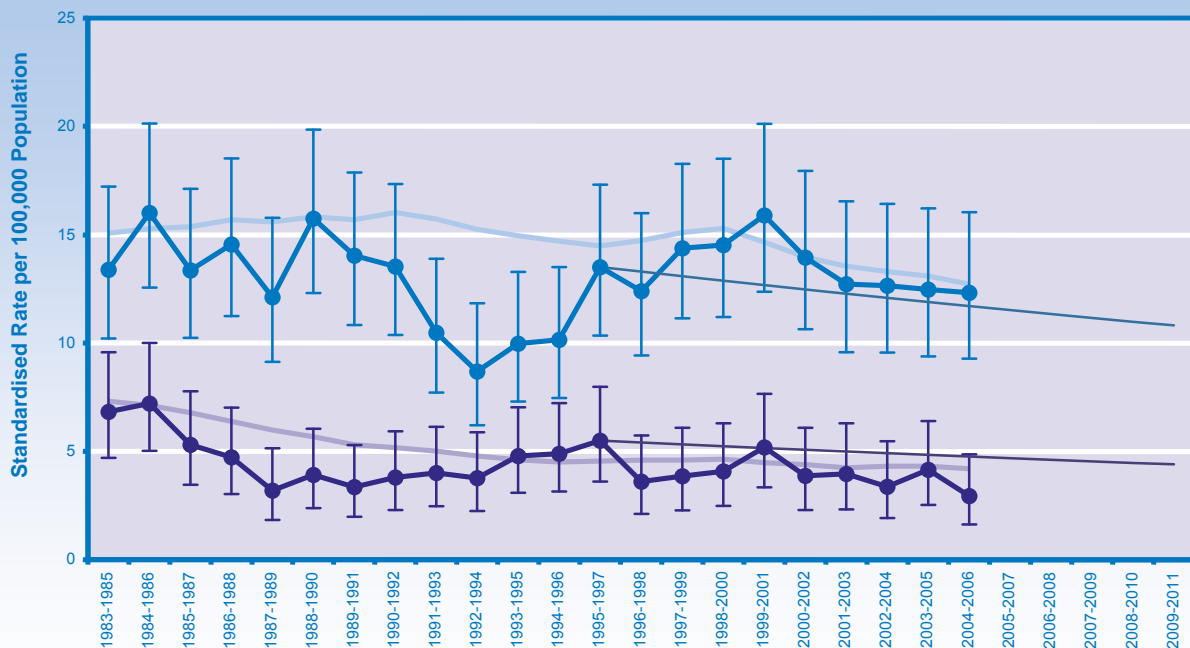
Mortality

Suicide & Undetermined Injury — All Ages

(ICD10 V01 to X59)

- Suicide & undetermined injury accounted for 72 deaths in Dudley in the three years 2004-2006.
- A gradual (fluctuating) fall since the target was set in 1996 means that rates are now significantly below the rates of twenty years ago and seem to be following the required trajectory.
- Rates for men are significantly higher than for women.
- **The current trajectory now looks to be heading on target for 2009-2011.**

Directly Standardised Mortality Rates from Suicide & Undetermined Injury by Year
3-Year Rates, Dudley, Males & Females All Ages, 1983-1985 to 2009-2011
Target: Reduce mortality from Suicide & Undetermined Injury by 20% by 2010 from 1996



Source: Office for National Statistics (ONS) Annual Deaths Extract
Office for National Statistics (ONS) Mid-Year Population Estimates

● Rate with 95% Confidence Interval (Males)
 — Target Trajectory (Males)
 — E&W Average (Males)
 ● Rate with 95% Confidence Interval (Females)
 — Target Trajectory (Females)
 — E&W Average (Females)

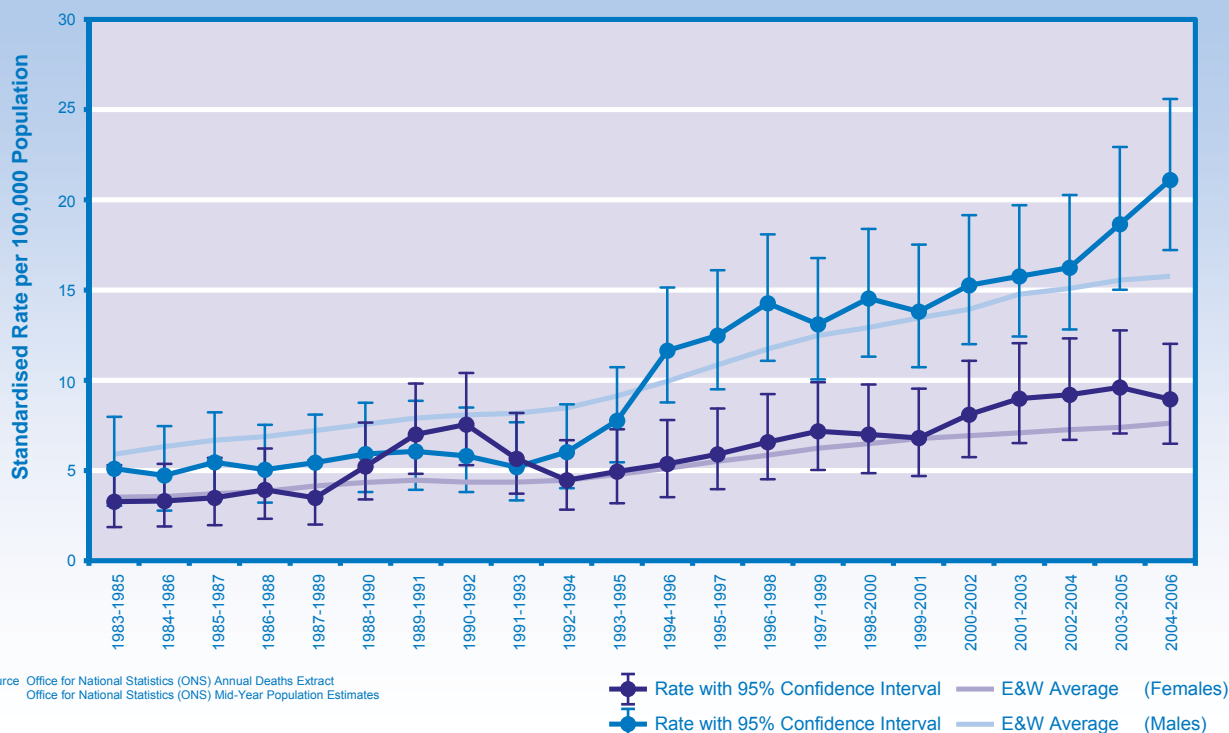
Mortality from Suicide & Undetermined Injury in people of all ages

	Number of Deaths			Dudley DSR per 100,000 Population			England & Wales DSR per 100,000 Population		
	Males	Females	Total	Males	Females	Total	Males	Females	Total
95-97	63	28	91	13.5 (10.3,17.3)	5.5 (3.6,8.0)	9.4 (7.5,11.6)	14.5	4.5	9.4
96-98	60	18	78	12.4 (9.4,16.0)	3.6 (2.1,5.7)	7.8 (6.2,9.8)	14.8	4.6	9.6
97-99	68	19	87	14.4 (11.1,18.2)	3.8 (2.2,6.1)	9.0 (7.1,11.1)	15.2	4.6	9.8
98-00	67	21	88	14.5 (11.2,18.5)	4.1 (2.5,6.3)	9.2 (7.3,11.4)	15.4	4.6	9.9
99-01	71	26	97	15.9 (12.3,20.1)	5.2 (3.3,7.6)	10.4 (8.4,12.8)	14.7	4.5	9.5
00-02	61	19	80	13.9 (10.6,17.9)	3.8 (2.3,6.1)	8.8 (7.0,11.0)	14.1	4.4	9.1
01-03	56	18	74	12.7 (9.5,16.5)	3.9 (2.3,6.3)	8.2 (6.4,10.4)	13.7	4.3	8.9
02-04	57	17	74	12.6 (9.5,16.4)	3.3 (1.9,5.4)	8.0 (6.2,10.1)	13.4	4.3	8.8
03-05	56	21	77	12.4 (9.4,16.2)	4.1 (2.5,6.4)	8.2 (6.5,10.3)	13.2	4.3	8.7
04-06	56	16	72	12.3 (9.2,16.0)	2.9 (1.6,4.8)	7.6 (5.9,9.6)	12.7	4.2	8.3
2010 Target				10.8	4.4	7.5			

Alcohol-Related Diseases — Aged Under 75 (ICD10 F10, G31.2, G62.1, I42.6, K29.1, K73, K74.0 to K74.2, K74.6 to K74.9, K86.0, X45, X65, Y15)

- In the three years 2004-2006, 142 people in Dudley died from diseases related to alcohol.
- More than two thirds of these were men.
- The rates for men have increased almost 5 times over the last twenty years.
- Rates for women are now 2½ times the rates in 1983-1985.

Directly Standardised Mortality Rates from Alcohol-Related Diseases by Year
3-Year Rates, Dudley, Males & Females Aged Under 75, 1983-1985 to 2004-2006



Mortality from Alcohol-Related Diseases in people aged under 75

	Number of Deaths			Dudley DSR per 100,000 Population			England & Wales DSR per 100,000 Population		
	Males	Females	Total	Males	Females	Total	Males	Females	Total
95-97	51	27	78	11.3 (8.4,14.9)	5.7 (3.7,8.3)	8.5 (6.7,10.6)	10.5	5.3	7.8
96-98	59	31	90	13.1 (10.0,16.9)	6.5 (4.4,9.3)	9.8 (7.9,12.1)	11.4	5.6	8.5
97-99	57	33	90	12.6 (9.5,16.3)	6.9 (4.7,9.7)	9.7 (7.8,12.0)	12.1	6.0	9.0
98-00	64	32	96	14.1 (10.8,18.0)	6.9 (4.7,9.8)	10.5 (8.5,12.8)	12.6	6.3	9.4
99-01	60	30	90	12.9 (9.8,16.6)	6.6 (4.4,9.4)	9.7 (7.8,11.9)	13.1	6.6	9.8
00-02	65	37	102	14.1 (10.8,17.9)	8.1 (5.7,11.2)	11.1 (9.0,13.5)	13.6	6.7	10.1
01-03	69	40	109	14.9 (11.6,18.9)	8.7 (6.2,11.9)	11.8 (9.7,14.3)	14.4	6.9	10.6
02-04	75	43	118	16.1 (12.7,20.3)	9.3 (6.7,12.5)	12.7 (10.5,15.2)	14.8	7.1	10.9
03-05	90	44	134	19.1 (15.3,23.5)	9.4 (6.8,12.7)	14.2 (11.9,16.8)	15.2	7.2	11.1
04-06	101	41	142	21.3 (17.4,26.0)	8.8 (6.3,12.0)	15.0 (12.6,17.7)	15.5	7.4	11.4

Directly Standardised Mortality Rates (DSR) per 100,000 Population by Cause Dudley, 2004-2006

Cause of Death	Age Group	MALES			FEMALES			PERSONS		
		Number of Deaths	Directly Standardised Rate (95% Confidence Interval)	E&W DSR	Number of Deaths	Directly Standardised Rate (95% Confidence Interval)	E&W DSR	Number of Deaths	Directly Standardised Rate (95% Confidence Interval)	E&W DSR
All Causes	All Ages	4,512	776.6 (753.6, 800)	733.7 ▲	4,754	525.5 (509.4, 542)	513.3 ▲	9,266	636.1 (622.7, 649.7)	611.8 ▲
	<15	50	66.3 (49.1, 87.4)	55.5 ▲	31	42.2 (28.6, 59.9)	45.3 ▲	81	54.4 (43.2, 67.7)	50.6 ▲
	15-64	939	292.2 (273.7, 311.6)	284.9 ▲	579	179.5 (165.1, 194.8)	174.5 ▲	1,518	235.8 (224, 248)	229.1 ▲
	65-74	1,024	2,479.1 (2331.2, 2633.7)	2,366.6 ▲	678	1,457.6 (1350.3, 1571.1)	1,484.9 ▲	1,702	1,939.2 (1848.8, 2032.7)	1,901.2 ▲
All Circulatory Diseases	<75	637	122.7 (113.3, 132.7)	118.7 ▲	293	50.7 (45.57)	52.5 ▲	930	85.8 (80.3, 91.6)	84.5 ▲
Hypertensive Disease	<75	24	4.8 (3.7, 7.1)	2.4 ▲	14	2.5 (1.3, 4.2)	1.3 ▲	38	3.6 (2.6, 5)	1.8 ▲
CHD	<75	376	72.2 (65.1, 80)	75.0 ▲	139	24.0 (20.1, 28.4)	24.0 ▲	515	47.5 (43.4, 51.8)	48.7 ▲
Stroke	<75	103	19.4 (15.8, 23.6)	18.3 ▲	78	13.2 (10.4, 16.5)	13.8 ▲	181	16.2 (13.9, 18.8)	15.9 ▲
All Cancers	<75	680	130.1 (120.5, 140.3)	130.5 ▲	561	105.9 (97.2, 115.2)	105.2 ▲	1,241	117.1 (110.6, 123.9)	117.2 ▲
Stomach Cancer	<75	43	8.0 (5.8, 10.8)	5.2 ▲	20	3.6 (2.2, 5.6)	2.1 ▲	63	5.7 (4.4, 7.3)	3.6 ▲
Colorectal Cancer	<75	73	13.8 (10.8, 17.4)	13.5 ▲	47	8.6 (6.3, 11.5)	8.1 ▲	120	11.1 (9.2, 13.3)	10.7 ▲
Lung Cancer	<75	164	31.0 (26.4, 36.1)	33.2 ▲	77	13.6 (10.7, 17)	20.6 ▲	241	22.0 (19.3, 25)	26.7 ▲
Skin Cancer	All Ages	14	2.5 (1.3, 4.2)	2.9 ▲	10	1.9 (0.9, 3.5)	1.9 ▲	24	2.1 (1.4, 3.2)	2.4 ▲
Breast Cancer	<75	-	-	-	118	23.4 (19.3, 28.1)	21.5 ▲	-	-	-
Cervical Cancer	<75	-	-	-	18	3.9 (2.3, 6.2)	2.1 ▲	-	-	-
Prostate Cancer	<75	47	8.4 (6.2, 11.2)	9.0 ▲	-	-	-	-	-	-
Leukaemia	<75	30	5.8 (3.9, 8.3)	4.2 ▲	17	3.4 (1.9, 5.4)	2.4 ▲	47	4.5 (3.3, 6)	3.3 ▲
All Respiratory Diseases	<75	218	41.8 (36.4, 47.8)	30.9 ▲	130	22.5 (18.7, 26.8)	21.0 ▲	348	31.9 (28.6, 35.5)	25.8 ▲
Pneumonia	<75	42	8.4 (6.1, 11.4)	8.3 ▲	37	6.2 (4.4, 8.6)	5.4 ▲	79	7.3 (5.8, 9.2)	6.8 ▲
Lower Respiratory Infection	<75	7	1.3 (0.5, 2.8)	0.5 ▲	6	1.3 (0.5, 2.9)	0.4 ▲	13	1.3 (0.7, 2.2)	0.4 ▲
Chronic Respiratory Conditions	<75	123	23.4 (19.4, 27.9)	15.9 ▲	62	10.6 (8.1, 13.7)	11.8 ▲	185	16.9 (14.5, 19.5)	13.8 ▲
COPD	<75	108	20.4 (16.7, 24.6)	14.5 ▲	51	8.6 (6.4, 11.3)	10.3 ▲	159	14.3 (12.2, 16.7)	12.3 ▲
Bronchitis & Emphysema	<75	24	4.5 (2.9, 6.8)	1.3 ▲	7	1.1 (0.4, 2.3)	0.6 ▲	31	2.8 (1.9, 4)	0.9 ▲
Asthma	<75	8	1.7 (0.7, 3.4)	0.8 ▲	3	0.7 (0.1, 2.2)	1.0 ▲	11	1.2 (0.6, 2.2)	0.9 ▲
Bronchiectasis	<75	7	1.3 (0.5, 2.7)	0.6 ▲	8	1.3 (0.6, 2.6)	0.6 ▲	15	1.3 (0.7, 2.2)	0.6 ▲
Diabetes Mellitus	<75	22	4.3 (2.7, 6.6)	3.9 ▲	13	2.3 (1.2, 3.9)	2.5 ▲	35	3.3 (2.3, 4.6)	3.1 ▲
Epilepsy	<75	15	3.3 (1.8, 5.5)	1.9 ▲	8	1.9 (0.8, 3.7)	1.2 ▲	23	2.6 (1.6, 3.9)	1.5 ▲
Gastric, Duodenal & Peptic Ulcers	<75	9	1.6 (0.7, 3.1)	2.5 ▲	12	2.4 (1.2, 4.2)	1.3 ▲	21	2.0 (1.2, 3.1)	1.9 ▲
Chronic Liver Disease & Cirrhosis	<75	93	19.6 (15.8, 24)	13.2 ▲	38	8.2 (5.8, 11.3)	6.8 ▲	131	13.8 (11.5, 16.4)	9.9 ▲
Chronic Renal Failure	<75	4	0.8 (0.2, 2)	0.7 ▲	3	0.6 (0.1, 1.9)	0.5 ▲	7	0.7 (0.3, 1.4)	0.6 ▲
Accidents	All Ages	92	18.1 (14.5, 22.3)	21.6 ▲	84	8.6 (6.7, 11)	10.5 ▲	176	13.3 (11.3, 15.6)	16.0 ▲
	<15	4	4.8 (1.3, 12.5)	3.2 ▲	1	1.4	1.9 ▲	5	3.2 (1.7, 5)	2.6 ▲
	15-24	8	14.7 (6.3, 29.1)	22.8 ▲	2	3.6 (0.4, 12.9)	6.0 ▲	10	9.2 (4.4, 17)	14.6 ▲
	65+	48	72.5 (53.1, 96.7)	65.8 ▲	73	55.3 (43.2, 69.8)	55.0 ▲	121	63.1 (52.2, 75.6)	60.0 ▲
Road Traffic Accidents	<75	29	6.9 (4.6, 9.9)	7.7 ▲	4	0.9 (0.2, 2.3)	2.0 ▲	33	3.9 (2.7, 5.5)	4.9 ▲
Accidental Falls	<75	7	1.5 (0.6, 3.2)	2.6 ▲	2	0.5 (0.1, 1.8)	1.1 ▲	9	1.0 (0.4, 1.9)	1.9 ▲
Suicide & Undetermined Injury	<75	51	12.0 (8.9, 15.8)	12.5 ▲	13	2.8 (1.5, 4.8)	4.1 ▲	64	7.4 (5.7, 9.5)	8.3 ▲
Infectious & Parasitic Diseases	<75	18	3.7 (2.2, 5.9)	4.2 ▲	14	2.9 (1.5, 4.9)	3.1 ▲	32	3.3 (2.2, 4.6)	3.6 ▲
Alcohol-Related Diseases	<75	102	21.6 (17.6, 26.2)	15.5 ▲	41	8.9 (6.3, 12)	7.4 ▲	143	15.1 (12.7, 17.9)	11.4 ▲
Drug-Related Diseases	<75	25	6.2 (4.9, 9)	6.9 ▲	8	1.7 (0.7, 3.3)	3.0 ▲	33	3.9 (2.7, 5.5)	4.9 ▲
Smoking-Related Diseases	<75	507	97.3 (89.1, 106.3)	98.6 ▲	218	38.8 (33.7, 44.3)	45.1 ▲	725	67.3 (62.4, 72.4)	70.9 ▲

Source: Office for National Statistics (ONS) Annual Deaths Extracts
Office for National Statistics (ONS) Mid-year Population Estimates
National Aggregate Data Provided by West Midlands Public Health Observatory (WMPHO)

▲ Significantly higher rate than England & Wales Average
▲ Not Significantly different from England & Wales Average
▲ Significantly lower rate than England & Wales Average

Indirectly Standardised Mortality Ratios (SMR) by Cause Dudley, 2004-2006 (England & Wales = 100)

Cause of Death	Age Group	MALES		FEMALES		PERSONS	
		Number of Deaths	Standardised Mortality Ratio (95% Confidence Interval)	Number of Deaths	Standardised Mortality Ratio (95% Confidence Interval)	Number of Deaths	Standardised Mortality Ratio (95% Confidence Interval)
All Causes	All Ages	4,512	105.6 (102.6, 108.7)	4,754	103.0 (100.1, 105.9)	9,266	104.2 (102.1, 106.3)
	<15	50	118.2 (87.8, 155.9)	31	93.6 (63.6, 132.9)	81	107.4 (85.3, 133.5)
	15-64	939	102.4 (95.9, 109.1)	579	102.5 (94.4, 111.2)	1,518	102.7 (97.6, 108)
	65-74	1,024	104.6 (98.4, 111.2)	678	97.9 (90.7, 105.5)	1,702	101.8 (97, 106.7)
All Circulatory Diseases	<75	637	103.0 (95.2, 111.3)	293	97.2 (86.4, 109)	930	101.3 (94.9, 108.1)
Hypertensive Disease	<75	24	197.1 (126.3, 293.2)	14	190.4 (104.1, 319.5)	38	195.0 (138, 267.6)
CHD	<75	376	96.2 (86.7, 106.4)	139	99.3 (83.5, 117.3)	515	97.3 (89.1, 106.1)
Stroke	<75	103	107.2 (87.5, 130)	78	99.6 (78.7, 124.3)	181	103.8 (89.3, 120.1)
All Cancers	<75	680	100.0 (92.6, 107.8)	561	98.7 (90.7, 107.2)	1,241	99.4 (93.9, 105)
Stomach Cancer	<75	43	157.7 (114.1, 212.4)	20	168.9 (103.2, 260.9)	63	161.3 (123.9, 206.3)
Colorectal Cancer	<75	73	102.8 (80.6, 129.3)	47	103.9 (76.4, 136.2)	120	103.4 (85.7, 123.6)
Lung Cancer	<75	164	93.6 (79.9, 109.1)	77	67.0 (52.9, 83.8)	241	83.2 (73, 94.4)
Skin Cancer	All Ages	14	86.3 (47.2, 144.8)	10	77.6 (37.2, 142.7)	24	82.4 (52.8, 122.6)
Breast Cancer	<75	-	-	118	106.5 (88.2, 127.5)	-	-
Cervical Cancer	<75	-	-	18	172.1 (102, 272)	-	-
Prostate Cancer	<75	47	95.0 (69.8, 126.3)	-	-	-	-
Leukaemia	<75	30	141.4 (95.4, 201.8)	17	132.6 (77.3, 212.4)	47	138.2 (101.5, 183.7)
All Respiratory Diseases	<75	218	133.4 (116.2, 152.3)	130	107.7 (90, 127.8)	348	122.5 (110, 136.1)
Pneumonia	<75	42	97.1 (70, 131.3)	37	121.0 (85.2, 166.7)	79	107.1 (84.8, 133.5)
Lower Respiratory Infection	<75	7	282.9 (113.8, 583)	6	284.1 (104.3, 618.4)	13	283.5 (151, 484.8)
Chronic Respiratory Conditions	<75	123	143.9 (119.6, 171.7)	62	89.8 (68.8, 115.1)	185	119.8 (103.1, 138.3)
COPD	<75	108	137.7 (112.9, 166.2)	51	83.8 (62.4, 110.2)	159	114.2 (97.1, 133.4)
Bronchitis & Emphysema	<75	24	347.2 (222.5, 516.7)	7	210.3 (84.6, 433.4)	31	303.1 (206, 430.3)
Asthma	<75	8	204.7 (88.4, 403.3)	3	62.2 (12.8, 181.7)	11	125.9 (62.8, 225.2)
Bronchiectasis	<75	7	242.4 (97.5, 499.4)	8	244.9 (105.8, 482.6)	15	243.8 (136.5, 402.1)
Diabetes Mellitus	<75	22	110.1 (69, 166.7)	13	92.9 (49.5, 158.8)	35	103.1 (71.8, 143.3)
Epilepsy	<75	15	179.3 (100.4, 295.8)	8	154.5 (66.7, 304.4)	23	170.1 (107.8, 255.2)
Gastric, Duodenal & Peptic Ulcers	<75	9	71.0 (32.5, 134.8)	12	162.0 (83.7, 283)	21	104.8 (64.9, 160.2)
Chronic Liver Disease & Cirrhosis	<75	93	149.0 (120.3, 182.6)	38	116.4 (82.4, 159.8)	131	138.3 (115.6, 164.1)
Chronic Renal Failure	<75	4	112.0 (30.5, 286.9)	3	103.7 (21.4, 303)	7	108.3 (43.5, 223.2)
Accidents	All Ages	92	86.2 (69.5, 105.8)	84	97.4 (77.7, 120.6)	176	91.3 (78.3, 105.8)
	<15	4	149.2 (40.6, 381.9)	1	67.2 (1.7, 374.7)	5	120.2 (39, 280.5)
	15-24	8	63.2 (27.3, 124.5)	2	62.7 (7.6, 226.3)	10	63.3 (30.3, 116.3)
	65+	48	108.6 (80.1, 144)	73	109.6 (85.9, 137.8)	121	109.2 (90.6, 130.5)
Road Traffic Accidents	<75	29	90.7 (60.7, 130.3)	4	46.4 (12.6, 118.7)	33	81.4 (56, 114.3)
Accidental Falls	<75	7	54.9 (22.1, 113.2)	2	33.5 (4.1, 121.2)	9	48.2 (22, 91.5)
Suicide & Undetermined Injury	<75	51	93.4 (69.5, 122.8)	13	71.1 (37.8, 121.5)	64	87.9 (67.7, 112.3)
Infectious & Parasitic Diseases	<75	18	88.9 (62.7, 140.5)	14	89.5 (48.9, 150.1)	32	89.3 (61.1, 126)
Alcohol-Related Diseases	<75	102	140.7 (114.7, 170.8)	41	115.6 (83, 156.8)	143	133.0 (112.1, 156.6)
Drug-Related Diseases	<75	25	85.9 (65.6, 126.9)	8	61.4 (26.5, 120.9)	33	78.2 (53.8, 109.8)
Smoking-Related Diseases	<75	507	98.8 (90.4, 107.8)	218	85.8 (74.8, 98)	725	94.7 (87.9, 101.8)

Source: Office for National Statistics (ONS) Annual Deaths Extracts
 Office for National Statistics (ONS) Mid-year Population Estimates
 National Aggregate Data Provided by West Midlands Public Health Observatory (WMPHO)

▲ Significantly higher rate than England & Wales Average
 ▼ Significantly lower rate than England & Wales Average
 - Not Significantly different from England & Wales Average

Years of Life Lost (YLL) and Standardised Years of Life (SYLL) Lost per 10,000 Population by Cause Dudley, 2004-2006

Cause of Death	Age Group	MALES			FEMALES			PERSONS		
		YLL	SYLL	E&W	YLL	SYLL	E&W	YLL	SYLL	E&W
All Causes	<75	26,542	597.6	574.2	16,162	361.3	346.9	42,703	478.5	459.4
All Circulatory Diseases	<75	7,243	158.0	145.5	2,566	53.9	58.7	9,809	105.6	101.3
Hypertensive Disease	<75	329	7.1	3.2	125	2.6	1.5	454	4.9	2.3
CHD	<75	4,060	87.4	89.5	1,193	25.2	23.3	5,253	56.1	55.8
Stroke	<75	982	21.2	21.3	676	14.4	16.4	1,658	17.8	18.8
All Cancers	<75	7,284	156.1	159.5	7,321	160.3	148.8	14,605	157.9	153.9
Stomach Cancer	<75	370	7.9	5.7	202	4.2	2.7	572	6.0	4.2
Colorectal Cancer	<75	691	14.6	15.2	550	11.8	9.9	1,240	13.2	12.5
Lung Cancer	<75	1,550	31.9	35.6	693	14.4	24.0	2,243	23.0	29.7
Skin Cancer	<75	157	3.5	4.1	196	4.4	2.9	353	4.0	3.5
Breast Cancer	<75	-	-	-	1,859	40.9	36.1	-	-	-
Cervical Cancer	<75	-	-	-	390	9.5	4.8	-	-	-
Prostate Cancer	<75	279	5.3	6.8	-	-	-	-	-	-
Leukaemia	<75	356	7.9	6.9	390	9.7	4.9	746	8.7	5.9
All Respiratory Diseases	<75	2,355	51.2	34.0	1,151	24.4	23.5	3,506	37.6	28.6
Pneumonia	<75	611	14.1	10.6	286	5.9	6.8	897	10.0	8.7
Lower Respiratory Infection	<75	73	1.4	0.7	129	2.9	0.5	202	2.2	0.6
Chronic Respiratory Conditions	<75	1,241	26.5	15.5	556	11.9	11.6	1,797	19.1	13.5
COPD	<75	975	20.7	12.6	354	6.9	8.7	1,329	13.7	10.6
Bronchitis & Emphysema	<75	241	4.9	1.4	40	0.7	0.6	281	2.8	1.0
Asthma	<75	205	4.6	2.2	144	4.0	2.2	349	4.2	2.2
Bronchiectasis	<75	61	1.2	0.6	59	1.0	0.6	120	1.1	0.6
Diabetes Mellitus	<75	335	7.4	5.1	143	3.2	3.3	478	5.3	4.2
Epilepsy	<75	388	9.4	6.0	241	6.2	3.8	629	7.8	4.9
Gastric, Duodenal & Peptic Ulcers	<75	62	1.2	3.3	189	4.6	1.5	251	2.9	2.4
Chronic Liver Disease & Cirrhosis	<75	1,981	44.1	27.4	796	18.2	14.1	2,777	31.1	20.7
Chronic Renal Failure	<75	38	0.9	0.9	67	1.8	0.7	105	1.4	0.8
Accidents	<75	1,769	44.5	58.9	419	10.9	17.8	2,188	27.7	38.4
Road Traffic Accidents	<75	1,149	28.4	31.6	124	3.2	8.0	1,273	15.9	19.9
Accidental Falls	<75	198	5.0	5.3	51	1.3	2.0	249	3.2	3.7
Suicide & Undetermined Injury	<75	1,765	43.5	41.2	370	8.7	12.8	2,134	26.2	27.0
Infectious & Parasitic Diseases	<75	237	5.5	8.4	237	5.3	6.3	473	5.4	7.3
Alcohol-Related Diseases	<75	2,181	48.8	33.1	878	20.0	16.0	3,059	34.3	24.5
Drug-Related Diseases	<75	957	25.0	26.0	195	4.3	9.8	1,152	14.7	17.9
Smoking-Related Diseases	<75	5,442	116.7	117.9	2,154	45.7	51.2	7,596	81.0	83.9

Source: Office for National Statistics (ONS) Annual Deaths Extracts
Office for National Statistics (ONS) Mid-year Population Estimates
National Aggregate Data Provided by West Midlands Public Health Observatory (WMPHO)



Glossary

Annex 1 - Source of Population Data

Annex 2 - Changes to Mortality Data

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Annex 4 - Our Healthier Nation

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Glossary

Confidence Intervals (CI) - Confidence intervals are used to indicate the uncertainty associated with an observed value. Strictly, they represent the range of values within which we can be confident that the true value lies. Usually 95% confidence intervals are used, meaning that there is a 95% chance that the true value lies in the interval range or that there is only a 1 in 20 chance that it falls outside this range. In general rates based on small numbers will have a wide confidence interval indicating the greater degree of chance variation that can occur with small numbers.

Life Expectancy - Life expectancy at birth is defined as the age to which the average new born would live if they were to experience the current average mortality rates.

Directly Standardised Rates (DSR) - A rate that allows comparisons between populations with differing population characteristics (age/sex). Annex 3 explains the method more fully.

Family Health Service Register (FHS Register) - A register of any Dudley resident who is registered with a doctor.

Finished Consultant Episodes (FCEs) - A period of care under one consultant within one hospital. Each treatment under a new consultant results in a new episode being recorded, see Annex 5 for more information.

Hospital Episode Rates - These are rates that are calculated using FCEs. They are not calculated using the number of admissions to hospital. Further details are included in Annex 5.

Index of Multiple Deprivation (IMD) - The IMD was published in 2004. It takes a range of variables and calculates an overall index. It can also be broken down to various domains looking at specific aspects of deprivation.

International Classification of Disease (ICD) - The International Classification of Disease coding system.

Neuroses - Neuroses includes severe phobias, severe anxiety disorders, obsessive-compulsive disorder, reaction to severe stress and adjustment disorders, dissociative disorders (where the integration of past memories and awareness of identity and immediate sensation is lost), somatoform disorders (in which physical symptoms appear to have no physical basis) and other rarer neurotic disorders and those of an unspecified nature.

Our Healthier Nation (OHN) (1999) - The government White Paper outlining the strategy to improve the nations general health.

Output Area (OA) - The smallest area at which 2001 Census data are published.

Office for National Statistics (ONS) - Government agency responsible for the collection and dissemination of data within the UK. www.statistics.gov.uk

Primary Care Trust (PCTs) - NHS trust responsible for the planning and securing of health services and improving the health of the local population.

Standardised Mortality Ratio (SMR) - SMRs allow comparisons to be made between populations with different characteristics (age/sex). See Annex 3 for a more detailed explanation.

Super Output Area (SOA) - SOAs are a grouping of output areas for more robust analysis. The grouping aims to keep OAs with similar characteristics together

Years of Lost Life (YLL) - This is a measure of the impact of a disease on the life expectancy of a population. The YLL are the difference between the expected age at death (74.5 years) and the observed age at death, see Annex 3 for more details.

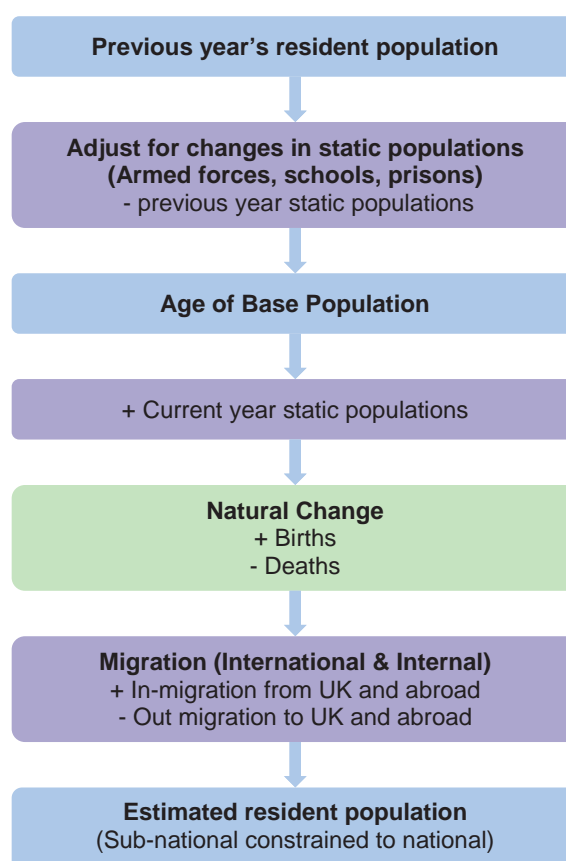
Source of Population Data

There are a number of different possible sources of population data that can be used. These are listed below with a description of the data and any limitations.

Census data - The Census is a survey that is carried out every 10 years. The last census was in 2001. By law every person in England and Wales should be counted in the Census. However, there are problems with certain groups being under-enumerated; for example certain ethnic groups. The Census gives us the most comprehensive population data. Information is recorded for a number of variables and this is disseminated at a number of levels; Nationally, Counties, Strategic Health Authorities, Local Authorities, PCTs, Wards and where disclosure rules enable output areas. Output areas usually cover approximately 125 households. One thing to consider when using Census data is its timeliness. Obviously if you are using data close to when the Census was carried out then this shouldn't be an issue, however if you are using it say 9 years after it was carried out then it is pertinent to question the validity of data that is almost 10 years old.

Mid-year population estimates - The latest series of mid-year population estimates (mid-2001 onwards) are based on the 2001 Census and relate to the usually resident population as at 30 June. The estimated resident population of an area

includes all people who usually live there, whatever their nationality. Members of HM and US Armed Forces in England and Wales are included. HM Forces stationed outside England & Wales are not included. Students are taken to be resident at their term time address. A cohort component method is used in the calculation of the population estimates:



Changes to Mortality Data

From January 2001 information on cause of death in England and Wales has been coded using the International Classification of Disease version 10 (ICD 10). Prior to this ICD 9 was used and had been in place since 1979. Obviously since 1979 there have been many developments in medical knowledge and ICD 10 reflects these changes and developments. This change has an impact on mortality data by cause of death, such as a discontinuation of trends for certain causes of death.

The main differences between ICD 10 and ICD 9 are:

- 20 chapters instead of 18.
- Some movement of conditions between ICD chapters (for example conditions of blood). There are some new codes for conditions that have not been previously identified separately.
- Changes in codes assigned to terms in the index.
- Changes in inclusions and exclusions.
- Changes in linkages between categories.
- An expansion of categories – more detailed classification.
- A collapsing of some categories where distinctions are no longer relevant.

There have also been changes in how the underlying cause of death is selected and a modification of the rules that are used to select the underlying cause. The main reason for these changes is to reduce the number of deaths that are assigned to conditions like pneumonia and to increase the number of deaths that are assigned to chronic debilitating diseases. This will have a large impact on the mortality data as on average about 20% of deaths are assigned to pneumonia. These changes will mean that deaths will be coded to different causes of death in ICD 10 com-

pared to ICD 9 and a result of this is that the data will not be easily comparable.

Due to the number of changes from ICD 9 to ICD 10 and the changes in the underlying cause of death selection there are issues around trend analysis and comparing deaths using the two different classifications. In order to enable trend analysis to be carried out and comparisons to be made, comparability ratios can be used. These are used to 'transform' the deaths that have been coded using ICD 9 into the number of expected deaths that there would have been if ICD 10 were used.

It is only possible to apply the comparability ratios to mortality data from 1993 onwards as ONS have stated that they are only valid from this point due to an automated coding system that was introduced in 1993.

Further information about the changes from ICD 9 to ICD 10 can be found on the following website:

www.statistics.gov.uk/icd10mortality

Statistical Methods Used

Within the document there are a number of statistical methods that have been used. This Annex gives a brief explanation of why these methods are used and what they are.

Rates

When comparing different areas it can be misleading to look only at the number of events, as an area that has a larger population will most probably have a greater number of events. The following table demonstrates this:

Area	Population	Number of population with disease	Percentage of population with disease
A	350	30	8.57
B	500	30	6

In the above table both areas have the same number of patients with the disease, however if you look at the percentage of the population that has the disease, then you can see that this is higher in area A. If any conclusions had been based on the raw numbers then these would have been incorrect. A percentage is a crude rate, it expresses the frequency that something happens per 100 people. Rates express the frequency that an event has occurred for a given population, for example per 100, per 1,000, per 100,000. Confidence intervals can be calculated around rates to determine the statistical significance of any differences observed.

Standardised rates

Population groups vary in a number of ways, for example different age and sex structures. The different population compositions can influence rates. For example if an area has a higher proportion of females than another area then there is a possibility that this area will have a greater number of people with typically female diseases (e.g. breast cancer). If crude rates are used it would not take into account the differing population structures and again conclusions can be drawn that

are not valid. In order to account for these differences a technique called standardisation is used. When comparing standardised rates, if there is still a difference between areas, then this difference cannot be attributed to the different underlying population characteristics that have been taken into account. It can be said that there is a 'real' difference. Confidence intervals can be calculated for standardised rates to determine whether observed differences are statistically significant. Rates are often standardised by age or sex to remove the effect of the population differences and enable valid comparisons to be made.

There are two types of standardisation that are used; direct and indirect.

Direct Standardisation

A directly standardised rate is the rate of events that would occur in a standard population, if that population were to experience the population characteristics of the population of interest. Generally the population that is used as the standard is the European Standard Population. If we were to calculate directly age standardised rates (DASRs) with Dudley as our population of interest, we would apply the mortality rates that occurred in Dudley, to the standard population. This would give us the expected number of deaths that would occur, if the standard population had the same age structure as Dudley. Direct standardisation is the preferred method to use when comparing a number of populations against each other using the same standard population.

Indirect Standardisation

Indirect Standardisation uses the opposite method to direct standardisation. The Standard Population rates are applied to the population of interest to give an expected number of events, these expected number of events are then compared to the observed number of events. This is generally called Indirect Standardisation and is expressed as a ratio, the ratio is usually multiplied by 100. The standard

Annex 3

population will have a ratio of 100. Ratios greater than 100 in the populations of interest indicate that the number of events that occurred is higher than expected. Ratios below 100 indicate that the observed number of events was lower than expected.

Years of Life Lost

Another statistical measure or method that is used is Years of Life Lost (YLL). This is a measure of premature mortality. It is used to compare the importance of different causes of death within populations. Diseases that cause the greatest number of YLL, have the greatest impact on the population. YLL quantifies the impact that a disease has on a population.

YLL can be age standardised. As mentioned previously, standardisation can eliminate the effects of population differences, enabling geographical comparisons to be made.

Small Numbers

When carrying out analysis on smaller geographical areas the number of events in question are likely to be much smaller than looking at the larger areas. Small numbers can be unstable, a small fluctuation in numbers can lead to a large fluctuation or change in the rate that has been calculated. There are a number of ways of adding stability to data. Years of data can be aggregated and trend data can be used. Commonly, Confidence Intervals are calculated. These give the range in which we can be fairly certain that the true figure or rate will lie. Normally 95% limits are calculated, giving us a range within which we can be 95% certain that the true value lies.

Life Expectancy

The calculation of life expectancy requires two sets of data, all cause mortality and population. Both need to be broken down by age and sex. The method used in this report uses data broken down by 5-year age bands, with under 1s and 0-4s being separated because the mortality patterns in these groups are very different. The calculation involves calculating the average proportion dying in each age group and the average age in that age group being applied to this proportion. For all but the last age group this average age is simply the mid-point of the group (e.g. for 60-64 year-olds it is 62.5—as this group includes people up to age 64 years and 364 days). The final age-group is open ended and the calculation of the average age in this group is based on an assumption of an exponential distribution of deaths.

Confidence intervals are then calculated around the life expectancy using a method developed by Chiang (Chiang C L (1978) Life Table and Mortality Analysis, World Health Organisation).

Our Healthier Nation

Our Healthier Nation is a national action plan for tackling poor health published in 1999. There are two goals of Our Healthier Nation:

- Improving the health of everyone and
- Narrowing the health gap, by improving the health of the worst off.

To reach these targets it was decided to tackle four major causes of preventable illness and premature death. These four areas are:

- Cancer;
- Circulatory Disease (coronary heart disease, stroke and related diseases);
- Accidental injury;
- Mental Illness.

These four disease areas account for approximately 75% of all deaths in England under the age of 75, therefore any change or reduction in these areas should have a significant impact on the health of the population.

Nationally targets have been set for the above areas, the aim of these targets is to concentrate action where it is needed, they focus strategy. The targets have also been applied locally. The targets are:

- Cancers - To reduce the death rate from all cancers amongst those aged under 75 by at least 20% by the year 2010;
- Circulatory Diseases - To reduce the death rate from heart disease, stroke and related conditions in those aged under 75 years by at least 40% by the

year 2010;

- Accidents - To reduce the death rate from accidents amongst people of all ages by at least 20% by the year 2010 and to reduce the rate of serious injury by at least 10% by 2010;
- Mental Health - To reduce the suicide rate amongst people of all ages by at least 20% by the year 2010;

The targets are calculated using 1995-1997 as the baseline year, that is, the improvement is compared with 1995-1997 data. The exception to this is the serious injury from accidents target. This has a baseline year of 1995/1996 (single financial year). The reason that this target is based on a single year is that the numbers are relatively large and there are problems with the consistency of definitions for previous years, this inconsistency is an implication of the move to ICD 10 coding for Hospital Episode Statistics.

The table over the page shows the local targets for each of the indicators and also gives some detail about the definition of the target.

Annex 4

Our Healthier Nation Targets

Target Areas	National Target	Local Target	Baseline Year	Definition of target
Cancer	Reduce death rate from all cancers in the under 75s by at least 20% by the year 2010	2010 target 113.4 per 100,000	1995-1997 141.8 per 100,000	ICD 10 C00-C97 ICD 9 140-208
Circulatory Diseases	Reduce death rate from circulatory diseases in the under 75s by at least 40% by 2010	2010 target 88.9 per 100,000	1995-1997 148.3 per 100,000	ICD 10 I00-I99 ICD 9 390-459
Accidents	Reduce deaths from accidents in people of all ages by at least 20% by 2010 Reduce serious injury from accidents (injury must require a stay of 4 or more days in hospital, in people of all ages by at least 10% by 2010	2010 target for death rates 9.7 per 100,000	1995-1997 for death rates 12.1 per 100,000	ICD 10 V01-X59 ICD 9 E800-E928 excluding E870-E879
Suicide	Reduce deaths from intentional self harm and injury undetermined (excluding verdict pending) in people of all ages by at least 20% by 2010	2010 target 7.4 per 100,000	1995-1997 9.2 per 100,000	ICD 10 X60-X84, Y10-Y34 excluding Y33.9 ICD 9 E950-E959, E980-E989 excluding E988.8

Hospital Episode Data

Hospital Episode data or Hospital Episode Statistics (HES) is a database that is collated by the Department of Health. This database is a record of each patient that has been admitted to hospital to receive treatment.

These data are useful to monitor morbidity (illness) within populations. A measure that is used is Finished Consultant Episodes (FCEs). When a patient is admitted to hospital they are allocated to a consultant for care, once the patient leaves the care of that particular consultant, this is called an FCE. This can be said to be a - measure of patients receiving care for particular conditions.

There are a number of things that need to be considered about FCEs. There is an element of over-counting using FCEs. This is because a patient can be admitted to hospital and then allocated to a consultant, however they can then be assigned to or transferred to another consultant. This transfer would then be considered a new

episode. There would be an FCE for the first consultant and once care is completed with the second consultant this would be another FCE. FCEs are not admissions to hospital. If admissions were considered in the above example there would only be one admission but two FCEs.

Another factor that needs to be taken into consideration when using these data are their accuracy or quality. There may be a variation in the completeness of hospital records, the accuracy of coding of procedures and general coding quality. This is an issue both in terms of comparing areas using HES but also when comparing trend data.

Information about HES is available on the Department of Health website:

<http://www.dh.gov.uk/en/publicationsandstatistics/statistics/hospitalepisodestatics/index.htm>

Annex 6

ICD Code Definitions

Cause	ICD 10 Codes	Equivalent ICD9 Codes
All Circulatory Diseases	I*	390 to 459
Hypertensive Disease	I10 to I15	401 to 405
CHD	I20 to I25	410 to 414
Acute Myocardial Infarction	I21 to I22	410
Heart Failure	I50	428
Stroke	I60 to I69	430 to 438
All Cancers	C*	140 to 208
Stomach Cancer	C16	151
Colorectal Cancer	C18 to C20	153, 154.0, 154.1
Lung Cancer	C33 to C34	162
Skin Cancer	C43	172
Breast Cancer	C50	174
Cervical Cancer	C53	180
Prostate Cancer	C61	185
Leukaemia	C91 to C95	204 to 208
All Respiratory Diseases	J00 to J99	460 to 519
Pneumonia	J12 to J18	480 to 486
Lower Respiratory Infection	J20 to J22	466
Chronic Respiratory Conditions	J40 to J47, J67	490 to 496
COPD	J40 to J44	490 to 492, 496
Bronchitis and Emphysema	J40 to J43	490 to 492
Asthma	J45 to J46	493
Bronchiectasis	J47	494
Chronic Respiratory Failure	J96.1	519
Diabetes Mellitus	E10 to E14	250
Epilepsy	G40 to G41	345
Schizophrenia	F20, F21, F23.2, F25	
Neuroses	F40 to F48	
Gastric, Duodenal and Peptic Ulcers	K25 to K27	531 to 533
Chronic Liver Disease and Cirrhosis	K70, K73 to K74	571
Chronic Renal Failure	N18	585
Accidents ^a	V01 to X59	E800 to E928 except E870 to E879
Road Traffic Accidents	V01 to V79	E810 to E819
Accidental Falls	W00 to W19	E880 to E886, E888
Suicides and Undetermined Injury	X60 to X84, Y10 to Y34 except Y33.9	950 to 959, 980 to 989, except 988.8
Infectious and Parasitic Diseases	A00 to B99	001 to 139

a The definition for hospital admissions for accidents is ICD10 S00 to T98 AND an external cause code V01 to X59 or Y40 to Y84

ICD Code Definitions

Cause	ICD 10 Codes	Equivalent ICD9 Codes
Chronic Conditions Usually Managed in Primary Care Includes <ul style="list-style-type: none"> • Asthma • Diabetes Mellitus 	J45 to J46 E10 to E14	493 250
Alcohol Related Diseases Includes <ul style="list-style-type: none"> • Mental and behavioural disorders due to alcohol • Alcoholic cardiomyopathy • Chronic liver disease and cirrhosis • Accidental poisoning by exposure to alcohol 	F10 I42.6 K70, K73, K74 X45	291, 303, 305.0 425.5 571 E860
Drug Related Diseases Includes <ul style="list-style-type: none"> • Mental and behavioural disorders due to use of drugs, solvents and other psychoactive substances • Accidental poisoning due to drugs • Intentional self-poisoning due to drugs • Assault by drug substances • Poisoning by drugs with undetermined intent 	F11 to F16, F18 to F19, X40 to X44 X60 to X64 X85 Y10 to Y14	292, 304, 305.2 to 305.9 E850 to E858 E950.0 to E950.5 E962.0 E980.0 to E980.5
Smoking Related Diseases Includes proportions ^a of: <ul style="list-style-type: none"> • Upper Respiratory Tract Cancer (73%) • Oesophageal Cancer (71%) • Stomach Cancer (27%) • Pancreatic Cancer (29%) • Lung Cancer (87%) • Endometrial Cancer (-20%)^b • Bladder Cancer(40%) • Kidney Cancer 28%) • Cancer of Unspecified Site (20%) • Myeloid Leukaemia (16%) • Parkinson's Disease (-45%)^b • CHD (9%-58%)^c • Myocardial Degeneration (20%) • Cerebrovascular Disease (2%-55%)^c • Atherosclerosis (19%) • Aortic Aneurism (64%) • Pneumonia (19%-40%)^c • COPD (86%) • Stomach/Duodenal Ulcer (56%) 	C14.0, C32 C15 C16 C25 C33 to C34 C54 C67 C64 C80 C92 G20 I20 to I25 I51.5 I60 to I69 I70 I71 J18 J44 K25 to K26	149.0, 161 150 151 157 162 182 188 189.0 199.1 205 332.0 410 to 414 429.1 430 to 438 440 441 486 496 531 to 532

a From studies, it has been calculated that proportions of these diseases are attributable to smoking. The percentages shown are for both sexes, actual figures used in this report differ for males and females.

b There is a negative association between smoking and Endometrial Cancer and Parkinson's Disease, indicated by the negative percentage attribution.

c The proportion of deaths from CHD, cerebrovascular disease (stroke) and pneumonia attributable to smoking varies with age group as well as sex.

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