

INTRODUCTION

This national tool-kit was published by Public Health England (PHE) on the 11th June 2013. Both the data and report are available here: <http://longerlives.phe.org.uk/#are//par/E92000001>. The report is presentation of mortality rates from the analysis of data on the four most common causes of premature deaths in England - heart disease and stroke, lung disease, liver disease, and cancer. Variation in the patterns of mortality across the 150 upper tier local authorities for 2009-2011, is presented. The report also describes the variations in each of the four disease groups, and by socio-economic deprivation.

This brief summary examines the pattern for Peterborough; in addition, reports (and data) on associated indicators are reviewed in order to present a comprehensive analysis of mortality for Peterborough.

SUMMARY

The key messages on mortality patterns in Peterborough are as follows:

- Premature mortality from all causes in Peterborough was relatively higher than the national average; with Peterborough ranked 87th nationally. Death rates for both sexes in was 293.7 per 100,000 compared to 267.7/100,000 in England. At Cluster¹ level, Peterborough is ranked 6th out of the 15 local authorities; the cluster average was 294.9/100,000.
- The dataset below is a spine chart summary of the position of Peterborough compared to other areas at national, and cluster level (and level of significance compared to England).

¹ Cluster comprises areas of similar socio-economic and deprivation profiles – Enfield, Camden, Sheffield, Torbay, Plymouth, Peterborough, Hammersmith and Fulham, Darlington, Brighton and Hove, Leeds, County Durham, Luton, Wakefield, Wirral and Wigan.

PETERBOROUGH KEY DATASET - LONGER LIVES 2013

The chart below shows how Peterborough compares with the rest of England. Peterborough's result for each indicator is shown as a circle. The average rate for England is shown by the black line at the centre of the chart. The range of results for all local areas in England is shown as a grey bar. A red circle means that Peterborough is significantly worse than England for that indicator; however, a green circle may still indicate an important public health

- Significantly worse/higher need than England average
- Not significantly different from England average
- Significantly better/lower need than England average
- No significance can be calculated



The 1 and 3 year trend columns show the change in Peterborough's position on the spine.

Domain	Indicator	P'Boro	Cluster	England	England Range	1 Year Trend	3 Year Trend	Time Period	Outcome Frameworks
Healthy life	5 Early deaths from cancer considered preventable (rate per 100,000 population aged under 75)	106.1	115.5	108.1	[Bar chart showing England Range, England average, 25th and 75th Percentiles, Cluster average, and Peterborough's position]	no data	no data	2009-11	n/a
	6 Early deaths from cardiovascular diseases considered preventable (rate per 100,000 population aged under 75)	77.7	68.2	60.9	[Bar chart showing England Range, England average, 25th and 75th Percentiles, Cluster average, and Peterborough's position]	no data	no data	2009-11	n/a
	7 Early deaths from lung diseases considered preventable (rate per 100,000 population aged under 75)	30.2	26.4	23.4	[Bar chart showing England Range, England average, 25th and 75th Percentiles, Cluster average, and Peterborough's position]	no data	no data	2009-11	n/a
	8 Early deaths from liver diseases considered preventable (rate per 100,000 population aged under 75)	14.8	17.8	14.4	[Bar chart showing England Range, England average, 25th and 75th Percentiles, Cluster average, and Peterborough's position]	no data	no data	2009-11	n/a
	9 Early deaths from all diseases considered preventable (rate per 100,000 population aged under 75)	294	295	268	[Bar chart showing England Range, England average, 25th and 75th Percentiles, Cluster average, and Peterborough's position]	no data	no data	2009-11	n/a

- Of the top four conditions, cancer is the most common cause of death in Peterborough, and across the country. Comparative figures for all cancer death rates in Peterborough, (ranked 65th nationally) is 106.1/100,000, which is slightly lower (but not statistically significant) than that for England, 108.1/100,000. Within its Cluster², Peterborough is ranked the third lowest within its Cluster, which has an overall average rate of 115 /100,000.
- The next most common cause of death is heart disease and stroke, with death rates for Peterborough at 77.7/100,000. Peterborough is however, ranked in the top 25% of relatively high death rates nationally (123 out of 150), and ranked the highest in the Cluster.
- Lung disease death rates at 30.2/100,000 ranks Peterborough in the top 25% of highest rates nationally (113 out of 149), and 2nd highest in the Cluster.
- Liver disease death rates for Peterborough are 14.8/100,000. At national level, the council is ranked 74th (out of 149), and ranked the highest within the Cluster.
- Death rates from liver disease is around 15/100, 000, significantly higher than the national rate of 14.2/100,000 but lower than that for the Cluster, 17.8 per 100,000.

CONCLUSION

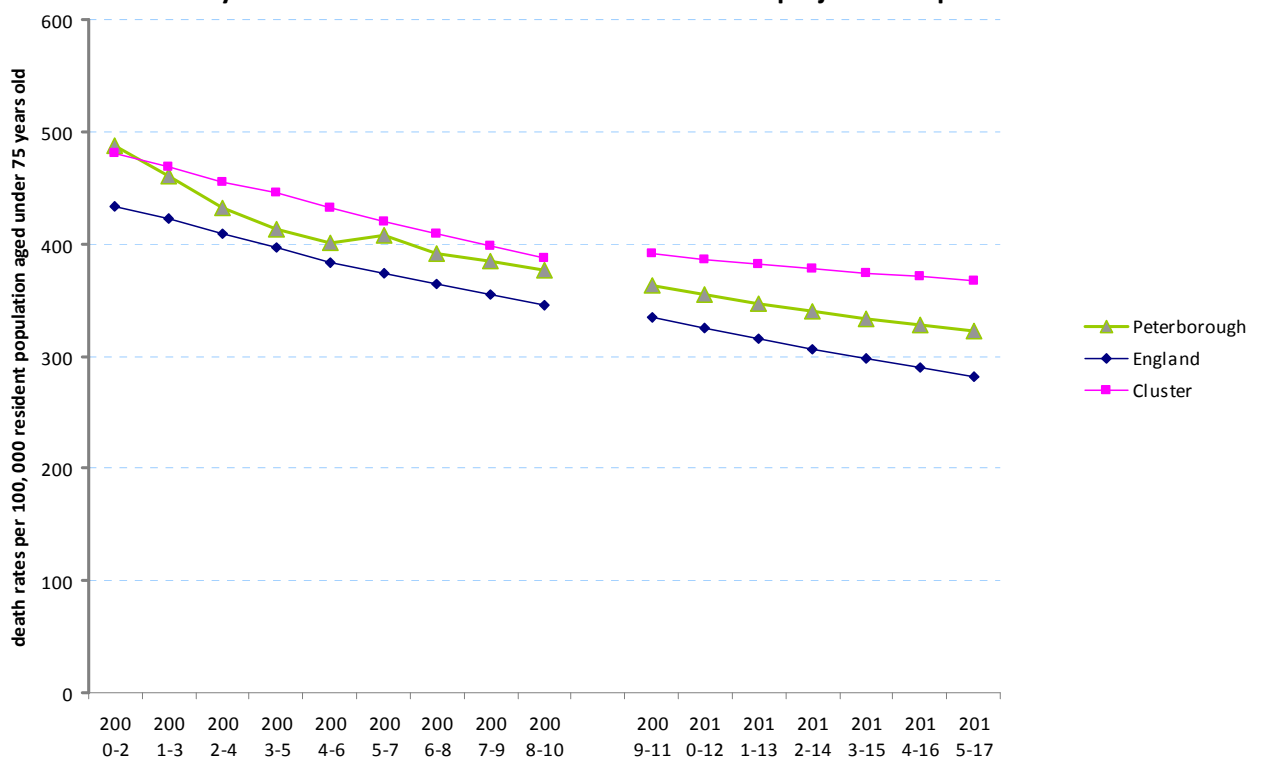
Peterborough is ranked as one of the more deprived local authorities across England, and the snapshot of premature mortality as presented in the *Longer Lives* report indicates the area has one of the poorer health outcomes from the top four causes of death. These messages, in

² Cluster is areas of similar socio-economic and deprivation profiles – Enfield, Camden, Sheffield, Torbay, Plymouth, Peterborough, Hammersmith and Fulham, Darlington, Brighton and Hove, Leeds, County Durham, Luton, Wakefield, Wirral and Wigan.

isolation, are insufficient evidence of the health of the local population, and it would be appropriate to review the evidence from the analysis of related data to enable a more complete reflection of the current health profile in Peterborough to be presented. Some of the findings are indicated as follows:

- Analyses of data over a longer period indicate a declining trend in mortality in Peterborough, which is consistent with the pattern observed nationally (although at variable rates).
- In the last decade up to 2010, premature mortality in men was down by almost 23% - death rates of 488 per 100,000 in 2000 to 376 per 100,000 in 2010. This rate of decline was observed to be relatively faster than that for England (21%) and the Cluster (19%) in the same period. However, the inequality in mortality (as indicated by the death rates) between Peterborough and England persist, with the rates per 100,000 projected to increase from 31 male deaths in 2010 to 41 male deaths by 2016 suggesting a relatively faster declining mortality trend in England compared to Peterborough. This is in contrast to comparisons with the Cluster – the difference in mortality rates per 100,000 in 2010 (11 male deaths) is projected to get even wider, with 45 more male deaths per 100,000 at Cluster level compared to Peterborough by the year 2016.

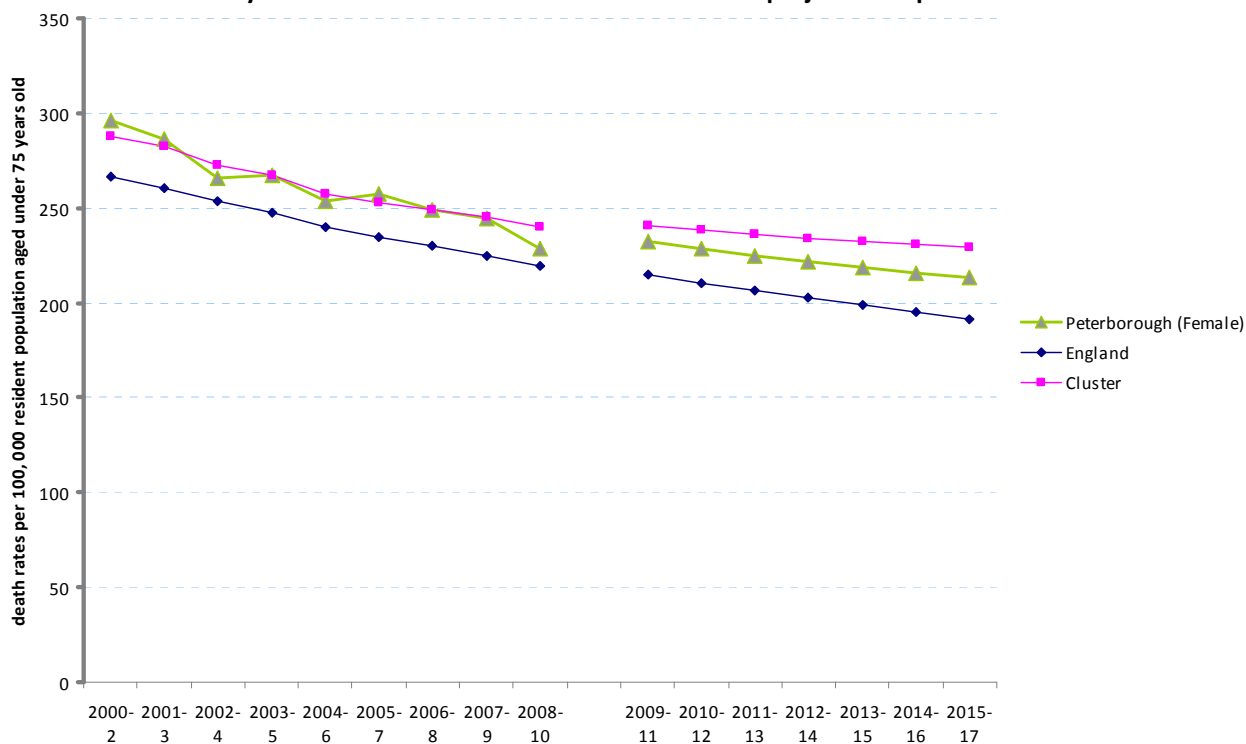
Fig 1: Male premature mortality trend in Peterborough, Cluster and England
Directly standardised rates. 2000-2 to 2008-10. And projections up to 2015-17



Source: <https://indicators.ic.nhs.uk/webview/>

- The decreasing trend (fig 2) is also mirrored for females; and projections indicate an even faster rate of decline nationally (10.5%) than for Peterborough (5%), which suggests a wider inequality in the mortality pattern between Peterborough and England by 2016.

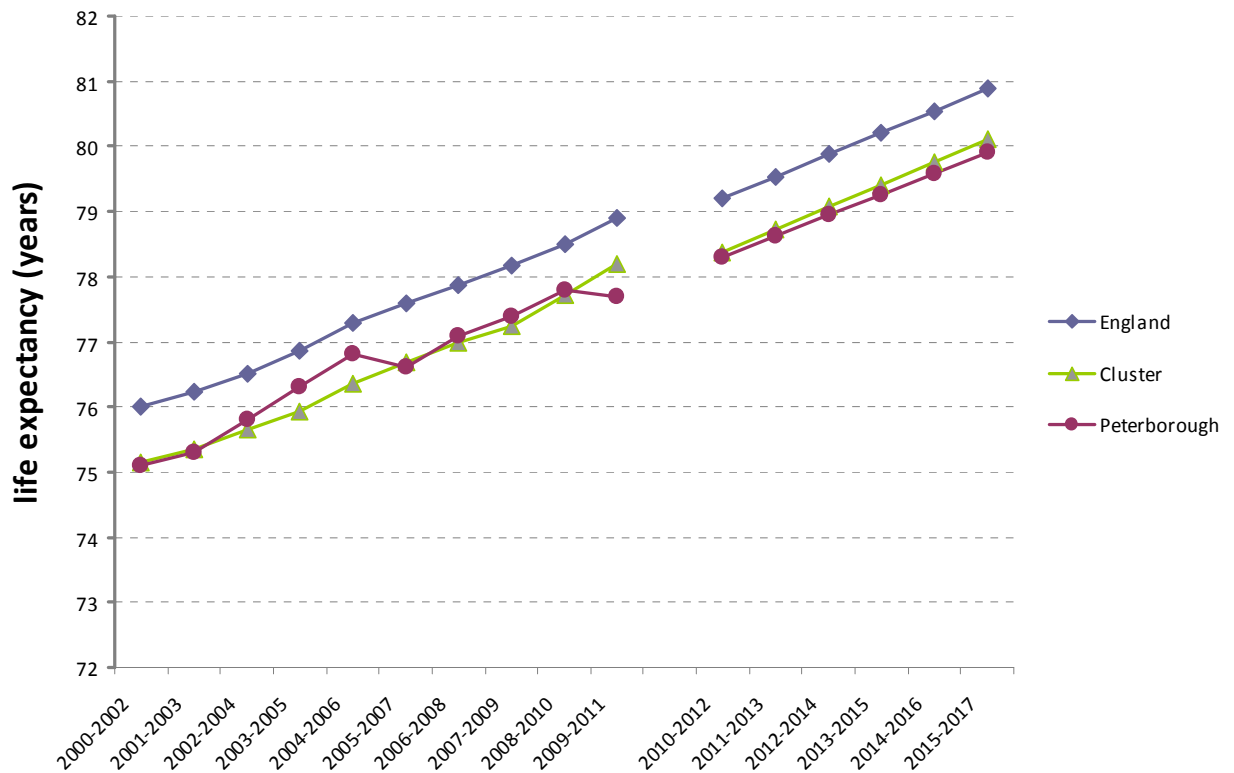
Fig 2: Female premature mortality trend in Peterborough, Cluster and England
Directly standardised rates. 2000-2 to 2008-10. And projections up to 2015-17



Source: <https://indicators.ic.nhs.uk/webview/>

- **Male life expectancy (LE):** a male child born today in Peterborough (fig 3) is expected to live an estimated 77.7 years, a 3.5 percent increase from nearly a decade ago. It is projected that by the year 2016, these figures will increase by up to a further 3 percent to an estimated 79.9 years by 2016. This will result in a reduced difference in LE between Peterborough and England from about 1.2 years now to around 1 year by 2016. Corresponding figures at Cluster level for males indicate higher LE rates than for Peterborough, at an estimated 78.2 years, with the gap between the Cluster and England expected to narrow by about 0.2 years by 2016.

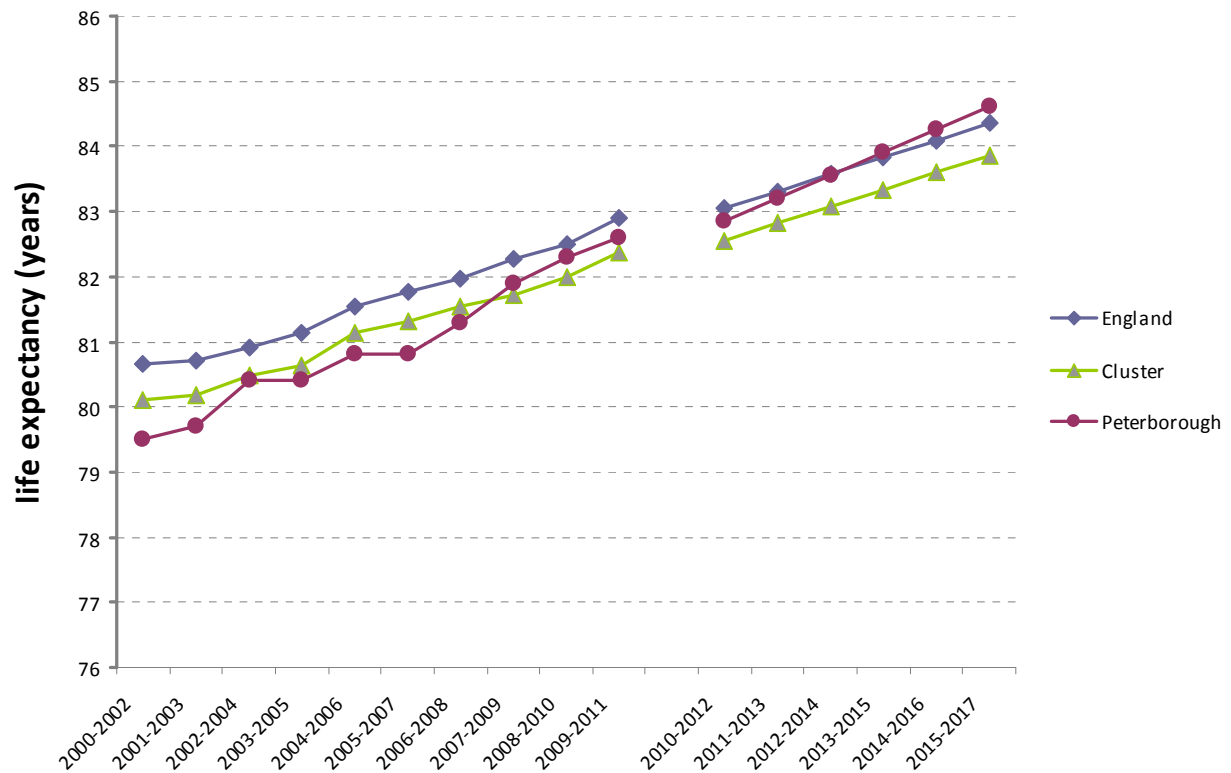
Fig 3 Male life expectancy at birth in Peterborough, Cluster and England. Trends and Projections. 2000-2 to 2009-11 (and 5-year projection)



Source: <http://www.ons.gov.uk/ons/rel/subnational-health4/life-expectancy-at-birth-and-at-age-65-by-local-areas-in-england-and-wales/2009-11/stb.html>

- Female life expectancy:** a female child born today in Peterborough (fig 4) is expected to live an estimated 82.6 years, a 3.9 per cent increase in LE from 2000-2, a pattern that has remained consistently higher than that for the cluster (and lower than for England. This increasing improvement in Peterborough, and indeed as in other parts of the country, is projected to continue. As indicated in the chart (fig 4), the trend suggests that from 2014 onwards, female life expectancy in Peterborough is likely to overtake that for England, going up a further 2.5% to an estimated 84.6 years by 2016 compared to 84.3 years and 83.9 years for England and the Cluster respectively.

Fig 4. Female life expectancy at birth in Peterborough, Cluster, and England. Trends and Projections. 2000-2 to 2009-11 (and 5-year projection)



Source: <http://www.ons.gov.uk/ons/rel/subnational-health4/life-expectancy-at-birth-and-at-age-65-by-local-areas-in-england-and-wales/2009-11/stb.html>

The message on Peterborough’s health as suggested from the *Longer Lives* publication would need to be associated with other sources of information so as to provide a complete picture of health in Peterborough. Further work will be undertaken and presented as part of the JSNA refresh.

Author: Remi Omotoye
Senior Public Health Analyst

30 August 2013