

Leading Causes of Death, by Gender

Between 2002-2004, there were more deaths among women (10,865) than men (9,841) in Contra Costa. This means that approximately 3,622 women and 3,280 men in the county die each year.

The age-adjusted death rate from all causes is 29% higher among men (806.7 per 100,000) than women (623.0 per 100,000) in the county.

Heart disease, cancer and stroke are among the three leading causes of death for both men and women. Other leading causes of death that differ by gender are unintentional injuries (for men) and Alzheimer's disease (for women).

- Heart disease, cancer and stroke are among the top three causes of death for both men and women.
- Men have higher death rates than women for heart disease, cancer and unintentional injuries.
- Women have higher death rates than men from Alzheimer's disease.

Leading Causes of Death in Men
Table 1. Contra Costa County 2002–2004



Editor's note:
The unintentional injury rate here differs slightly from others in the report. See this section's table notes for further explanation.

	Deaths	Percent	Rate
Heart disease	2,605	26.5%	*219.0
Cancer	2,352	23.9%	*189.0
Stroke	669	6.8%	58.6
Unintentional injuries	517	5.3%	*36.8
Chronic Lower Respiratory Disease	458	4.7%	39.7
Contra Costa Men ^a	9,841	100.0%	*806.7

^aTotal includes deaths from all causes, including but not limited to those listed above. These are age-adjusted rates per 100,000 men.
*Significantly higher rate compared to women.

The three leading causes of death among Contra Costa men -- heart disease, cancer and stroke -- account for 57.2% of male deaths. The fourth and fifth leading causes of death among men in the county are unintentional injuries and chronic lower respiratory disease.

Among these leading causes of death, men in the county are more likely to die of heart disease, cancer and unintentional injuries than women. The age-adjusted death rates among men from heart disease (219.0 per 100,000), cancer (189.0 per 100,000) and unintentional injuries (36.8 per 100,000) are higher than women's death rates from these causes.



Leading Causes of Death in Women

Table 2. Contra Costa County 2002–2004

	Deaths	Percent	Rate
Cancer	2,706	24.9%	**160.0
Heart Disease	2,675	24.6%	**149.7
Stroke	1,014	9.3%	56.5
Chronic lower respiratory disease	625	5.8%	36.4
Alzheimer's Disease	421	3.9%	*22.8
Contra Costa Women ^a	10,865	100.0%	**623.0

^aTotal includes deaths from all causes, including but not limited to those listed above.

These are age-adjusted rates per 100,000 women.

*Significantly higher rate compared to men.

**Significantly lower rate compared to men.

The three leading causes of death among Contra Costa women -- cancer, heart disease and stroke -- account for 58.9% of female deaths. The fourth and fifth leading causes of death among women in the county are chronic lower respiratory disease and Alzheimer's disease.

Among these leading causes of death, women in Contra Costa are more likely to die from Alzheimer's disease than men. The age-adjusted death rate from Alzheimer's disease is higher among women (22.8 per 100,000) than men in the county (18.0 per 100,000).



Sources: Leading Causes of Death for Contra Costa, by Gender

Tables:

Tables 1-2: Mortality data from the California Department of Health Services (CDHS), <http://www.dhs.ca.gov/>, Center for Health Statistics' Death Statistical Master File, 2002-2004. Any analyses, interpretations or conclusions of the data have been reached by CHAPE and are not from the CDHS. These tables include total deaths and age-adjusted average annual death rates for 2002 through 2004. In this section, the number of deaths due to unintentional injuries includes late effects. A late effect is the residual effect (condition produced) after the acute phase of an illness or injury has terminated. The late effect can occur at any time. For instance, it may be apparent early, such as in cerebrovascular accident cases, or a late effect could be from an injury that occurred during the previous year- such as wound infection from a deep cut last year.

Chronic lower respiratory disease includes bronchitis, emphysema, asthma and other chronic lower respiratory diseases (Note: The data and conclusions in this section related to unintentional injuries do not match those in the

Injury section of this report because the data in the Injury section do not include late effects and are not age-adjusted.)

Population data from:

California Department of Finance (April 2006). *Estimated Race/Ethnic Population with Age and Sex Detail 2000-2004*. Sacramento, CA.

California Department of Finance (May 2006). E-4 Population Estimates for Cities, Counties and the State 2001-2006, with DRU Benchmark. Sacramento, CA. Available online at: <http://www.dof.ca.gov/HTML/DEMOGRAP/Druhpar.htm>