



WHAT KILLS AMERICANS

The United States is among the world's richest nations, but compared to 16 high-income peers, Americans don't live as long, they have more diseases and they are more apt to be injured.

Those health disadvantages hold true across all ages from birth to 75 and economic statuses, according to a report from the National Research Council and Institute of Medicine. It said even advantaged Americans — the insured, well educated, wealthy and those with good health habits — fare worse health wise than their peers in other rich nations.

Those who do the worst are Americans under 50. They die from guns and car accidents and drug addiction, among other causes. But the causes are complex and sometimes elusive, the report said.

"The U.S. health disadvantage cannot be attributed solely to the adverse health status of racial or ethnic minorities or poor people, since recent studies suggest that even highly advantaged Americans may be in worse health than their counterparts in other countries," it said. The problem is worse for those who are poor, but in each economic category other peer countries fare better.

A panel looked at health outcomes in the United States compared to those in Australia, Austria, Canada, Denmark, Finland, France, Germany, Italy, Japan, Norway, Portugal, Spain, Sweden, Switzerland, The Netherlands and the United Kingdom, tracking historical trends dating back decades, but focusing on data from the late 1990s to 2008. The findings are captured in a 378-page report.



Men ranked last in life expectancy among the 17 nations compared; women came in at No. 16, ahead of Denmark.

"We were struck by the gravity of these findings," Dr. Steven H. Woolf, panel chairman and head of the Department of Family Medicine at Virginia Commonwealth University, said in a written statement. "Americans are dying and suffering at rates that we know are unnecessary because people in other high-income countries are living longer lives and enjoying better health. What concerns our panel is why, for decades, we have been slipping behind."

He told the New York Times that, "this is not the product of a particular administration or political party. Something at the core is causing the U.S. to slip behind these other high-income countries. And it's getting worse."

America did badly by comparison to peers in nine categories, including bad birthing outcomes that ranged from low birth weight to high infant mortality numbers; injuries and homicides; teen pregnancy and sexually transmitted illnesses; HIV and AIDS; drug-related deaths; obesity and diabetes; heart disease; chronic lung disease; and disability.

The first half of the list, the report noted, hits young Americans really hard. "Deaths that occur before age 50 are responsible for about two-thirds of the difference in life expectancy between males in the United States and peer countries and about one-third of the difference for females." It is also, it noted, a problem that has grown worse over time.

There were sweet notes buried in the bad news. After age 75, Americans have higher survival than most countries. More Americans are screened for and survive cancer. They are better at controlling both blood pressure and cholesterol and have fewer stroke-related deaths. Fewer Americans smoke. And we don't have more suicides compared to the international average. The study also noted that "the nation's large population of recent immigrants is generally in better health than native-born Americans."

With those exceptions, though, "Americans under 75 fare poorly among peer countries on most measures of health. This health disadvantage is particularly striking given the wealth and assets of the United States and the country's enormous level of per capita spending on health care, which far exceeds that of any other country."

Among possible reasons cited in the report are communities built for vehicle travel, rather than walking or biking, American patterns of food consumption, risky behavior by American adolescents, stressful environments and polluted air, among others.

The panel that produced the report suggested better data collection and collaboration to make it easier to study what's going on. It said the National Institutes of Health and others should improve study methods to explain the differences in health between nations.

It also called for national health objectives, an education campaign to let the public know what's happening and creation of innovative policies to tackle the disadvantages.

"The consequences of not attending to the growing U.S. health disadvantage and reversing current trends are predicable: The United States will probably continue to fall further behind comparable countries on health outcomes and mortality," the report's summary said. "In addition to the personal toll this will take, the drain on life and health may ultimately affect the economy and the prosperity of the United States as other countries reap the benefits of healthier populations and more productive workforces."

"Research is important, but we should not wait for more data before taking action, because we already know what to do. If we fail to act, the disadvantage will continue to worsen and our children will face shorter lives and greater rates of illness than their peers in other rich nations," Woolf said.

The full report is available at http://www.nap.edu/catalog.php?record_id=13497.