

All Cause Premature Mortality

Error bars (I) denote 95% confidence intervals. Source: Ontario Mortality Data 2003-2004, Provincial Health Planning Database (PHPDB) Ver. 18.01, Ontario MOHLTC. Ontario Mortality Data 2001, Statistics Canada, June 2008.

Premature mortality is defined in this report as death that occurs before the age of 75 years. In Toronto, the age standardized premature death rate was 309 per 100,000 per year for males and 199 per 100,000 per year for females.

complete data for postal code. Three years of data are required for this type of analysis.

There was a gradient in all cause premature mortality rates for both males and females across income quintiles in Toronto. Males in the lowest income quintile (Q1) had a rate significantly different from all other income quintiles. The gradient for males was steep with the highest mortality rate (370 per 100,000) in the lowest income quintile and a step-wise decrease in rates to 240 per 100,000 in the highest income quintile (Q5). The female gradient was similar to the male gradient but not as steep. Females in the lowest income quintile had a mortality rate (220 per 100,000) that was significantly higher than those in income quintile 4 (187 per 100,000) and quintile 5 (164 per 100,000). The absolute difference in premature mortality rates was 129 per 100,000 for males in the lowest income quintile compared to the highest income quintile. The difference for females was 55 per 100,000. In relative terms, the premature mortality rate for males in the lowest income quintile was 1.5 times the rate in the highest income quintile, and for females it was 1.3 times the rate in the highest income quintile.

Similar to the quintile analysis, the gradient for Toronto males by income decile was steep with the highest premature mortality rate (410 per 100,000) in the lowest income decile decreasing to 208 per 100,000 in the highest income decile. Females in the lowest income decile also had a higher rate (228 per 100,000) compared to those in the highest income decile (155 per 100,000). The difference in premature mortality rates between the lowest and highest income decile was 203 per 100,000 for males and 73 per 100,000 for females.

If everyone in Toronto was as healthy as the highest income decile (D10) there would be 1,086 or 18% fewer premature deaths per year in Toronto.

The all cause premature mortality rate for Toronto males in the lowest income quintile was 7% above the rate for the rest of Ontario. Across all income quintiles for Toronto females, the rates were lower than for females living in the rest of Ontario.

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