Injury and poisoning (Changes to health status overtime)

Include deaths from motor vehicles, suicide, assault, poisoning, burns and falls and complications from medical and surgical care. Since 1900 death rates for injury and poisoning more than halved for both males and females, with the most rapid decline occurring from the 1970s. Deaths from motor vehicle crashes were at their highest in 1970 at 49 deaths for males per 100,000 and 18 per 100,000 for females. Death rates fell to 14 and 6 per 100,000 for males and females by 2000. This decline reflected the range of public health actions that were introduced by the government, commencing with the introduction of compulsory wearing of seatbelts in 1970.
Cancer (Neoplasms) (Changes to health status overtime)

Death rates increased throughout the 20th century, reaching a peak in the mid 1980’s; rise was due to an increase in lung cancer for which increased uptake in smoking is responsible.

For males, cancer death rates peaked during 1920’s at nearly 290 deaths per 100,000, then fell to 247 deaths per 100,000 in 2000. This decline reflects the reduction in male smoking that started to occur in the mid 1970’s.

Cardiovascular Diseases (Changes to health status overtime)

Includes heart attack, stroke and high blood pressure (hypertension) and many other diseases. They involve the heart and blood vessels, and interfere with how blood is circulated throughout the body. Since the 1900’s coronary heart disease, heart attack and stroke have been one of the major causes of death. Death rates for cardiovascular disease increased and peaked in the mid 1960’s. There has been a decline in cardiovascular diseases related deaths since then, thought they continue to be one of the major causes of death.

Respiratory Diseases (Changes to health status overtime)

Affects the lungs and other parts of the body that are involved in breathing, Including pneumonia, influenza and asthma. Pneumonia and influenza were the major causes of death from respiratory diseases in 1907, but were replaced by deaths from chronic obstructive pulmonary disease (COPD) by 2000. In 1919 the Spanish influenza pandemic occurred, represented by the spike in the graph, apart from this all respiratory disease death rates declined drastically and by 2000 were less than 10% of the rates in 1907. Deaths due to asthma decreased in the first half of the 20th century before three peaks occurred in the 50’, 60’s, and late 80’s. Since 1980 deaths due to asthma have reduced by 70%.
Life Expectancy (Changes to health status overtime)

Life expectancy data overtime shows that significant improvements in health status have been made, representing an increase of around 40% for life expectancy at birth.

![Graph showing life expectancy at birth by sex in Australia, 1890-2014.](image)

**Source:** AIHW, Australia's health 2016, page 9

Patterns of Mortality (Changes to health status overtime)

Common diseases of the early 20\textsuperscript{th} century are different to those we face today. They can be grouped into five main categories. Together the diseases accounted for around 60% at the start of the 20\textsuperscript{th} century to 83% at the end.

![Graph showing age-standardised death rates for all causes, by sex and year, 1907-2013.](image)

**Source:** AIHW, Grim books

Infectious and Parasitic Diseases (Changes to health status overtime)

Infectious diseases are transmitted from one person to another. Parasitic diseases occur when parasites enter the body via contaminated food and water. Living conditions were different water and food often contaminated, rubbish littered streets, and sewage disposal, safe water and food supply controls were not well established. Leading to outbreaks of diarrhoea, cholera, smallpox, polio and tuberculosis.

![Graph showing number of deaths from infectious and parasitic diseases, by sex and year, 1907–2013.](image)

**Source:** AIHW, Grim books