



## 2A.

### TOTAL MORTALITY

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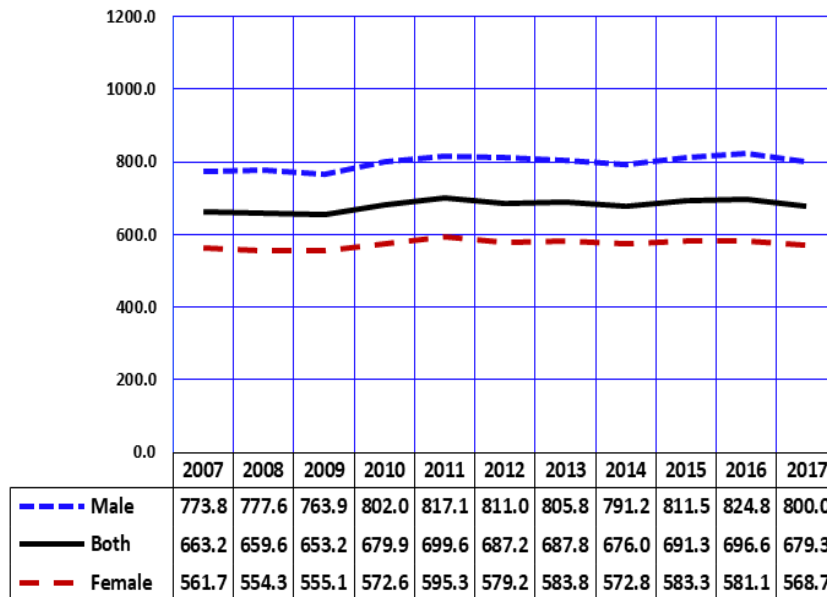
The total number of deaths from all causes among Arizona residents increased by 1.4 percent from 2016 (56,480) to 2017 (57,261; **Table 2A-1**). The age-adjusted mortality rate for all causes of death also increased from 696.6/100,000 in 2016 to 679.3 /100,000 in 2017.

Between 2016 and 2017, the increase in mortality did not affect all leading causes of death. A reduction in the number of deaths was recorded for septicemia (8.7 percent), chronic liver disease and cirrhosis (4.0 percent), Alzheimer's disease (1.0 percent), influenza and pneumonia (0.8 percent), and chronic lower respiratory (0.2 percent).

When considering race/ethnicity and gender, the increase in the age-adjusted mortality rate for deaths due to cerebrovascular diseases was the highest among Hispanic males (21.4 percent) from 2016 to 2017. In terms of mortality due to diabetes, the overall mortality rate for males and females decreased from 2016 (24.5 /100,000) to 2017 (23.8/100,000) following a period of stability during 2011 to 2014 (**Table 2B-2**). The decrease in deaths due to diabetes affected all race/ethnic groups, except American Indian or Alaska Natives where a 2.11 percent increase was observed between 2016 and 2017.

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**Figure 2A-1**  
Age-adjusted Mortality Rates<sup>a</sup> for all Causes by Gender and Year,  
Arizona, 2007-2017



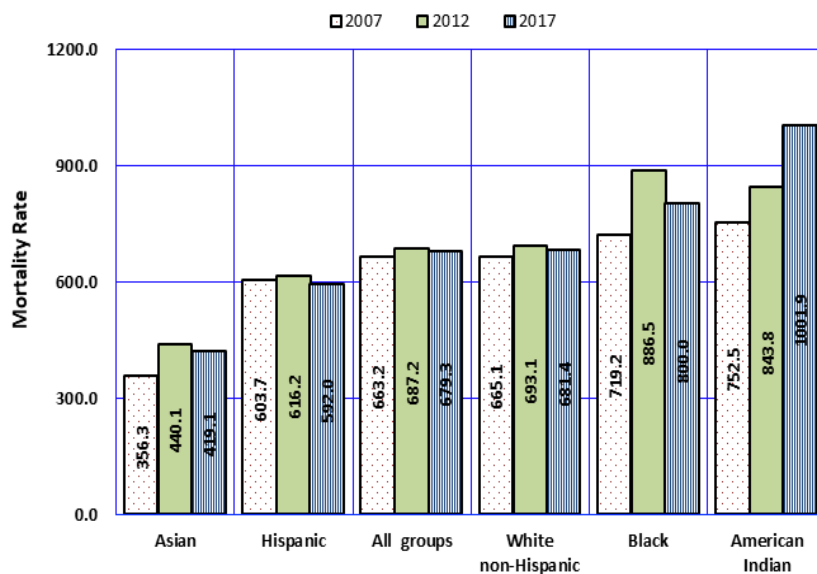
The age-adjusted mortality rates discussed below are based on the year 2000 population standard. All mortality rates in sections 2A and 2B are age-adjusted. A detailed explanation of the age-adjustment of mortality rates is given in the **Technical Notes**.

The total age-adjusted mortality rate decreased by 2.5 percent, from 696.6 in 2016 to 679.3 in 2017 (**Figure 2A-1, Table 2B-2**). Over this period, the age-adjusted mortality rates decreased for both males and females.

The difference between male and female mortality rates increased between 2007 and 2017. The male age-adjusted mortality rate was 37.8 percent greater than the female age-adjusted mortality rate in 2007, but 40.7 percent greater in 2017.

Note: <sup>a</sup> Number of deaths per 100,000 persons (adjusted to the 2000 standard U.S. population).

**Figure 2A-2**  
Age-adjusted Mortality Rates<sup>a</sup> for all Causes by Race/Ethnicity and Year,  
Arizona Residents, 2007, 2012, and 2017



The 2017 age-adjusted death rates for the major racial/ethnic groups were as follows: for Asian or Pacific Islander, 419.1 deaths per 100,000 population; Hispanic or Latino, 592.0; White non-Hispanic, 681.4; Black or African American, 800.0; and American Indian or Alaska Native, 1001.9 (**Figure 2A-2, Table 2B-4**).

In 2017, as in 2007 and 2012, Blacks and American Indians had higher total mortality rates than White non-Hispanics, Hispanics, and Asians. The total mortality rates for Asians were lower than the rates of both White non-Hispanics and Hispanics in 2007, 2012, and 2017.

Note: <sup>a</sup> Number of deaths per 100,000 persons (adjusted to the 2000 standard U.S. population).

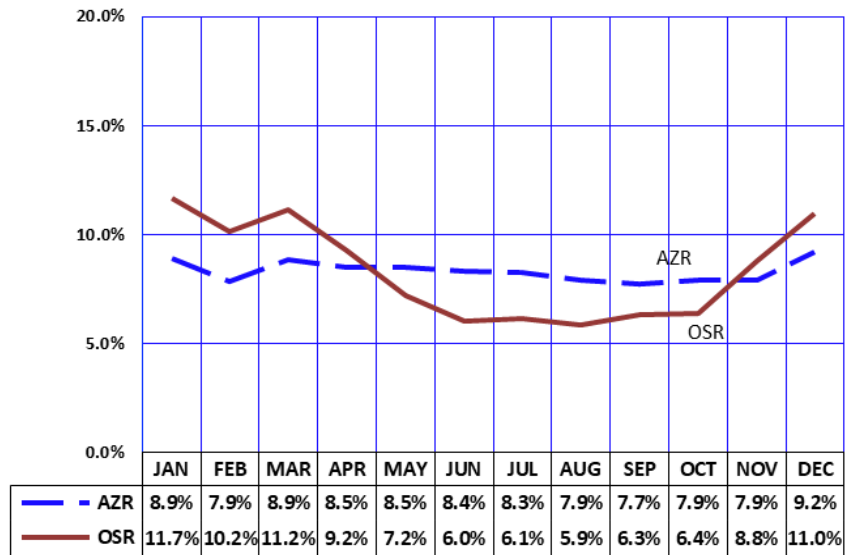
2A. TOTAL MORTALITY

If there was no monthly variation in proportional contribution to total annual deaths, 8.3 percent (100/12) of deaths should occur monthly. However, when the monthly distribution of resident deaths is examined, December (9.2 percent), January (8.9 percent), and March (8.9 percent) were higher in 2017 from the expected value (**Figure 2A-3**). September was the month with the lowest proportional contributions to the total annual deaths among Arizona residents.

The majority of the 2,185 non-residents who died in Arizona during 2017 did so during the months of January, March, December, and February.

August was the month with the lowest percent contribution (5.9 percent) to the annual death among out-of-State residents who died in Arizona.

**Figure 2A-3**  
Percent of Annual Deaths by Month of Occurrence and Residence Status, Arizona, 2017



**Figure 2A-4**  
Percentage of Deaths for which Autopsies were Reported by Race/Ethnicity and Year, Arizona Residents, 2007-2017

Autopsies were reported as performed on 5,600 decedents, or 9.8 percent of the deaths that occurred among Arizona residents in 2017. From 2007 – 2017, the percentage of deaths for which autopsies were reported varied from a high of 10.5 percent in 2007, to a low of 8.6 percent in 2011 and 2012 then to 10.1 percent in 2016.

The percentage autopsied varies by the decedent’s demographic characteristics. By race/ethnicity (**Figure 2A-4**) the percentage autopsied was lower for the White non-Hispanic and Asian population than for other groups. The prevalence of autopsies was substantially greater among Black, American Indian, and Hispanic or Latino sub-populations. A substantial portion of the differential in the use of autopsy by race/ethnicity reflects differences in the age and manner of death. For example, autopsies tend to be more common at younger ages and for deaths by homicide, suicide, accidents, and undetermined manner.

