

Table 14. Specific Leading Causes of Death^a among Arizona Resident Males, 65 Years and Older, 2002 – 2012

	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	Total	Percent Change 2002 - 2012
Counts by Age Group													
65-74 Years	4,256	4,211	4,164	4,345	4,298	4,225	4,365	4,481	4,622	4,767	5,010	48,744	18
75-84 Years	6,172	6,298	6,064	6,383	6,204	6,046	6,259	6,068	6,163	6,342	6,427	68,426	4
85 Years and Over	4,080	4,057	4,176	4,473	4,620	4,604	4,917	4,960	5,228	5,423	5,664	52,202	39
Total (All Males 65 Years and Older)	14,508	14,566	14,404	15,201	15,122	14,875	15,541	15,509	16,013	16,532	17,101	169,372	18
Counts by Cause of Death													
Atherosclerotic Heart Disease	1,452	1,490	1,485	1,590	1,441	1,401	1,500	1,502	1,534	1,645	1,652	16,692	14
Malignant Neoplasm of Bronchus and Lung (Lung Cancer)	1,022	1,111	1,086	1,060	1,109	1,046	1,100	1,119	1,091	1,138	1,141	12,023	12
Chronic Obstructive Pulmonary Disease (COPD)	883	870	776	897	964	967	858	903	917	963	1,056	10,054	20
Alzheimer's Disease	417	494	504	547	601	605	644	674	738	749	717	6,690	72
Atherosclerotic Cardiovascular Disease	684	724	690	679	674	643	688	724	661	731	689	7,587	1
Acute Myocardial Infarction	1,047	966	896	883	753	690	717	685	599	717	664	8,617	-37
Dementia	275	309	321	325	409	435	433	414	509	560	574	4,564	109
Malignant Neoplasm of Prostate (Prostate Cancer)	510	507	495	512	458	505	500	498	508	519	513	5,525	1
Stroke	525	454	464	458	399	368	401	414	403	393	420	4,699	-20
Parkinson's Disease	249	224	241	285	287	259	296	273	290	309	358	3,071	44
Total	7,064	7,149	6,958	7,236	7,095	6,919	7,137	7,206	7,250	7,724	7,784	79,522	10
Mortality Rates^b													
Atherosclerotic Heart Disease	459.6	458.4	440.8	454.9	404.0	374.3	394.0	391.1	381.9	406.7	385.2		-16
Malignant Neoplasm of Bronchus and Lung (Lung Cancer)	323.5	341.8	322.4	303.3	311.0	279.5	289.0	291.4	271.6	281.3	266.0		-18
Chronic Obstructive Pulmonary Disease (COPD)	279.5	267.7	230.3	256.6	270.3	258.4	225.4	235.1	228.3	238.1	246.2		-12
Alzheimer's Disease	132.0	152.0	149.6	156.5	168.5	161.6	169.2	175.5	183.7	185.2	167.2		27
Atherosclerotic Cardiovascular Disease	216.5	222.7	204.8	194.3	189.0	171.8	180.7	188.5	164.6	180.7	160.7		-26
Acute Myocardial Infarction	331.4	297.2	266.0	252.6	211.1	184.4	188.3	178.4	149.1	177.3	154.8		-53
Dementia	87.1	95.1	95.3	93.0	114.7	116.2	113.7	107.8	126.7	138.4	133.8		54
Malignant Neoplasm of Prostate (Prostate Cancer)	161.4	156.0	146.9	146.5	128.4	134.9	131.3	129.7	126.5	128.3	119.6		-26
Stroke	166.2	139.7	137.7	131.0	111.9	98.3	105.3	107.8	100.3	97.2	97.9		-41
Parkinson's disease	78.8	68.9	71.5	81.5	80.5	69.2	77.8	71.1	72.2	76.4	83.5		6
Total	2,236.1	2,199.5	2,065.4	2,070.1	1,989.4	1,848.7	1,874.8	1,876.3	1,804.9	1,909.5	1,815.0		-19

Notes: ^a Leading Causes of Death are conditions identified as the top conditions for 2012 and defined by the International Statistical Classification of Diseases and Related Health Problems, 10th Revision (ICD-10), 2008 Edition; ^b Age-specific crude mortality rates represent the number of deaths per 100,000 resident females, 65 years of age and older.

5.4 Conclusion

Mortality analyses of Arizona's resident population of older adults reveals changes in mortality trends that can be used to inform and influence public policy as well as track the success of public health initiatives. Chronic diseases that are most detrimental to the oldest Arizonans, exemplified by Alzheimer's disease among females, will become increasingly problematic as the population of older Arizonans expands. Alzheimer's is currently an incurable disease that has few clear causal factors other than age, meaning our healthcare, welfare, and social support systems must prepare for the increasing monetary and social costs associated with caring for older adults experiencing Alzheimer's disease. On the other hand, the mortality rates for a number of the leading causes of death have decreased substantially among Arizona's older adults, namely atherosclerotic heart and cardiovascular disease among both men and women, stroke among women, and both lung and prostate cancer among men. These successes indicate that interventions designed to help older adults lead healthier lives and seek medical treatment when necessary have proven successful for chronic diseases that are somewhat preventable. Even the decrease in leading causes of death such as heart disease and cancer foretell the increased burden that will be exerted in the future by Alzheimer's disease and dementia. Being spared by chronic diseases such as heart disease and cancer that typically cause mortality in the