
CAUSES OF DEATH AND SOCIAL CLASSES IN ROMANIA

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Introduction: The special literature shows the existence of the morbidity and mortality differences between social classes in all the European countries. In each country for which data are available,

chances of premature death were found to be higher among people with a lower educational level, a lower income or a lower social position. In Romania such studies were difficult to be done until now because there was insufficient information on the occupation. In this study we tried to analyse the relations between different social classes and specific causes of death and to evaluate the contribution of these causes in mortality of the different social classes.

Methods: Details from death records and occupations were extracted from the death certificates and working documents of 781 persons who died in the city of Cluj. Deaths were classified by cause according to the International Classification of Diseases, 9th Revision: cancer, ischaemic heart disease, other cardiovascular diseases, cerebrovascular diseases, accidents (including suicide and injury), gastrointestinal diseases, respiratory diseases, and other diseases. Occupational classes were defined according to the British Classification of the Social Classes that divide the occupations in 6 different categories: class I – professional, class II – managers/intermediate, class III (N) – non-manual skilled, class III (M) – manual skilled, class IV – partly skilled, class V – partly unskilled. The data were collected in the Microsoft Excel program and were statistically analysed using the SPSS 10 program. We used descriptive statistical methods and Anova and χ^2 tests.

Results: Among causes of deaths the first place was occupied by cancers (21%), followed by other cardiovascular diseases (20.9%) and ischaemic heart disease (20.2%) compared to gastrointestinal diseases and the respiratory diseases which represented only 0.5% and 4.5% respectively. With quite an equal frequency appeared the accidents (13.3%), other diseases (11.3%) and cerebrovascular diseases (8.3%). The histograms of the death ages for different causes of deaths had a normal distribution. The smallest mean death age was for the accidents and the highest for other cardiovascular diseases. The men died most frequently from ischaemic heart disease, other cardiovascular diseases and cancers, and the women from cancers. Causes of death and sex were strongly associated ($p < 0.001$) and also the occupations and the causes of death ($p < 0.05$). The lowest socio-economic classes (IV and V) die more frequently from other cardiovascular diseases, ischaemic heart disease and cancers, while the highest socio-economic classes (I and II) die from cancers, ischaemic heart disease, accidents and other cardiovascular diseases.

Conclusions: There were statistically significant differences between the frequencies of cancers and other cardiovascular diseases in rural and urban according to sex ($p < 0.05$) and the frequencies of cancers, ischaemic heart diseases, other cardiovascular diseases and other diseases in connection with occupation and place of living ($p < 0.05$).