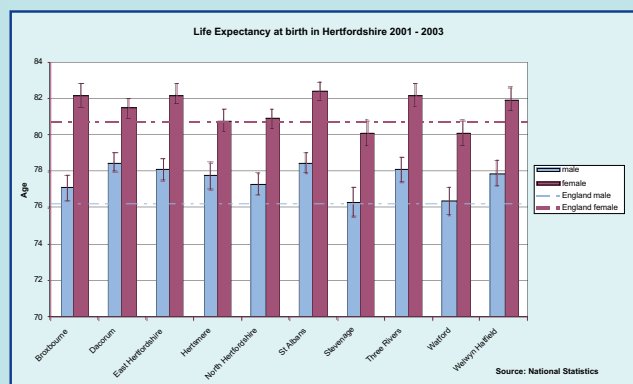




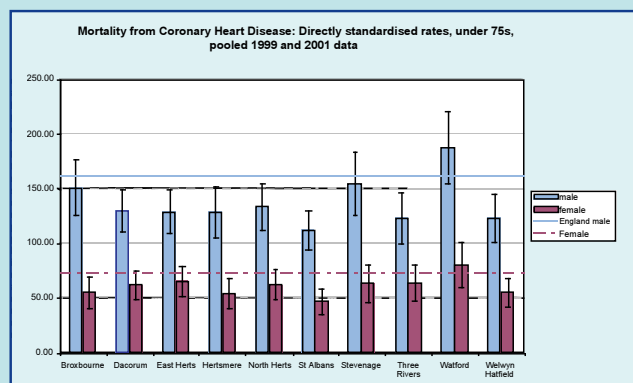
Hertfordshire is in general a very healthy county and the indicators shown in this section clarify and confirm that fact. All areas of the county have a high male life expectancy, and the same can nearly be said for female life expectancy, although in Watford the female life expectancy is slightly below the national average. The next chart shows life expectancy at birth which equates to the average number of years that a baby born in Hertfordshire can be expected to live.

Indicator HE1 – Life expectancy



This indicator not only reflects the impact of outside circumstances such as social situation, economic circumstances but is also a good measure of health status.

Indicator QoL10 – Mortality from circularly disease in the under 75s



One of the areas where Hertfordshire, like the rest of England, does have high mortality is the group of coronary/heart, stroke and other circulatory diseases (CHD).

CHD mortality in men is more common than in women. All districts in Hertfordshire with the exception of Watford have lower rates of mortality from CHD in comparison to England (150 deaths per 100,000 in males; 55 deaths per 100,000 in females). The differences with Watford (higher rate in males, 187 per 100,000; females, 80 per 100,000) are not statistically significant.

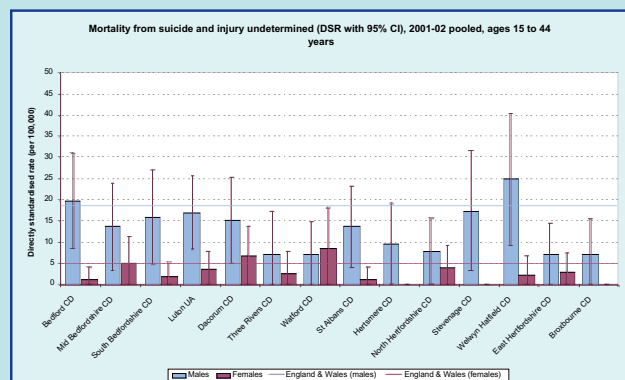
Indicator QoL10 – Mortality from cancer in the under 75s

Cancer is one of the three major causes of death in England and Wales. Again, throughout the county the mortality rate is lower than the national average except for males in Stevenage and females in Dacorum, Hertsmeire and Stevenage.

Lung cancer mortality in Herts (under 75s) ranges from 25.6-51.9 deaths per 100,000 residents in men, lowest in Welwyn Hatfield, and highest in Stevenage (more than England, 39.1 deaths per 100,000). In females, death rates per 100,000 residents range from 14.0-23.5 deaths with the lowest in St Albans and highest in Hertsmeire; Dacorum and Hertsmeire rates are slightly higher than England (21.1 deaths/100000). The differences are not statistically significant.

Death rate from breast cancer in Herts range from 56.5-102.3 deaths per 100,000 female residents (aged 50-69). The lowest was in Broxbourne, and the highest in Three Rivers. Death rates in Three Rivers, Hertsmeire, Watford, St Albans and East Herts were relatively higher than England (68.9 deaths/100,000).

Indicator QoL10 – Mortality from suicide and undetermined injuries, all ages



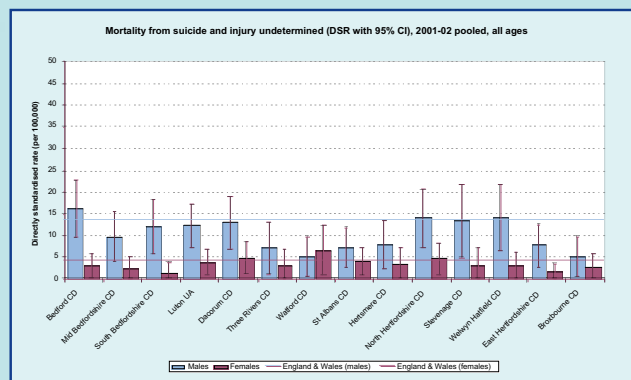
Source: Compendium of Clinical and Health Indicators 2003 (provisional release of 2001/2 figures)



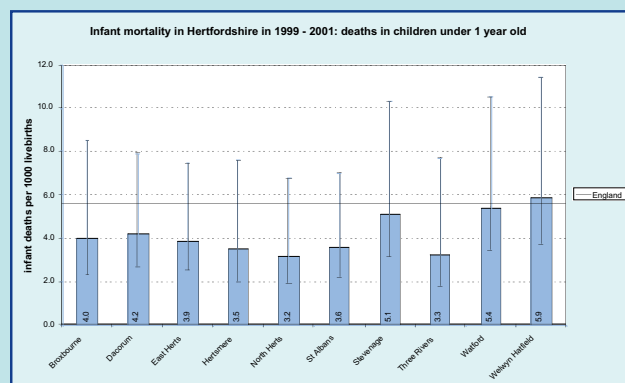
Comparison of mortality in both charts show a relatively higher rate of mortality in younger males, the highest in Welwyn Hatfield, and the lowest in Watford and Three Rivers. The All age mortality chart still shows Welwyn Hatfield as having highest mortality rate in Hertfordshire. Although some bars are higher than the numbers for England and Wales, the confidence intervals show that this may be due to chance. Significant differences may be seen where the confidence intervals are lower than the rate for England and Wales. However, number of deaths are small: an additional event can change the distribution, so findings may have to be carefully interpreted.

was in St Albans (men), and 13.3 deaths per 100,000 population in Dacorum (women). Although some bars are higher than the numbers for England and Wales, the confidence intervals show that this may be due to chance. Significant differences may be seen where the confidence intervals are lower than the rate for England and Wales. However, number of deaths are small: an additional event can change the distribution, so findings may have to be carefully interpreted.

Indicator QoL5 – Infant mortality

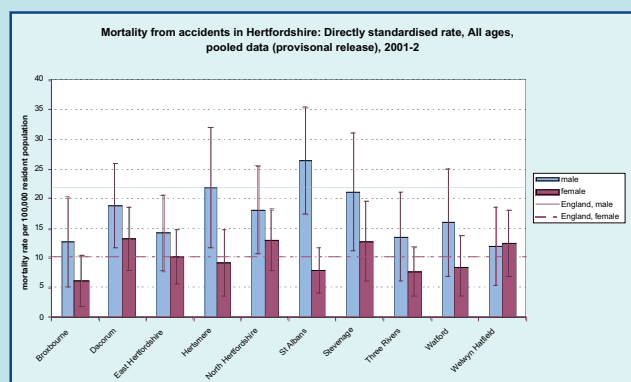


Source: Compendium of Clinical and Health Indicators 2003 (provisional release of 2001/2 figures)



Infant mortality in Hertfordshire is better than the national figures although Welwyn, Hatfield, Watford and Stevenage are near to, or exceed, the national average.

Indicator QoL10 – Mortality from accidents, all ages



Source: Compendium of Clinical and Health Indicators 2003 (provisional release of 2001/2 figures)

Deaths caused by accidents are more common in men than women. The chart below shows the highest rate, 26.3 deaths per 100,000 population

General health

In the Eastern region of the country 70% of the population felt their health was good and 8% felt their health was not good. The England averages were 69% and 9% respectively. This compares to Hertfordshire where 73.1% of the population felt their health was good and 6.6% felt their health was not good. It is interesting to note that limiting long-term illness in the Eastern region is lowest in Royston, Buntingford, Bishops Stortford, St. Albans and Harpenden, and only Welwyn Hatfield nears the halfway point in the percentage of the population with limiting long-term illness in the east of England.

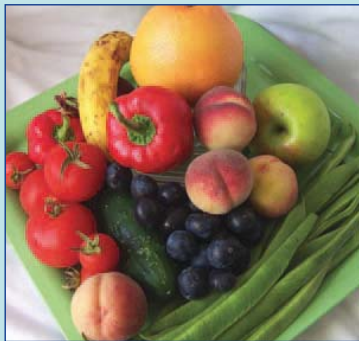
Investing in your health

During the year a consultation was carried out by Beds and Herts Strategic Health Authority into the future of health care in the two counties. This

health



consultation resulted in the Strategic Health Authority being granted permission to move forward with the tremendously ambitious programme for health care in Hertfordshire, which included a major teaching hospital in the Hatfield area and major



improvements to the majority of existing hospitals, and changes to the delivery of health services such as local 'Surgi-Centres' which will be units where minor surgery can take place close to people's homes.

Choosing health

During the year, Local Authorities and Primary Care Trusts were heavily involved in a national consultation called 'Choosing Health' which asked the public and all relevant agencies for their opinions on improving public health and the health of individuals. The results of this consultation

formed the basis for the Government's White Paper," Choosing health: making healthy choices easier" which will shape the future of public health. The priorities for action are:

- Reducing the number of smokers
- Reducing obesity and improving diet and nutrition
- Increasing exercise
- Encouraging sensible drinking
- Improving sexual health
- Improving mental health

A fuller report on the white paper will be made in next year's report.

