

MORTALITY IN LOS ANGELES COUNTY 2013

Leading Causes of Death and Premature Death with Trends for 2004-2013

A PUBLICATION OF THE LOS ANGELES COUNTY DEPARTMENT OF PUBLIC HEALTH



Message from the Interim Director



Monitoring the health of a community is an essential function of a local public health department and measures of mortality are indicators that are frequently used. In Los Angeles County, we continuously review and analyze information collected from death certificates for residents of the county. Using information about the leading causes of death and premature death, we collaborate with our partners to educate the community about how to reduce the risk of certain conditions and adopt

healthier lifestyles, as well as ensure access to quality medical screenings and treatment. Together, we are creating communities that promote health.

This report, *Mortality in Los Angeles County 2013: Leading causes of death and premature death with trends for 2004-2013*, highlights some of the improvements being made throughout the county, as evidenced by decreases in the death rate from some of the leading causes of death: such as coronary heart disease, stroke and lung cancer in the last ten years.

Although there have been improvements, we face challenges in making certain that all Angelenos benefit equitably. Some residents are at higher risk of death than others because of their health behaviors, the environment in which they live, their educational and employment opportunities, as well as their access to medical care. We continue to work with our public health partners to close these gaps.

While the death rates from most the leading causes of death have decreased, we continue to see increases in others, such as Alzheimer's disease. In addition, deaths from intentional and unintentional injuries (homicide, suicide, motor vehicle crash and drug overdose) often impact younger people, resulting in a dramatic impact on premature death. Therefore, health promotion and injury prevention efforts must be targeted to all age groups to increase the county's overall life expectancy.

This report provides a comprehensive analysis of the finalized death data from the most recent year such data is available. Please use this resource to help identify priorities for action to improve the public's health. By doing so, we hope this report will empower communities and stakeholders to both formulate local and state policies as well as implement programs to improve and enrich the lives of all Angelenos.

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Data Highlights for 2013

Unless otherwise noted, rates are age-adjusted

- In 2013, there were 59,678 deaths in Los Angeles County (Figure 1). The death rate was 593 deaths per 100,000 population (Figure T18). Compared with 2012, both the number of deaths *and* the overall death rate *increased* 2%.
- The number of deaths among men and women was nearly equal, 30,413 and 29,265, respectively (Figure 2). Overall, men died at a younger age than women. The mean (average) age at death was 70 years for men and 77 years for women. Similarly, the overall annual death rate was higher for men than for women: 710 versus 499 deaths per 100,000 population, respectively (Figure T18).
- By race/ethnicity, the lowest annual death rates were among Asians (405 per 100,000 population), followed by Latinos at 511 deaths per 100,000 population (Figure T18).
- In 2013, on an average day, 164 people died in the county, including 32 from coronary heart disease, 10 from injuries and 9 from stroke. Four of the 164 deaths (2.4%) occurred among children or young adults less than 25 years of age.
- One out of every five deaths in 2013 was caused by coronary heart disease (11,827 deaths), the leading cause of both death and *premature* death in the county (Figure 1).
- There were 13,873 deaths from all types of cancer combined. Of these, lung cancer was the most common (2,687 deaths), followed by colorectal cancer (1,376 deaths) and breast cancer (1,138 deaths; Figures 1 and 2).
- Diabetes remained an important cause of both death (2,172 deaths) and *premature* death for both men and women, as well as for all race/ethnic groups. The diabetes-specific death rates were highest for blacks and Latinos, and higher for men than for women (Figure T8).

- Among people aged 1 to 44 years, the cause of death was a fatal injury for 43% (847 unintentional injuries, 452 homicides, and 323 suicides). The most common injury deaths were from motor vehicle crash in 1-24 year olds and drug overdose in 25-44 year olds (Figure 9).
- Homicide was the leading cause of *premature* death for black men and the second leading cause of *premature* death for men overall (Figure 5). Homicide was the leading cause of death for Latino and black men, aged 15-44 years (Figure 10).
- Firearm use resulted in 709 deaths including 76% of 584 homicides and 33% of 789 suicides.
- Alzheimer's disease was the third-leading cause of death for women (1,739 deaths), but only the eighth-leading cause of death for men (838 deaths; Figure 2).
- Death rates were higher for men than for women for every leading cause of death, except for Alzheimer's disease and breast cancer.
- For most of the leading causes of death and *premature* death, the highest death rate was seen in black men and the lowest rate in Asian women and Latinas.
- By SPA, death rates were higher in the Antelope Valley and South than in other areas of the county (Figure T18).
- There were 25,267 deaths among persons between the ages of 1 and 74 years (Figure 9), contributing more than 436,047 years of potential life lost (YPLL).
- Together, all types of cancer (13,873 deaths) and all types of heart disease (16,150 deaths) were the underlying cause in half (50%) of all the deaths.

Trend Data Highlights for 2004-2013

Unless otherwise noted, rates are age-adjusted

- From 2004 through 2013, the overall death rate in the county decreased 15%, from 696 to 593 deaths per 100,000 population (Figure T18). During the same time period, the U.S. death rate decreased 16%, from 801 to 732 deaths per 100,000 population.
- During the last ten years, the four leading causes of death have remained unchanged: coronary heart disease, stroke, lung cancer, and chronic obstructive pulmonary disease (Figure T1).
- Coronary heart disease has been the leading cause of both death and *premature* death every year for the last ten years (Figures T1 and T2).
- There was a notable decrease (36%) in the death rate from coronary heart disease, from 183 deaths per 100,000 in 2004 to 117 in 2013 (Figure T7).
- Over the last ten years, death rates from coronary heart disease among residents of the Antelope Valley and San Gabriel SPAs were consistently higher than the rates of other areas (Figure T7).
- Stroke has been the second-leading cause of death every year for the last ten years (Figure T1).
- The death rate from stroke decreased 34% overall during the last ten years. While the stroke-specific death rate for blacks overall decreased 35%, from 75 deaths per 100,000 population in 2004 to 48 in 2013, the 2013 rate still exceeded the Healthy People 2020 goal of 34.8 deaths per 100,000 population (Figure T16).
- Since 2004, the overall lung cancer-specific death rate decreased 26%. In 2013, the rate remained lowest for Latinas (12 per 100,000) and highest for black men (49 per 100,000), which remained above the Healthy People 2020 goal of 45.5 deaths per 100,000 population (Figure T13).

- From 2004 through 2013, the overall death rate from diabetes decreased 16%. The decrease was nearly twice as big for women (23%) than for men (12%). Throughout the ten-year time period, black men consistently had the highest diabetes-specific death rate (Figure T8).
- Coronary heart disease and homicide were the two leading causes of *premature* death during the last ten years, with motor vehicle crash the third-leading cause of *premature* death for eight of the last ten years (Figure T2).
- Since 2004, the number of deaths from Alzheimer's disease has nearly doubled from 1,340 in 2004 to 2,577 in 2013 (Figure T3).
- From 2004 through 2013, the number of homicides has decreased by almost half (45%). In 2013, the homicide rate among black men (50 deaths per 100,000 population) was more than eight times higher than the overall county homicide rate (6 per 100,000; Figure T10).
- Drug overdose has been one of the ten leading causes of *premature* death every year for the past ten years and was the fourth-leading cause in 2013 (Figure T2). From 2004 through 2013, the drug overdose death rate has fluctuated between 6 and 7 deaths per 100,000 population (Figure T9).
- The suicide rate is consistently in the top six leading causes of *premature* death in Los Angeles County (Figure T2) and has changed little during the past ten years at 7-8 deaths per 100,000 population (Figure T17). The suicide rate has been consistently the highest for white men (Figure T17).
- HIV has not been among the overall leading causes of death or *premature* death since 2004 (Figure T2), but is still the fourth-leading cause of *premature* death for black men in 2013 (Figure 5).

When a death occurs in California, state law requires that a certificate of death be registered within eight days of death and before a decedent is buried or cremated. The certificate of death is a legal document that serves as a permanent record of the death of an individual. To complete a certificate of death, the funeral director or medical facility collects identifying and demographic information about the decedent from family members and medical records. The decedent's physician or the coroner provides information about the medical conditions or events that precipitated the death.

When the certificate of death is complete, it is registered with the local registrar using the Electronic Death Registration System.¹ Then, the local registrar submits the document to the State Registrar of Vital Records. State records are then aggregated by the National Center for Health Statistics to create an annual national mortality database. There is a delay of about two years before the annual national mortality database is available for use, although the use of electronic death registration systems are helping to shorten this timeframe. Errors, omissions, and inaccuracies can occur when the certificate of death is completed and later when it is processed.

This report summarizes information obtained from certificates of death (Appendix 1) for all Los Angeles County residents who died in 2013, and mortality trends for 2004 through 2013. While it cannot provide information about every cause of death, it lays the groundwork for future analyses and provides valuable information for public health and medical research, evaluation of prevention and intervention programs, community needs assessments, policy development, and program planning. Certificates of death data represent an important endpoint in the spectrum of disease and help us to better understand the burden of disease in our community. Because certificates of death are required by state law, they provide a readily available, and consistently and continuously collected, source of information on a wide range of health conditions.

PREMATURE DEATH: WHAT IS IT?

For this report, we defined premature death as death that occurred before 75 years of age, a standard cut-off used in public health. In 2013, 59% of the people who died were less than 75 years of age.

MEASURES

This report provides the numbers of deaths, death rates, and years of potential life lost (YPLL; before age 75) for the leading causes of death and premature death for 2013 and the ten-year period, 2004 through 2013, for Los Angeles County residents. The variables included in the analysis are age at death, gender, race/ethnicity, service planning area and health district of residence, and underlying cause of death. To protect the identity of decedents, the exact number of deaths was not provided if there were fewer than five deaths in a particular group.

If we expect everyone to live to at least 75 years of age, then people who die younger are considered to have died prematurely. For example, a person who died at 63 years of age lost 12 years of expected life, while a person who died at age 80 did not lose any years of expected life. For everyone who died during the year, we calculated the years of expected life that were lost if they died before 75. By adding up the total YPLL for each cause of death, we identified those causes of death responsible for the greatest amount of premature death. Calculations of YPLL were limited to persons who were at least 1 year of age at the time of death. Infants less than 1 year of age were excluded because prevention of infant mortality typically differs from prevention of other causes of early mortality.

A standardized coding system, the International Classification of Diseases (ICD), was used to classify causes of death and to group similar causes of death into categories for analysis.² The cause-of-death groups were based on categories developed by the National Center for Health Statistics.³ To identify the leading causes of death, cause-of-death groups were ranked by the number of deaths in each group. If two groups had the same number of deaths, then the cause of death that resulted in the most YPLL was ranked first. To identify the leading causes of premature death, the groups were ranked by the YPLL in each group. If two causes of death resulted in the same number of YPLL, then the group that resulted in the greatest number of deaths was ranked first. The ICD-10 revision was used for classifying deaths that occurred in 1999 or later. From 1979 through 1998,

¹ The Electronic Death Registration System (EDRS) is an Internet system for death certificate origination and registration that enables coroners, funeral directors, doctors, and hospitals to submit death certificates for registration 24 hours per day. This results in improved efficiency, faster registration, and improved data quality. EDRS was first implemented in Los Angeles County in October 2007.

the ICD-9 revision was used. To facilitate comparisons with earlier years, ICD-9 and 10 revision codes are provided for each of the leading causes of death and premature death included in this report.

When a person dies, it is likely that several factors or conditions contributed to the death. For this report, we analyzed the underlying cause of death, which is the condition that most directly caused the death. By using a single cause of death rather than considering all the conditions present at the time of death, the number of deaths and rates in this report do not reflect the full impact of certain diseases and conditions.⁴

Healthy People is a set of national health objectives for improving the health of all Americans. They are updated every ten years. First released for 1990, Healthy People objectives were updated for 2000, 2010, and 2020. Some figures in this report include national goals established by Healthy People 2020.⁵ Changes from Healthy People 2010 to Healthy People 2020 may result in discontinuity with prior years for some causes of death, which is highlighted in the tables.

DEFINITIONS AND TECHNICAL NOTES

- **Death rate:** The number of deaths divided by the population at risk. Death rates make comparisons between different population groups more meaningful than frequencies alone. This type of rate is also called the crude death rate.
- Age-specific death rate: The number of deaths in a specific age group divided by the population at risk in that age group.
- Age-adjusted death rate: There are age-related differences in the rates at which most health conditions occur. Some conditions are more common among young people, while others are more common among older people.

Age adjustment is a technique for removing the effects of age from crude rates so they can be compared. Age adjustment is used to compare two or more populations at one point in time or one population at two or more points in time. To control for differences in the age distribution of the populations being compared, the age-specific death rates for each population are applied to a standard population in order to create a comparable summary measure of mortality. In this report, ageadjusted death rates were calculated using the 2000 standard population published by the National Center for Health Statistics (Appendix 2).⁶ All rates were rounded to the nearest whole number; therefore, rates that appear to be the same may differ by a fractional amount. Rate change percentages were calculated before rates were rounded and may differ slightly from rate change percentages calculated from rates rounded to the nearest whole number.

Suppression rules have been implemented to minimize random variation and instability. Both count and rate are suppressed for any cell with fewer than 5 deaths regardless of county population size. Beginning in 2012, for trend tables presenting deaths between 5 and 19 and relative standard error (RSE) less than or equal to 23%, the rates presented with a double dagger are considered unreliable. Hence, caution is needed when interpreting the results.

- **Median:** The midpoint of a set of values; the point at which, when the values are put in numerical order, half of the values fall above and half fall below. The median of 25, 27, 28, 36, and 41 is 28.
- Service Planning Area (SPA): Health districts are aggregated to form SPAs. The county is divided into eight SPAs (Appendices 3 and 4).
- **Health District:** Using census tract boundaries, the county is divided into 26 health districts that are responsible for planning and providing public health services according to the health needs of the local communities (Appendix 3).

² International statistical classification of diseases and related health problems, tenth revision. Geneva: World Health Organization, 1992.

³ Instruction manual, Part 9. ICD-10 cause-of-death lists for tabulating mortality statistics (updated March 2011 to include WHO updates to ICD-10 for data year 2011). http://www.cdc.gov/nchs/data/dvs/Part9InstructionManual2011.pdf.

⁴ Redelings MD, Sorvillo F, Simon P. A comparison of underlying cause and multiple causes of death: U.S. vital statistics, 2000-2001. Epidemiology. 2006 Jan;17(1):100-3.

⁵ Healthy People, Office of Disease Prevention and Health Promotion, U.S. Department of Health and Human Services. www.healthypeople.gov.

⁶ Hoyert DL, Heron MP, Murphy SL, Kung H. Deaths: Final Data for 2003. National vital statistics reports; vol 54 no 13. Hyattsville, MD: National Center for Health Statistics. 2006.

NOTES ABOUT THE POPULATION

The Census is conducted every ten years and is the basis for the standard population used for age adjustment of mortality rates and annual estimates of the population of the county. Following the decennial Census, statistical methods are used to estimate the county population for the years between the censuses. Information about births, deaths, and the movement of people in and out of the county are used to inform the estimation process.

The decennial Census may not accurately count every resident of the county, and some groups may experience less accurate enumeration than others. The estimates may also result in inaccuracies that affect the crude and adjusted death rates.

In previous mortality reports, the annual population of the county for 2001-2009 was estimated based on the 2000 Census. The estimates suggested that the county population would *increase* each year from 2001 through 2009. In 2010, the Census enumeration resulted in a 5.7% *reduction* in the county population from 2009 to 2010, suggesting that the population for 2001-2009 was overestimated. Because the population estimates were used to calculate death rates, overestimation of the population would have resulted in underestimation of the true mortality rate. **The death rates for 2004-2009 have been revised using new population estimates based on the 2010 Census, therefore, they may differ from those previously published.**

ASCERTAINMENT OF RACE/ETHNICITY

Up to three races may be specified on a decedent's certificate of death. The information is provided by the funeral director or coroner who may not ascertain the decedent's race and/or ethnicity directly from the next of kin, which could lead to inaccuracies.

In addition to race, the certificate of death has a check box for indicating whether the decedent was Hispanic, Latino/a, or Spanish; a decedent of any race may be Hispanic. For this report, if Hispanic origin is indicated on the certificate of death, then the decedent's race is tabulated as Hispanic. Of the remaining non-Hispanic decedents, race is tabulated according to first race listed on the certificate of death, which may result in misclassification of race.

The Census also includes separate questions about Hispanic origin (Hispanic, Latino/a, or Spanish origin) and race. Respondents self-select their race from 15 categories, and can identify with more than one category. Population counts are available for persons who identify with a single race, and persons who identify with more than one race group.

TABULATIONS BY RACE/ETHNICITY

For this report, race is tabulated and presented for six race/ ethnic groups: white, Latino/a, black, Asian, Native Hawaiian and other Pacific Islander (NHOPI), and American Indian and Alaska Native (AIAN). Beginning with 2012 data, this report has separated the Asian/Pacific Islander race category into two categories: *Asian* and *Native Hawaiian and other Pacific Islander* (NHOPI). **Mortality** *trends* for Asians should be interpreted with caution because the number of deaths and death rates before 2012 reflect Asian and NHOPI combined.

The number of deaths among NHOPI and AIAN was too small to present annual leading causes of death and premature death tables or to determine stable annual death rates. Therefore, to present accurate and useful data for NHOPI and AIAN, we have added two pages—one for NHOPI (Page 14, Figure 7) and one for AIAN (Page 15, Figure 8)—that combine data for 2012 and 2013 to show the leading cause of death and premature death overall and by gender. See Appendix 5 (Page 73) for additional information about NHOPI and AIAN.

USER'S GUIDE TO COLOR

Color codes have been used throughout the report. To make it easier to see the overall impact of cancer, the same color is used for all cancers regardless of the type. All unintentional injuries (accidents), such as drug overdoses or motor vehicle crashes, also all have the same color code.

Alzheimer's disease
Birth defect
Cancer
Chronic obstructive pulmonary disease (COPD)
Coronary heart disease
Diabetes
Homicide
Human immunodeficiency virus (HIV)
Liver disease/cirrhosis
Other conditions
Perinatal period condition
Pneumonia/influenza
Stroke
Suicide (self-inflicted injury)
Unintentional injury (accident)

User's guide to cause of death and premature death figures

The following series of figures compares the ten leading causes of death with the ten leading causes of premature death (death before age 75) for the county overall and selected population groups. These figures are designed to facilitate comparisons within population groups.

- A The ten leading causes of death are shown from highest (top) to lowest (bottom) based on the number of deaths from each cause.
- **B** The ten leading causes of premature death are shown from highest (top) to lowest (bottom) based on the number of years of potential life lost (YPLL; before age 75) from each cause.

1 The cause of death group coded by color (see Page 5).

- 2 The number of deaths due to the specific cause; e.g., there were 11,827 deaths from coronary heart disease and 2,874 deaths from chronic obstructive pulmonary disease (COPD).
- 3 The premature death rank for this cause of death; e.g., liver disease/cirrhosis was the ninth-ranked cause of death (1,315 deaths), but was the sixth-ranked cause of premature death (21,064 YPLL).
- 4 The cause of premature death group coded by color (see Page 5).
- **5** The total YPLL (before age 75) for the specific cause of death.
- **(6)** The death rank for this cause of premature death; e.g., stroke was the ninth-ranked cause of premature death, resulting in 14,146 YPLL, but was the second-ranked cause of death (3,300 deaths).



Figure 1. Ten leading causes of death and premature death

Los Angeles County 59,678 total deaths 436,047 years of life lost*

	Leading causes o	of deat	h	Leading causes of premature** death					
Rank	Cause of death		Premature death rank	Rank	Cause of death	Years of life lost*	Death rank		
1.	Coronary heart disease	11,827	1.	1.	Coronary heart disease	53,380	1.		
2.	Stroke	3,300	9.	2.	Homicide	23,993	20.		
3.	COPD	2,874	12.	3.	Motor vehicle crash	23,660	17.		
4.	Lung cancer	2,687	7.	4.	Drug overdose	22,412	16.		
5.	Alzheimer's disease	2,577	41.	5.	Suicide	21,641	15.		
6.	Pneumonia/influenza	2,264	18.	6.	Liver disease/cirrhosis	21,064	9.		
7.	Diabetes	2,172	8.	7.	Lung cancer	15,707	4.		
8.	Colorectal cancer	1,376	11.	8.	Diabetes	14,625	7.		
9.	Liver disease/cirrhosis	1,315	6.	9.	Stroke	14,146	2.		
10.	Hypertension	1,195	19.	10.	Breast cancer	13,098	11.		

*Excludes infants less than 1 year of age and persons of unknown age.

**Death before age 75 years.

- There were 3.6 times more deaths from coronary heart disease (11,827 deaths) than from stroke (3,300 deaths), the second-leading cause of death.
- Unintentional injuries (2,194 deaths), suicide (789 deaths), and homicide (584 deaths) caused 24% of the years of life lost, but only 6% of the deaths, highlighting the dramatic impact of injuries on younger people.
- Alzheimer's disease continued to be an important cause of death, although it had limited impact on premature death.

Figure 2. Ten leading causes of death and premature death, by gender

	Males											
	30,413 total deaths 281,113 years of life lost*											
	Leading causes o			1	ding causes of prema	ture** d	eath					
Rank	Cause of death		Premature death rank	Rank	Cause of death	Years of life lost*	Death rank					
1.	Coronary heart disease	6,436	1.	1.	Coronary heart disease	39,998	1.					
2.	Stroke	1,439	9.	2.	Homicide	21,492	17.					
3.	Lung cancer	1,407	8.	3.	Motor vehicle crash	18,100	12.					
4.	COPD	1,406	13.	4.	Suicide	16,963	11.					
5.	Diabetes	1,126	7.	5.	Drug overdose	16,002	15.					
6.	Pneumonia/influenza	1,069	18.	6.	Liver disease/cirrhosis	15,582	7.					
7.	Liver disease/cirrhosis	898	6.	7.	Diabetes	8,844	5.					
8.	Alzheimer's disease	838	37.	8.	Lung cancer	8,508	3.					
9.	Colorectal cancer	709	10.	9.	Stroke	8,270	2.					
10.	Prostate cancer	691	26.	10.	Colorectal cancer	6,346	9.					

Females

29,265 total deaths 154,934 years of life lost*

	Leading causes o	f deat	h	Leading causes of premature** death						
Rank	Cause of death		Premature death rank	Rank Cause of death		Years of life lost*	Death rank			
1.	Coronary heart disease	5,391	1.	1.	Coronary heart disease	13,382	1.			
2.	Stroke	1,861	5.	2.	Breast cancer	12,994	7.			
3.	Alzheimer's disease	1,739	35.	3.	Lung cancer	7,199	5.			
4.	COPD	1,468	12.	4.	Drug overdose	6,410	19.			
5.	Lung cancer	1,280	3.	5.	Stroke	5,876	2.			
6.	Pneumonia/influenza	1,195	21.	6.	Diabetes	5,781	8.			
7.	Breast cancer	1,138	2.	7.	Motor vehicle crash	5,560	22.			
8.	Diabetes	1,046	6.	8.	Liver disease/cirrhosis	5,482	13.			
9.	Hypertension	669	22.	9.	Colorectal cancer	4,941	10.			
10.	Colorectal cancer	667	9.	10.	Suicide	4,678	24.			

*Excludes infants less than 1 year of age and persons of unknown age.

**Death before age 75 years.

Figure 3. Ten leading causes of death and premature death, by race/ethnicity

White

	29,188 total deaths 145,612 years of life lost*										
	Leading causes o	f deat	h	Lea	ding causes of prema	ture** d	eath				
Rank	Cause of death		Premature death rank	Rank	Cause of death	Years of life lost*	Death rank				
1.	Coronary heart disease	6,188	1.	1.	Coronary heart disease	22,134	1.				
2.	COPD	1,866	8.	2.	Drug overdose	11,728	14.				
3.	Alzheimer's disease	1,592	37.	3.	Suicide	9,617	13.				
4.	Stroke	1,506	11.	4.	Liver disease/cirrhosis	7,140	12.				
5.	Lung cancer	1,438	5.	5.	Lung cancer	6,875	5.				
6.	Pneumonia/influenza	1,094	14.	6.	Motor vehicle crash	5,684	22.				
7.	Diabetes	675	10.	7.	Breast cancer	4,868	9.				
8.	Colorectal cancer	632	9.	8.	COPD	4,476	2.				
9.	Breast cancer	553	7.	9.	Colorectal cancer	4,027	8.				
10.	Hypertension	519	16.	10.	Diabetes	3,322	7.				

Latino/a 15,243 total deaths 170,095 years of life lost*

	Leading causes o	of deat	h	Leading causes of premature** death					
Rank	Cause of death		Premature death rank	Rank	Cause of death	Years of life lost*			
1.	Coronary heart disease	2,516	1.	1.	Coronary heart disease	14,883	1.		
2.	Diabetes	860	6.	2.	Motor vehicle crash	13,349	9.		
3.	Stroke	831	8.	3.	Homicide	12,065	14.		
4.	Liver disease/cirrhosis	666	4.	4.	Liver disease/cirrhosis	11,354	4.		
5.	Alzheimer's disease	513	43.	5.	Drug overdose	7,539	18.		
6.	Pneumonia/influenza	509	18.	6.	Diabetes	7,345	2.		
7.	Lung cancer	440	12.	7.	Suicide	7,269	19.		
8.	COPD	400	29.	8.	Stroke	5,877	3.		
9.	Motor vehicle crash	356	2.	9.	Breast cancer	4,273	12.		
10.	Colorectal cancer	347	10.	10.	Colorectal cancer	3,587	10.		

Black

7,721 total deaths 75.018 years of life lost*

	75,018 years of life lost"						40,002 years of life lost								
	Leading causes o	f deat	h	Lea	eading causes of premature** death				Leading causes o	of deat	h	Lea	iding causes of prema	ture** d	eath
Rank	Cause of death		Premature death rank	Rank	Cause of death	Years of life lost*		Rank	Cause of death		Premature death rank		Cause of death	Years of life lost*	
1.	Coronary heart disease	1,619	1.	1.	Coronary heart disease	10,851	1.	1.	Coronary heart disease	1,398	1.	1.	Coronary heart disease	4,755	1.
2.	Stroke	434	4.	2.	Homicide	9,350	8.	2.	Stroke	511	4.	2.	Suicide	2,740	15.
3.	Lung cancer	370	3.	3.	Lung cancer	2,804	3.	3.	Lung cancer	419	3.	3.	Lung cancer	2,600	3.
4.	COPD	329	11.	4.	Stroke	2,732	2.	4.	Pneumonia/influenza	393	25.	4.	Stroke	2,143	2.
5.	Diabetes	286	6.	5.	Motor vehicle crash	2,688	18.	5.	Diabetes	318	9.	5.	Breast cancer	1,946	11.
6.	Alzheimer's disease	265	45.	6.	Diabetes	2,463	5.	6.	COPD	260	29.	6.	Colorectal cancer	1,784	7.
7.	Pneumonia/influenza	257	17.	7.	Drug overdose	2,109	16.	7.	Colorectal cancer	204	6.	7.	Motor vehicle crash	1,780	16.
8.	Homicide	223	2.	8.	Breast cancer	1,936	12.	8.	Alzheimer's disease	197	45.	8.	Liver cancer	1,477	9.
9.	Hypertension	201	13.	9.	HIV	1,934	18.	9.	Liver cancer	190	8.	9.	Diabetes	1,188	5.
10.	Colorectal cancer	181	12.	10.	Suicide	1,819	24.	10.	Hypertension	152	22.	10.	Leukemia	910	19.

Note: The four largest race/ethnic groups (White, black, Latino/a, and Asian) are presented. Native Hawaiian and other Pacific Islander (NHOPI) and American Indian and Alaska Native (AIAN) cannot be presented separately because of small numbers. See Pages 14 and 15 for more information on these two race groups.

*Excludes infants less than 1 year of age and persons of unknown age.

**Death before age 75 years.

Asian

7,038 total deaths 40.002 years of life lost*

Figure 4. Comparison of the leading causes of death and premature death, by race/ethnicity

Leading causes of death

Race/ethnicity	#1 cause	#2 cause	#3 cause	#4 cause	#5 cause
Number of deaths	Number of deaths	Number of deaths	Number of deaths	Number of deaths	Number of deaths
Age-adjusted death rate	Age-adjusted death rate	Age-adjusted death rate	Age-adjusted death rate	Age-adjusted death rate	Age-adjusted death rate
White	Coronary heart disease	COPD	Alzheimer's disease	Stroke	Lung cancer
29,188	6,188	1,866	1,592	1,506	1,438
655 per 100,000	132 per 100,000	41 per 100,000	31 per 100,000	32 per 100,000	34 per 100,000
Latino/a	Coronary heart disease	Diabetes	Stroke	Liver disease/cirrhosis	Alzheimer's disease
15,243	2,516	860	831	666	513
511 per 100,000	92 per 100,000	30 per 100,000	30 per 100,000	19 per 100,000	21 per 100,000
Black	Coronary heart disease	Stroke	Lung cancer	COPD	Diabetes
7,721	1,619	434	370	329	286
854 per 100,000	177 per 100,000	48 per 100,000	40 per 100,000	36 per 100,000	32 per 100,000
Asian	Coronary heart disease	Stroke	Lung cancer	Pneumonia/influenza	Diabetes
7,038	1,398	511	419	393	318
405 per 100,000	78 per 100,000	29 per 100,000	24 per 100,000	22 per 100,000	18 per 100,000
Los Angeles County Total	Coronary heart disease	Stroke	COPD	Lung cancer	Alzheimer's disease
59,678	11,827	3,300	2,874	2,687	2,577
593 per 100,000	117 per 100,000	33 per 100,000	29 per 100,000	28 per 100,000	25 per 100,000

Leading causes of premature death (before age 75 years)

Race/ethnicity	#1 cause	#2 cause #3 cause		#4 cause	#5 cause	
White	Coronary heart disease	Drug overdose	Suicide	Liver disease/cirrhosis	Lung cancer	
Latino/a	Latino/a Coronary heart disease		Motor vehicle crash Homicide		Drug overdose	
Black	Coronary heart disease	Homicide	Lung cancer	Stroke	Motor vehicle crash	
Asian	Coronary heart disease	Suicide	Lung cancer	Stroke	Breast cancer	
Los Angeles County Total	Coronary heart disease	Homicide	Motor vehicle crash	Drug overdose	Suicide	

Note: The four largest race/ethnic groups (White, black, Latino/a, and Asian) are presented. Native Hawaiian and other Pacific Islander (NHOPI) and American Indian and Alaska Native (AIAN) cannot be presented separately because of small numbers. See Pages 14 and 15 for more information on these two race groups.

Totals include NHOPI, AIAN, and persons of other or unknown race/ethnicity.

Males: Leading causes of death

Race/ethnicity	#1 cause	#2 cause	#3 cause	#4 cause	#5 cause
Number of deaths					
Age-adjusted death rate					
White	Coronary heart disease	COPD	Lung cancer	Stroke	Alzheimer's disease
14,533	3,360	864	732	625	534
767 per 100,000	172 per 100,000	45 per 100,000	38 per 100,000	32 per 100,000	27 per 100,000
Latino	Coronary heart disease	Liver disease/cirrhosis	Diabetes	Stroke	Motor vehicle crash
8,139	1,418	487	437	399	267
618 per 100,000	122 per 100,000	29 per 100,000	35 per 100,000	34 per 100,000	12 per 100,000
Black	Coronary heart disease	Homicide	Lung cancer	Stroke	COPD
3,901	836	203	190	172	169
1,042 per 100,000	222 per 100,000	50 per 100,000	49 per 100,000	47 per 100,000	48 per 100,000
Asian	Coronary heart disease	Stroke	Lung cancer	Pneumonia/influenza	COPD
3,580	765	233	232	187	158
494 per 100,000	105 per 100,000	32 per 100,000	31 per 100,000	26 per 100,000	22 per 100,000
All males	Coronary heart disease	Stroke	Lung cancer	COPD	Diabetes
30,413	6,436	1,439	1,407	1,406	1,126
710 per 100,000	152 per 100,000	35 per 100,000	33 per 100,000	35 per 100,000	26 per 100,000

Males: Leading causes of premature death (before age 75 years)

Race/ethnicity	#1 cause	#2 cause	#3 cause	#4 cause	#5 cause
White	Coronary heart disease	Drug overdose	Suicide	Liver disease/cirrhosis	Motor vehicle crash
Latino	Coronary heart disease	Homicide	Motor vehicle crash	Liver disease/cirrhosis	Suicide
Black	Homicide	Coronary heart disease	Motor vehicle crash	HIV	Stroke
Asian	Coronary heart disease	Suicide	Motor vehicle crash	Lung cancer	Liver cancer
All males	Coronary heart disease	Homicide	Motor vehicle crash	Suicide	Drug overdose

Note: The four largest race/ethnic groups (White, black, Latino/a, and Asian) are presented. Native Hawaiian and other Pacific Islander (NHOPI) and American Indian and Alaska Native (AIAN) cannot be presented separately because of small numbers. See Pages 14 and 15 for more information on these two race groups.

Totals include NHOPI, AIAN, and persons of other or unknown race/ethnicity.

Race/ethnicity	#1 cause	#2 cause	#3 cause	#4 cause	#5 cause
Number of deaths					
Age-adjusted death rate					
White	Coronary heart disease	Alzheimer's disease	COPD	Stroke	Lung cancer
14,655	2,828	1,058	1,002	881	706
557 per 100,000	98 per 100,000	33 per 100,000	38 per 100,000	31 per 100,000	30 per 100,000
Latina	Coronary heart disease	Stroke	Diabetes	Alzheimer's disease	Breast cancer
7,104	1,098	432	423	341	288
426 per 100,000	70 per 100,000	27 per 100,000	26 per 100,000	22 per 100,000	16 per 100,000
Black	Coronary heart disease	Stroke	Alzheimer's disease	Lung cancer	COPD
3,820	783	262	202	180	160
707 per 100,000	141 per 100,000	48 per 100,000	36 per 100,000	34 per 100,000	29 per 100,000
Asian	Coronary heart disease	Stroke	Pneumonia/influenza	Lung cancer	Diabetes
3,458	633	278	206	187	164
338 per 100,000	59 per 100,000	27 per 100,000	19 per 100,000	19 per 100,000	16 per 100,000
All females	Coronary heart disease	Stroke	Alzheimer's disease	COPD	Lung cancer
29,265	5,391	1,861	1,739	1,468	1,280
499 per 100,000	89 per 100,000	31 per 100,000	27 per 100,000	25 per 100,000	23 per 100,000

Females: Leading causes of death

Females: Leading causes of premature death (before age 75 years)

Race/ethnicity	#1 cause	#2 cause	#3 cause	#4 cause	#5 cause
White	Coronary heart disease	Breast cancer	Drug overdose	Lung cancer	Suicide
Latina	Breast cancer	Coronary heart disease	Motor vehicle crash	Diabetes	Stroke
Black	Coronary heart disease	Breast cancer	Lung cancer	Stroke	Drug overdose
Asian	Breast cancer	Lung cancer	Stroke	Coronary heart disease	Colorectal cancer
All females	Coronary heart disease	Breast cancer	Lung cancer	Drug overdose	Stroke

Note: The four largest race/ethnic groups (White, black, Latino/a, and Asian) are presented. Native Hawaiian and other Pacific Islander (NHOPI) and American Indian and Alaska Native (AIAN) cannot be presented separately because of small numbers. See Pages 14 and 15 for more information on these two race groups.

Totals include NHOPI, AIAN, and persons of other or unknown race/ethnicity.

Figure 7. Leading causes of death and premature death for Native Hawaiian and other Pacific Islanders (NHOPI), 2012-2013 Because of the small number of deaths among NHOPI, 2012 and 2013 were combined. See Appendix 5 (Page 73) for additional information.

	342 total deaths 4,522 years of life lost*									
	Leading causes o	of deat	h	Leading causes of premature** death						
Rank	Cause of death		Premature death rank	Rank	Cause of death	Years of life lost*	Death rank			
1.	Coronary heart disease	85	1.	1.	Coronary heart disease	856	1.			
2.	Diabetes	24	2.	2.	Diabetes	286	2.			
3.	Stroke	23	3.	3.	Stroke	258	3.			
4.	Lung cancer	18	4.	4.	Lung cancer	224	4.			
5.	Nephritis	10	7.	5.	Motor vehicle crash	186	15.			
6.	Colorectal cancer	9	6.	6.	Colorectal cancer	176	6.			
7.	Uterine cancer	7	11.	7.	Nephritis	153	5.			
8.	Stomach cancer	7	12.	8.	Suicide	136	9.			
9.	Suicide	6	8.	9.	Homicide	127	19.			
10.	Pneumonia/influenza	6	27.	10.	Pancreatic cancer	122	11.			

NHOPI

*Excludes infants less than 1 year of age and persons of unknown age. **Death before age 75 years.

NHOPI Male 165 total deaths 2,384 years of life lost*

	Leading causes o	f deat	h	Leading causes of premature** death			
Rank	Cause of death		Premature death rank		Cause of death	Years of life lost*	Death rank
1.	Coronary heart disease	55	1.	1.	Coronary heart disease	645	1.
2.	Stroke	14	2.	2.	Stroke	146	2.
3.	Lung cancer	11	5.	3.	Suicide	127	6.
4.	Diabetes	10	6.	4.	Homicide	127	10.
5.	Nephritis	5	8.	5.	Lung cancer	106	3.

NHOPI Female 177 total deaths 2,138 years of life lost*

	Leading causes o	f deat	h	Leading causes of premature** death			
Rank	Cause of death		Premature death rank	Rank	Cause of death	Years of life lost*	Death rank
1.	Coronary heart disease	30	1.	1.	Coronary heart disease	211	1.
2.	Diabetes	14	2.	2.	Diabetes	182	2.
3.	Stroke	9	5.	3.	Motor vehicle crash	140	11.
4.	Lung cancer	7	4.	4.	Lung cancer	118	4.
5.	Uterine cancer	7	6.	5.	Stroke	112	3.

Figure 8. Leading causes of death and premature death for American Indian and Alaska Natives (AIAN), 2012-2013 Because of the small number of deaths among AIAN, 2012 and 2013 were combined. See Appendix 5 (Page 73) for additional information.

	AIAN 371 total deaths 3,997 years of life lost*								
	Leading causes o	f deat	h	Leading causes of premature** death					
Rank	Cause of death		Premature death rank	Rank	Cause of death	Years of life lost*	Death rank		
1.	Coronary heart disease	72	1.	1.	Coronary heart disease	476	1.		
2.	Diabetes	25	8.	2.	Liver disease/cirrhosis	293	8.		
3.	Hypertension	20	7.	3.	Drug overdose	279	9.		
4.	Lung cancer	19	4.	4.	Lung cancer	258	4.		
5.	Stroke	19	12.	5.	Suicide	245	12.		
6.	COPD	17	9.	6.	Motor vehicle crash	213	13.		
7.	Pneumonia/influenza	15	10.	7.	Hypertension	166	3.		
8.	Liver disease/cirrhosis	14	2.	8.	Diabetes	154	2.		
9.	Drug overdose	10	3.	9.	COPD	98	6.		
10.	Alzheimer's disease	9	NA	10.	Pneumonia/influenza	90	7.		

*Excludes infants less than 1 year of age and persons of unknown age.

**Death before age 75 years.

NA=not applicable

AIAN Male 183 total deaths 2,313 years of life lost*

Leading causes of death					Leading causes of premature** death			
Rank	Cause of death		Premature death rank	Rank	Cause of death	Years of life lost*	Death rank	
1.	Coronary heart disease	32	1.	1.	Coronary heart disease	275	1.	
2.	Lung cancer	12	3.	2.	Motor vehicle crash	197	8.	
3.	Diabetes	10	8.	3.	Lung cancer	194	2.	
4.	Stroke	10	10.	4.	Drug overdose	153	9.	
5.	COPD	10	20.	5.	Suicide	150	11.	

AIAN Female 188 total deaths 1,684 years of life lost*

	Leading causes o	f deat	h	Leading causes of premature** death			
Rank	Cause of death		Premature death rank	2000 200	Cause of death	Years of life lost*	Death rank
1.	Coronary heart disease	40	1.	1.	Coronary heart disease	201	1.
2.	Diabetes	15	5.	2.	Liver disease/cirrhosis	189	5.
3.	Hypertension	11	13.	3.	Drug overdose	126	11.
4.	Stroke	9	15.	4.	Suicide	95	12.
5.	Liver disease/cirrhosis	8	2.	5.	Diabetes	92	2.

Leading causes of death

Age group	#1 cause	#2 cause	#3 cause	#4 cause	#5 cause
Number of deaths	Number of deaths	Number of deaths	Number of deaths	Number of deaths	Number of deaths
Age-specific death rate	Age-specific death rate	Age-specific death rate	Age-specific death rate	Age-specific death rate	Age-specific death rate
<1 year old	Low birthweight/prematurity	SIDS*	Heart defect	Pregnancy complication	Edwards Syndrome
567	124	44	35	22	17
438 per 100,000	96 per 100,000	34 per 100,000	27 per 100,000	17 per 100,000	
1-4 years old	Birth defect	Homicide	Motor vehicle crash	Drowning	Leukemia
85	16	11	9	6	<5
16 per 100,000					
5-14 years old	Motor vehicle crash	Brain/CNS [†] cancer	Birth defect	Leukemia	Homicide
136	17	13	12	12	7
11 per 100,000					
15-24 years old	Homicide	Motor vehicle crash	Suicide	Drug overdose	Leukemia
732	188	155	84	56	24
49 per 100,000	12 per 100,000	10 per 100,000	6 per 100,000	4 per 100,000	2 per 100,000
25-44 years old	Drug overdose	Homicide	Suicide	Motor vehicle crash	Coronary heart disease
2,801	269	246	236	217	164
95 per 100,000	9 per 100,000	8 per 100,000	8 per 100,000	7 per 100,000	6 per 100,000
45-64 years old	Coronary heart disease	Liver disease/cirrhosis	Lung cancer	Diabetes	Stroke
11,878	2,103	721	611	500	473
481 per 100,000	85 per 100,000	29 per 100,000	25 per 100,000	20 per 100,000	19 per 100,000
65-74 years old	Coronary heart disease	Lung cancer	COPD	Diabetes	Stroke
9,635	1,879	766	515	490	448
1,515 per 100,000	295 per 100,000	120 per 100,000	81 per 100,000	77 per 100,000	70 per 100,000
75+ years old	Coronary heart disease	Alzheimer's disease	Stroke	COPD	Pneumonia/influenza
33,838	7,677	2,421	2,294	2,069	1,760
6,249 per 100,000	1,418 per 100,000	447 per 100,000	424 per 100,000	382 per 100,000	325 per 100,000
Los Angeles County Total	Coronary heart disease	Stroke	COPD	Lung cancer	Alzheimer's disease
59,678	11,827	3,300	2,874	2,687	2,577
593 per 100,000**	117 per 100,000	33 per 100,000	29 per 100,000	28 per 100,000	25 per 100,000

Note: Total includes persons of unknown age.

*SIDS=Sudden Infant Death Syndrome.

+CNS=Central Nervous System.

**Age-adjusted rate.

--Number of deaths is too small to calculate a reliable rate.

Figure 10. Leading causes of death for males, by age group and race/ethnicity

		Race/ethnicity Deaths from all causes	#1 Cause Number of deaths	#2 Cause Number of deaths	#3 Cause Number of deaths
		White 54	Perinatal period condition 22	Birth defect 13	Brain/CNS* cancer <5
	0-14 years 423 deaths	Latino 256	Perinatal period condition 95	Birth defect 54	Motor vehicle crash 13
		Black 77	Perinatal period condition 42	Homicide 7	Birth defect 6
		Asian 32	Perinatal period condition 15	Birth defect <5	Insufficient number
		White 96	Motor vehicle crash 21	Drug overdose** 18	Suicide** 18
	15-24 years 569 deaths	Latino 319	Homicide 91	Motor vehicle crash 75	Suicide 35
	15-24 569 d	Black 107	Homicide 67	Motor vehicle crash 9	Suicide 6
		Asian 43	Suicide 9	Motor vehicle crash 8	Leukemia <5
		White 509	Drug overdose 104	Suicide 61	Motor vehicle crash 52
	25-44 years 1,887 deaths	Latino 905	Homicide 114	Motor vehicle crash 97	Suicide 75
	25-44	Black 312	Homicide 92	Suicide 19	Motor vehicle crash 15
Males		Asian 130	Suicide 22	Coronary heart disease 18	Motor vehicle crash 12
Ma		White 2,987	Coronary heart disease 721	Liver disease/cirrhosis 175	Suicide 167
	years deaths	Latino 2,405	Coronary heart disease 439	Liver disease/cirrhosis 301	Diabetes 147
	45-64 yeaı 7,393 deatl	Black 1,233	Coronary heart disease 297	Lung cancer 63	Stroke 58
		Asian 691	Coronary heart disease 139	Lung cancer 55	Liver cancer 44

		White 2,586	Coronary heart disease 583	Lung cancer 222	COPD 190
65-74 years	deaths	Latino 1,451	Coronary heart disease 290	Diabetes 98	Liver disease/cirrhosis 85
65-74	5,520 (Black 811	Coronary heart disease 206	Lung cancer 60	COPD 50
		Asian 612	Coronary heart disease 120	Lung cancer 57	Stroke 48
	0	White 8,300	Coronary heart disease 2,018	COPD 580	Alzheimer's disease 493
ears	deaths				
75+ years	14,617 deaths	8,300 Latino	2,018 Coronary heart disease	580 Stroke	493 Diabetes

Note: The four largest race/ethnic groups (White, black, Latino/a, and Asian) are presented. Native Hawaiian and other Pacific Islander (NHOPI) and American Indian and Alaska Native (AIAN) cannot be presented separately because of small numbers. See Pages 14 and 15 for more information on these two race groups.

In each age group, the number of deaths from all causes includes NHOPI, AIAN, and persons of other or unknown race/ethnicity.

*CNS=Central Nervous System.

**Drug overdose and suicide each resulted in 18 deaths and 961 years of life lost for white 15-24-year-old males, and were tied for the second-leading cause of death.

Figure 11. Leading causes of death for females, by age group and race/ethnicity

		Race/ethnicity Deaths from all causes	#1 Cause Number of deaths	#2 Cause Number of deaths	#3 Cause Number of deaths
		White 57	Perinatal period condition 23	Birth defect 12	Insufficient number
	0-14 years 365 deaths	Latina 219	Perinatal period condition 66	Birth defect 61	Leukemia 9
	0-14 365 d	Black 54	Perinatal period condition 26	Birth defect 8	Homicide <5
		Asian 32	Perinatal period condition 17	Birth defect 5	Insufficient number
		White 33	Motor vehicle crash 9	Suicide 5	Drug overdose 5
	15-24 years 163 deaths	Latina 88	Motor vehicle crash 22	Homicide 8	Suicide 8
	15-24 163 d	Black 26	Motor vehicle crash 7	Homicide <5	Anemia <5
		Asian 15	Motor vehicle crash <5	Brain/CNS* cancer <5	Homicide <5
	_	White 226	Drug overdose 35	Suicide 27	Breast cancer 26
	25-44 years 914 deaths	Latina 413	Breast cancer 42	Drug overdose 22	Motor vehicle crash 21
	25-44 914 d	Black 172	Coronary heart disease 14	Drug overdose 14	Breast cancer 14
ales		Asian 92	Breast cancer 12	Suicide 10	Stroke 10
Females		White 1,677	Coronary heart disease 186	Breast cancer 182	Lung cancer 118
	45-64 years I,485 deaths	Latina 1,391	Coronary heart disease 125	Breast cancer 117	Diabetes 101
	45-64 yea 4,485 dea	Black 849	Coronary heart disease 129	Breast cancer 61	Lung cancer 50
		Asian 503	Breast cancer 74	Lung cancer 49	Coronary heart disease 38

	White	Coronary heart disease	Lung cancer	COPD
	1,837	293	199	159
·years	Latina	Coronary heart disease	Diabetes	Stroke
deaths	1,080	143	99	59
65-74	Black	Coronary heart disease	Lung cancer	Stroke
4,115 (723	152	55	44
	Asian	Coronary heart disease	Lung cancer	Stroke
	423	64	42	28
(0	White	Coronary heart disease	Alzheimer's disease	COPD
	10,825	2,339	1,016	776
/ears deaths		and the second		
75+ years	10,825	2,339	1,016	776
19,221 deaths		Coronary heart disease	Alzheimer's disease	Stroke

Note: The four largest race/ethnic groups (White, black, Latino/a, and Asian) are presented. Native Hawaiian and other Pacific Islander (NHOPI) and American Indian and Alaska Native (AIAN) cannot be presented separately because of small numbers. See Pages 14 and 15 for more information on these two race groups.

In each age group, the number of deaths from all causes includes NHOPI, AIAN, and persons of other or unknown race/ethnicity.

*CNS=Central Nervous System.

Figure 12. Leading causes of death and premature death, by service planning area (SPA) of residence

	Antelope Valley (SPA 1) 2,419 deaths 23,046 years of life lost Leading causes of death Leading causes of premature** death										
Rank	No. of Premature Rank Cause of death deaths death rank				Cause of death	Years of life lost*					
1.	Coronary heart disease	453	1.	1.	Coronary heart disease	2,972	1.				
2.	COPD	170	9.	2.	Motor vehicle crash	2,244	8.				
3.	Lung cancer	130	8.	3.	Drug overdose	1,442	11.				
4.	Stroke	113	10.	4.	Homicide	1,095	18.				
5.	Alzheimer's disease	110	38.	5.	Diabetes	1,003	6.				

	13,029 deaths 83,668 years of life lost										
	Leading causes o	of deat	h	Leading causes of premature** death							
Rank	Cause of death		Premature death rank			Years of life lost*	Death rank				
1.	Coronary heart disease	2,717	1.	1.	Coronary heart disease	10,516	1.				
2.	Alzheimer's disease	703	39.	2.	Suicide	5,270	13.				
3.	Stroke	649	10.	3.	Drug overdose	5,246	15.				
4.	Lung cancer	625	6.	4.	Motor vehicle crash	5,080	16.				
5.	COPD	592	15.	5.	Liver disease/cirrhosis	4,318	10.				

Metro (SPA 4)

6,249 deaths 47 489 years of life lost

	47,489 years of life lost											
	Leading causes o	of deat	h	Leading causes of premature** death								
Rank	Cause of death		Premature death rank	Rank	Cause of death	Years of life lost*	Death rank					
1.	Coronary heart disease	1,323	1.	1.	Coronary heart disease	5,948	1.					
2.	Stroke	357	7.	2.	Drug overdose	3,009	11.					
3.	Lung cancer	271	9.	3.	Motor vehicle crash	2,878	17.					
4.	Pneumonia/influenza	261	19.	4.	Liver disease/cirrhosis	2,855	8.					
5.	Diabetes	256	8.	5.	Suicide	2,534	16.					

San Gabriel (SPA 3) 11,230 deaths 72,493 years of life lost Leading causes of death Leading causes of premature** death

Rank	Cause of death		Premature death rank		Cause of death	Years of life lost*	Death rank
1.	Coronary heart disease	2,193	1.	1.	1. Coronary heart disease		1.
2.	Stroke	673	8.	2.	Liver disease/cirrhosis	3,518	10.
3.	COPD	601	14.	3.	Lung cancer	3,449	4.
4.	Lung cancer	550	3.	4.	Suicide	3,407	16.
5.	Alzheimer's disease	504	41.	5.	Homicide	3,330	24.

San Fernando (SPA 2)

West (SPA 5)

4,053 deaths

	20,694 years of life lost										
	Leading causes o	f deat	h	Lea	ding causes of prema	ture** d	eath				
Rank	Cause of death		Premature death rank			Years of life lost*	Death rank				
1.	Coronary heart disease	764	1.	1.	Coronary heart disease	2,203	1.				
2.	Stroke	249	8.	2.	Drug overdose	2,022	13.				
3.	Alzheimer's disease	212	41.	3.	Suicide	1,472	17.				
4.	Lung cancer	189	7.	4.	Liver disease/cirrhosis	1,022	16.				
5.	Pneumonia/influenza	173	25.	5.	Breast cancer	969	8.				

South (SPA 6) 5,484 deaths

58,525 years of life lost

	Leading causes o	of deat	h	Leading causes of premature** death							
Rank	Cause of death		Premature death rank	Rank	Cause of death	Years of life lost*	Death rank				
1.	Coronary heart disease	1,061	2.	1.	Homicide	7,214	7.				
2.	Stroke	292	7.	2.	Coronary heart disease	7,142	1.				
3.	Diabetes	279	4.	3.	Motor vehicle crash	3,031	15.				
4.	COPD	224	12.	4.	Diabetes	2,708	3.				
5.	Lung cancer	223	8.	5.	Drug overdose	2,285	16.				

South Bay (SPA 8)

	9,832 deaths 75,032 years of life lost									
	Leading causes o	of deat	h	Lea	Leading causes of premature** death					
Rank	No. of Premature Rank Cause of death deaths death ran			10111 10	Cause of death	Years of life lost*	Death rank			
1.	Coronary heart disease	1,933	1.	1.	Coronary heart disease	9,889	1.			
2.	Stroke	553	8.	2.	Homicide	5,415	17.			
3.	COPD	532	12.	3.	Drug overdose	3,844	16.			
4.	Lung cancer	440	7.	4.	Suicide	3,637	14.			
5.	Alzheimer's disease	395	37.	5.	Motor vehicle crash	3,077	19.			

	East (SPA 7) 7,337 deaths 54,177 years of life lost											
	Leading causes of death				Leading causes of premature** death							
Rank	No. of Premature Rank Cause of death deaths death rank Rank Cause		Cause of death	Years of life lost*	Death rank							
1.	Coronary heart disease	1,373	1.	1.	Coronary heart disease	6,011	1.					
2.	Stroke	413	7.	2.	Liver disease/cirrhosis	3,259	8.					
3.	COPD	351	16.	3.	Motor vehicle crash	3,153	15.					
4.	Diabetes	312	8.	4.	Homicide	2,745	21.					
5.	Alzheimer's disease	283	46.	5.	Suicide	2,593	16.					

*Excludes infants less than 1 year of age and persons of unknown age. **Death before age 75 years.

Figure 13. Comparison of the leading causes of death and premature death, by service planning area (SPA) of residence

Leading causes of death

Service Planning Area	#1 cause	#2 cause	#3 cause	#4 cause	#5 cause
Number of deaths	Number of deaths	Number of deaths	Number of deaths	Number of deaths	Number of deaths
Age-adjusted death rate	Age-adjusted death rate	Age-adjusted death rate	Age-adjusted death rate	Age-adjusted death rate	Age-adjusted death rate
SPA 1: Antelope Valley	Coronary heart disease	COPD	Lung cancer	Stroke	Alzheimer's disease
2,419	453	170	130	113	110
776 per 100,000	148 per 100,000	59 per 100,000	43 per 100,000	38 per 100,000	41 per 100,000
SPA 2: San Fernando	Coronary heart disease	Alzheimer's disease	Stroke	Lung cancer	COPD
13,029	2,717	703	649	625	592
574 per 100,000	119 per 100,000	30 per 100,000	29 per 100,000	28 per 100,000	27 per 100,000
SPA 3: San Gabriel	Coronary heart disease	Stroke	COPD	Lung cancer	Alzheimer's disease
11,230	2,193	673	601	550	504
562 per 100,000	107 per 100,000	33 per 100,000	30 per 100,000	28 per 100,000	24 per 100,000
SPA 4: Metro	Coronary heart disease	Stroke	Lung cancer	Pneumonia/influenza	Diabetes
6,249	1,323	357	271	261	256
552 per 100,000	117 per 100,000	32 per 100,000	25 per 100,000	23 per 100,000	23 per 100,000
SPA 5: West	Coronary heart disease	Stroke	Alzheimer's disease	Lung cancer	Pneumonia/influenza
4,053	764	249	212	189	173
483 per 100,000	88 per 100,000	28 per 100,000	23 per 100,000	24 per 100,000	19 per 100,000
SPA 6: South	Coronary heart disease	Stroke	Diabetes	COPD	Lung cancer
5,484	1,061	292	279	224	223
727 per 100,000	147 per 100,000	40 per 100,000	38 per 100,000	32 per 100,000	31 per 100,000
SPA 7: East	Coronary heart disease	Stroke	COPD	Diabetes	Alzheimer's disease
7,337	1,373	413	351	312	283
604 per 100,000	113 per 100,000	34 per 100,000	30 per 100,000	26 per 100,000	23 per 100,000
SPA 8: South Bay	Coronary heart disease	Stroke	COPD	Lung cancer	Alzheimer's disease
9,832	1,933	553	532	440	395
624 per 100,000	122 per 100,000	36 per 100,000	34 per 100,000	28 per 100,000	25 per 100,000
Los Angeles County Total	Coronary heart disease	Stroke	COPD	Lung cancer	Alzheimer's disease
59,678	11,827	3,300	2,874	2,687	2,577
593 per 100,000	117 per 100,000	33 per 100,000	29 per 100,000	28 per 100,000	25 per 100,000

Service Planning Area	#1 cause	#2 cause	#3 cause	#4 cause	#5 cause
SPA 1: Antelope Valley	Coronary heart disease	Motor vehicle crash	Drug overdose	Homicide	Diabetes
SPA 2: San Fernando	Coronary heart disease	Suicide	Drug overdose	Motor vehicle crash	Liver disease/cirrhosis
SPA 3: San Gabriel	Coronary heart disease	Liver disease/cirrhosis	Lung cancer	Suicide	Homicide
SPA 4: Metro	Coronary heart disease	Drug overdose	Motor vehicle crash	Liver disease/cirrhosis	Suicide
SPA 5: West	Coronary heart disease	Drug overdose	Suicide	Liver disease/cirrhosis	Breast cancer
SPA 6: South	Homicide	Coronary heart disease	Motor vehicle crash	Diabetes	Drug overdose
SPA 7: East	Coronary heart disease	Liver disease/cirrhosis	Motor vehicle crash	Homicide	Suicide
SPA 8: South Bay	Coronary heart disease	Homicide	Drug overdose	Suicide	Motor vehicle crash
Los Angeles County Total	Coronary heart disease	Homicide	Motor vehicle crash	Drug overdose	Suicide

Leading causes of premature death (before age 75 years)

Figure 14. Comparison of the leading causes of premature death, by service planning area (SPA) of residence and gender

Males: Leading causes of premature death (before age 75 years)

Service Planning Area	#1 cause	#2 cause	#3 cause	#4 cause	#5 cause
SPA 1: Antelope Valley	Coronary heart disease	Motor vehicle crash	Homicide	Suicide	Drug overdose
SPA 2: San Fernando	Coronary heart disease	Motor vehicle crash	Suicide	Drug overdose	Liver disease/cirrhosis
SPA 3: San Gabriel	Coronary heart disease	Homicide	Suicide	Liver disease/cirrhosis	Motor vehicle crash
SPA 4: Metro	Coronary heart disease	Drug overdose	Motor vehicle crash	Liver disease/cirrhosis	Suicide
SPA 5: West	Coronary heart disease	Drug overdose	Suicide	Motor vehicle crash	Liver disease/cirrhosis
SPA 6: South	Homicide	Coronary heart disease	Motor vehicle crash	Diabetes	Liver disease/cirrhosis
SPA 7: East	Coronary heart disease	Liver disease/cirrhosis	Homicide	Motor vehicle crash	Suicide
SPA 8: South Bay	Coronary heart disease	Homicide	Suicide	Drug overdose	Motor vehicle crash
All males	Coronary heart disease	Homicide	Motor vehicle crash	Suicide	Drug overdose

Females: Leading	causes of	premature death	(before age	e 75 ye	ars)
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Service Planning Area	#1 cause	#2 cause	#3 cause	#4 cause	#5 cause
SPA 1: Antelope Valley	Coronary heart disease	Motor vehicle crash	Drug overdose	Breast cancer	Diabetes
SPA 2: San Fernando	Breast cancer	Coronary heart disease	Drug overdose	Suicide	Lung cancer
SPA 3: San Gabriel	Breast cancer	Coronary heart disease	Lung cancer	Diabetes	Stroke
SPA 4: Metro	Coronary heart disease	Breast cancer	Liver disease/cirrhosis	Motor vehicle crash	Lung cancer
SPA 5: West	Breast cancer	Drug overdose	Coronary heart disease	Suicide	Lung cancer
SPA 6: South	Coronary heart disease	Breast cancer	Diabetes	Drug overdose	Motor vehicle crash
SPA 7: East	Coronary heart disease	Breast cancer	Stroke	Motor vehicle crash	Colorectal cancer
SPA 8: South Bay	Coronary heart disease	Breast cancer	Lung cancer	Stroke	Drug overdose
All females	Coronary heart disease	Breast cancer	Lung cancer	Drug overdose	Stroke











Chronic obstructive pulmonary disease

Alzheimer's disease



Diabetes



Pneumonia/influenza — Los Angeles County rate



*Age-adjusted.

**The Healthy People 2020 goal for chronic obstructive pulmonary disease was 102.6 deaths per 100,000 population aged 45 years and over. The overall County rate for chronic obstructive pulmonary disease was 29.2 deaths per 100,000 population, and 78.7 for those aged 45 years and over.

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Figure 16. Comparison of the leading causes of death, by health district of residence

Leading causes of death

Health District Number of deaths Age-adjusted death rate	#1 cause Number of deaths	#2 cause Number of deaths	#3 cause Number of deaths	#4 cause Number of deaths	#5 cause Number of deaths
Alhambra 2,394 497 per 100,000	Coronary heart disease 501	Stroke 140	Pneumonia/influenza 138	Lung cancer 115	COPD 115
Antelope Valley 2,419 776 per 100,000	Coronary heart disease 453	COPD 170	Lung cancer 130	Stroke 113	Alzheimer's disease 110
Belifiower 2,263 635 per 100,000	Coronary heart disease 410	COPD 130	Stroke 126	Lung cancer 90	Diabetes 89
Central 1,866 561 per 100,000	Coronary heart disease 437	Stroke 99	Pneumonia/influenza 88	Diabetes 77	COPD 73
Compton 1,397 717 per 100,000	Coronary heart disease 224	Stroke 81	Diabetes 77	Lung cancer 59	COPD 55
East LA 1,213 625 per 100,000	Coronary heart disease 250	Stroke 66	Diabetes 61	COPD 48	Pneumonia/influenza 47
East Valley 2,497 599 per 100,000	Coronary heart disease 526	Stroke 139	COPD 108	Alzheimer's disease 104	Pneumonia/influenza 103
El Monte 2,211 541 per 100,000	Coronary heart disease 384	Stroke 127	Lung cancer 123	Diabetes 103	COPD 98
Foothill 2,162 598 per 100,000	Coronary heart disease 449	COPD 127	Stroke 120	Lung cancer 107	Alzheimer's disease 96
Glendale 2,417 542 per 100,000	Coronary heart disease 473	Alzheimer's disease 167	Stroke 129	Lung cancer 117	Pneumonia/influenza 102
Harbor 1,382 548 per 100,000	Coronary heart disease 257	Stroke 73	Alzheimer's disease 72	COPD 68	Lung cancer 53
Hollywood-Wilshire 2,737 541 per 100,000	Coronary heart disease 572	Stroke 155	Lung cancer 141	Pneumonia/influenza 112	COPD 107
Inglewood 2,338 641 per 100,000	Coronary heart disease 453	Stroke 145	COPD 122	Lung cancer 107	Pneumonia/influenza 86

Long Beach 3,004 710 per 100,000	Coronary heart disease 625	COPD 181	Stroke 166	Lung cancer 126	Alzheimer's disease 110
Northeast 1,646 563 per 100,000	Coronary heart disease 314	Stroke 103	Diabetes 81	COPD 68	Alzheimer's disease 68
Pasadena 1,016 572 per 100,000	Coronary heart disease 212	Stroke 70	COPD 61	Alzheimer's disease 60	Pneumonia/influenza 43
Pomona 3,447 602 per 100,000	Coronary heart disease 647	Stroke 216	COPD 200	Alzheimer's disease 169	Lung cancer 163
San Antonio 1,811 584 per 100,000	Coronary heart disease 310	Stroke 117	Diabetes 86	Alzheimer's disease 77	COPD 74
San Fernando 2,615 569 per 100,000	Coronary heart disease 534	Lung cancer 131	Alzheimer's disease 130	COPD 129	Stroke 114
South 910 772 per 100,000	Coronary heart disease 165	Homicide 50	Stroke 50	Diabetes 48	Lung cancer 39
Southeast 592 658 per 100,000	Coronary heart disease 110	Diabetes 40	Stroke 37	Pneumonia/influenza 24	COPD 23
Southwest 2,585 743 per 100,000	Coronary heart disease 562	Stroke 124	COPD 115	Diabetes 114	Pneumonia/influenza 110
Torrance 3,108 575 per 100,000	Coronary heart disease 598	Stroke 169	COPD 161	Lung cancer 154	Pneumonia/influenza 143
West 4,053 483 per 100,000	Coronary heart disease 764	Stroke 249	Alzheimer's disease 212	Lung cancer 189	Pneumonia/influenza 173
West Valley 5,500 579 per 100,000	Coronary heart disease 1,184	Alzheimer's disease 302	Lung cancer 278	Stroke 267	COPD 254
Whittier 2,050 579 per 100,000	Coronary heart disease 403	Stroke 104	COPD 99	Alzheimer's disease 80	Pneumonia/influenza 79
Los Angeles County Total 59,678 593 per 100,000	Coronary heart disease 11,827	Stroke 3,300	COPD 2,874	Lung cancer 2,687	Alzheimer's disease 2,577

Leading causes of premature death (before age 75 years)

Health District	#1 cause	#2 cause	#3 cause	#4 cause	#5 cause
Alhambra	Coronary heart disease	Suicide	Lung cancer	Colorectal cancer	Liver disease/cirrhosis
Antelope Valley	Coronary heart disease	Motor vehicle crash	Drug overdose	Homicide	Diabetes
Bellflower	Coronary heart disease	Motor vehicle crash	Homicide	Suicide	Drug overdose
Central	Coronary heart disease	Drug overdose	Liver disease/cirrhosis	Motor vehicle crash	Suicide
Compton	Homicide	Coronary heart disease	Motor vehicle crash	Diabetes	Suicide
East Los Angeles	Coronary heart disease	Liver disease/cirrhosis	Homicide	Suicide	Motor vehicle crash
East Valley	Coronary heart disease	Suicide	Liver disease/cirrhosis	Drug overdose	Motor vehicle crash
El Monte	Coronary heart disease	Motor vehicle crash	Liver disease/cirrhosis	Homicide	Lung cancer
Foothill	Coronary heart disease	Liver disease/cirrhosis	Suicide	Colorectal cancer	Lung cancer
Glendale	Coronary heart disease	Suicide	Motor vehicle crash	Drug overdose	Liver disease/cirrhosis
Harbor	Coronary heart disease	Liver disease/cirrhosis	Homicide	Motor vehicle crash	Suicide
Hollywood/Wilshire	Coronary heart disease	Suicide	Drug overdose	Liver disease/cirrhosis	Motor vehicle crash
Inglewood	Coronary heart disease	Homicide	Drug overdose	Stroke	Motor vehicle crash
Long Beach	Coronary heart disease	Homicide	Suicide	Drug overdose	Liver disease/cirrhosis
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Northeast	Coronary heart disease	Motor vehicle crash	Homicide	Liver disease/cirrhosis	Diabetes
Pasadena	Coronary heart disease	Lung cancer	Diabetes	Breast cancer	Suicide
Pomona	Coronary heart disease	Homicide	Drug overdose	Suicide	Lung cancer
San Antonio	Coronary heart disease	Homicide	Motor vehicle crash	Liver disease/cirrhosis	Stroke
San Fernando	Coronary heart disease	Drug overdose	Motor vehicle crash	Liver disease/cirrhosis	Suicide
South	Homicide	Coronary heart disease	Motor vehicle crash	Drug overdose	Diabetes
Southeast	Coronary heart disease	Homicide	Diabetes	Liver disease/cirrhosis	Motor vehicle crash
Southwest	Coronary heart disease	Homicide	Motor vehicle crash	Diabetes	Drug overdose
Torrance	Coronary heart disease	Suicide	Drug overdose	Lung cancer	Diabetes
West	Coronary heart disease	Drug overdose	Suicide	Liver disease/cirrhosis	Breast cancer
West Valley	Coronary heart disease	Motor vehicle crash	Drug overdose	Suicide	Liver disease/cirrhosis
Whittier	Coronary heart disease	Liver disease/cirrhosis	Motor vehicle crash	Suicide	Drug overdose
Los Angeles County Total	Coronary heart disease	Homicide	Motor vehicle crash	Drug overdose	Suicide

Note: Total includes persons of unknown residence.



Figure 18. Death rates for selected causes of death, by health district of residence

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Chronic obstructive pulmonary disease

Los Angeles County rate ---- Healthy People 2020 objective**

Alzheimer's disease

-Los Angeles County rate









*Age-adjusted.

**The Healthy People 2020 goal for chronic obstructive pulmonary disease was 102.6 deaths per 100,000 population aged 45 years and over. The overall County rate for chronic obstructive pulmonary disease was 29.2 deaths per 100,000 population, and 78.7 for those aged 45 years and over.

Leading causes of death

Year	#1 cause No. of deaths	#2 cause No. of deaths	#3 cause No. of deaths	#4 cause No. of deaths	#5 cause No. of deaths	#6 cause No. of deaths	#7 cause No. of deaths	#8 cause No. of deaths	#9 cause No. of deaths	#10 cause No. of deaths
2013	Coronary heart disease 11,827	Stroke 3,300	COPD 2,874	Lung cancer 2,687	Alzheimer's disease 2,577	Pneumonia/ influenza 2,264	Diabetes 2,172	Colorectal cancer 1,376	Liver disease/ cirrhosis 1,315	Hypertension 1,195
2012	Coronary heart disease 11,677	Stroke 3,360	Lung cancer 2,809	COPD 2,646	Alzheimer's disease 2,476	Diabetes 2,204	Pneumonia/ influenza 2,048	Colorectal cancer 1,397	Liver disease/ cirrhosis 1,275	Hypertension 1,242
2011	Coronary heart disease 11,913	Stroke 3,256	Lung cancer 2,908	COPD 2,874	Alzheimer's disease 2,346	Diabetes 2,196	Pneumonia/ influenza 2,062	Colorectal cancer 1,400	Liver disease/ cirrhosis 1,246	Breast cancer 1,153
			Because of changes to	the criteria for categor	izing some causes of de	eath, 2004-2010 may no	t be comparable to 201	1-2013*		
2010	Coronary heart disease 12,635	Stroke 3,278	Lung cancer 2,941	COPD 2,622	Alzheimer's disease 2,242	Pneumonia/ influenza 1,964	Diabetes 1,894	Colorectal cancer 1,285	Liver disease/ cirrhosis 1,171	Breast cancer 1,116
2009	Coronary heart disease 12,725	Stroke 3,301	Lung cancer 2,958	COPD 2,904	Alzheimer's disease 2,125	Pneumonia/ influenza 2,097	Diabetes 1,964	Colorectal cancer 1,388	Liver disease/ cirrhosis 1,246	Breast cancer 1,173
2008	Coronary heart disease 13,428	Stroke 3,280	Lung cancer 2,910	COPD 2,889	Diabetes 2,190	Pneumonia/ influenza 2,171	Alzheimer's disease 2,121	Colorectal cancer 1,365	Liver disease/ cirrhosis 1,134	Breast cancer 1,079
2007	Coronary heart disease 13,890	Stroke 3,323	Lung cancer 2,950	COPD 2,625	Pneumonia/ influenza 2,184	Diabetes 2,127	Alzheimer's disease 1,780	Colorectal cancer 1,323	Breast cancer 1,139	Liver disease/ cirrhosis 1,133
2006	Coronary heart disease 14,842	Stroke 3,662	Lung cancer 3,021	COPD 2,665	Pneumonia/ influenza 2,283	Diabetes 2,188	Alzheimer's disease 1,551	Colorectal cancer 1,362	Liver disease/ cirrhosis 1,102	Breast cancer 1,071
2005	Coronary heart disease 15,154	Stroke 3,775	Lung cancer 3,036	COPD 2,770	Pneumonia/ influenza 2,333	Diabetes 2,305	Alzheimer's disease 1,546	Colorectal cancer 1,409	Breast cancer 1,174	Homicide 1,066
2004	Coronary heart disease 15,296	Stroke 4,121	Lung cancer 3,034	COPD 2,641	Pneumonia/ influenza 2,272	Diabetes 2,201	Colorectal cancer 1,414	Alzheimer's disease 1,340	Breast cancer 1,166	Homicide 1,069

*See Pages 41, 43, 45, and 57 for information about changes to the ICD-codes for chronic obstructive pulmonary disease (COPD), colorectal cancer, coronary heart disease, and lung cancer.

Figure T2. Comparison of the leading causes of premature death, by year

Year	#1 cause	#2 cause	#3 cause	#4 cause	#5 cause	#6 cause	#7 cause	#8 cause	#9 cause	#10 cause
2013	Coronary heart disease	Homicide	Motor vehicle crash	Drug overdose	Suicide	Liver disease/ cirrhosis	Lung cancer	Diabetes	Stroke	Breast cancer
2012	Coronary heart disease	Homicide	Motor vehicle crash	Liver disease/ cirrhosis	Suicide	Drug overdose	Lung cancer	Diabetes	Stroke	Breast cancer
2011	Coronary heart disease	Homicide	Suicide	Liver disease/ cirrhosis	Motor vehicle crash	Drug overdose	Lung cancer	Diabetes	Stroke	Breast cancer
			Because of changes to	the criteria for categori	izing some causes of de	eath, 2004-2010 may no	ot be comparable to 201	1-2013*		
2010	Coronary heart disease	Homicide	Suicide	Motor vehicle crash	Liver disease/ cirrhosis	Drug overdose	Lung cancer	Stroke	Breast cancer	Diabetes
2009	Coronary heart disease	Homicide	Motor vehicle crash	Liver disease/ cirrhosis	Suicide	Drug overdose	Lung cancer	Stroke	Diabetes	Breast cancer
2008	Coronary heart disease	Homicide	Motor vehicle crash	Suicide	Liver disease/ cirrhosis	Drug overdose	Lung cancer	Diabetes	Stroke	Breast cancer
2007	Coronary heart disease	Homicide	Motor vehicle crash	Drug overdose	Liver disease/ cirrhosis	Suicide	Lung cancer	Stroke	Diabetes	Breast cancer
2006	Coronary heart disease	Homicide	Motor vehicle crash	Liver disease/ cirrhosis	Suicide	Lung cancer	Stroke	Drug overdose	Diabetes	Breast cancer
2005	Coronary heart disease	Homicide	Motor vehicle crash	Suicide	Lung cancer	Liver disease/ cirrhosis	Diabetes	Stroke	Drug overdose	Breast cancer
2004	Coronary heart disease	Homicide	Motor vehicle crash	Suicide	Lung cancer	Liver disease/ cirrhosis	Drug overdose	Stroke	Diabetes	HIV

Leading causes of premature death (before age 75 years)

*See Pages 41, 43, 45, and 57 for information about changes to the ICD-codes for chronic obstructive pulmonary disease (COPD), colorectal cancer, coronary heart disease, and lung cancer.

Alzheimer's Disease

ALZHEIMER'S DISEASE has been the fifth-leading cause of death since 2009. In 2013, it was the third-leading cause of death for women and the eighth-leading cause of death for men. The highest overall Alzheimer's disease death rate, 33 deaths per 100,000 population, was among white women. Over half of Alzheimer's disease were among women (67%). The highest Alzheimer's disease death rate was, 510 deaths per 100,000 population, among women older than 74 years of age.

In simple terms . . .

Alzheimer's disease is an irreversible, progressive brain disease that slowly destroys memory and thinking skills and, eventually, the ability to carry out the simplest tasks of daily living.

In most people with Alzheimer's disease, symptoms first appear after age 60. Alzheimer's disease is the most common cause of dementia in older people. There are medications that may temporarily lessen some of the symptoms, but there is no cure. Scientists are exploring possible connections between Alzheimer's disease and high cholesterol, high blood pressure, physical inactivity, and serious head injury.

Risk factors

Age, family history, genetics

Community opportunities for prevention

- Promote awareness and educate the public about what is normal aging
- Develop community support networks for caregivers
- Assist persons with early Alzheimer's disease to plan for their future financial and medical needs

Individual opportunities for prevention

- Work with your health care provider to maintain healthy blood pressure, cholesterol, and blood sugar levels
- Stay socially active by engaging in community groups, joining classes, or volunteering
- Eat a healthy diet that is rich in fruits, vegetables, and whole grains
- Make time to be physically active every day
- Learn new things and keep your mind active by reading, doing puzzles, or dancing (which requires anticipating and memorizing dance steps)
- Visit your doctor early if you are experiencing symptoms of memory loss or a decline in thinking ability

LOS ANGELES COUNTY

Deaths Death Rate	2,577 25.1 deaths per 100,000 population
Healthy People 2020 Objective	None
ICD-9 codes (1979-1998)	331.0
ICD-10 codes (1999-2013)	G30
References	Alzheimer's Association www.alz.org
	"Alzheimer's Disease: An Emerging Public Health Concern" www.publichealth.lacounty.gov/ha/ reports/LAHealthBrief2007/Alzheim- er's_Disease.pdf
	Alzheimer's Disease Education and Referral Center www.nia.nih.gov/alzheimers
Referral	Alzheimer's Association Helpline 1-800-272-3900

Figure T3. Trends in Alzheimer's disease mortality

	200)4	200	5	200	06	20	07	200	08	200	09	201	0	201	11		201	2	201	13
	No. of deaths	Death rate*		No. of deaths	Death rate*	No. of deaths	Death rate*														
Los Angeles County	1,340	16	1,546	18	1,551	18	1,780	20	2,121	23	2,125	22	2,242	25	2,346	24		2,476	24.0	2,577	25.1
Male	399	13	450	15	477	15	586	18	676	20	694	20	751	22	732	20		824	21.1	838	21.7
Female	941	18	1,096	20	1,074	20	1,194	21	1,445	24	1,431	23	1,491	26	1,614	26	caution.	1,652	25.7	1,739	27.0
White	975	20	1,132	23	1,105	23	1,297	26	1,487	29	1,480	28	1,509	31	1,525	29		1,606	30.6	1,592	31.0
Latino/a	143	9	168	10	217	12	239	12	310	15	349	17	376	20	412	19	eted	423	17.7	513	21.4
Black	155	22	176	24	151	21	159	22	204	26	184	23	186	25	226	28	terpre	221	25.7	265	30.7
Asian [†] Males	65	6	69	6	76	7	80	6	116	8	108	8	167	12	176	11	should be interpreted with	216	12.3	197	10.9
White	289	16	319	18	336	19	417	23	478	25	497	25	510	28	465	24	trends :	539	26.6	534	27.3
Latino	46	8	53	9	71	11	71	10	91	12	108	14	133	19	135	17		154	17.3	172	19.1
Black	40	17	55	23	45	19	63	25	58	22	51	19	55	22	67	24	refore	64	21.3	63	20.8
Asian [†]	24	5	23	5	25	5	33	6	47	9	36	7	52	9	62	10	NHOPI**, therefore,	62	9.0	68	9.7
Females															1		N Pe	4 0 0 7		4	
White Latina	686 97	22 10	813 115	26 11	769 146	25 13	880 168	28 14	1,009 219	31 17	983 241	29 18	999 243	32 20	1,060 277	32 20	included	1,067 269	33.2 17.9	1,058 341	33.2 22.4
Black	115	24	121	25	140	22	96	19	146	28	133	26	131	26	159	20	Asian in	157	27.5	202	35.8
Asian [†]	41	7	46	7	51	7	47	6	69	8	72	8	115	13	105	11	2012,	154	14.4	129	11.6
SPA 1: Antelope Valley	43	24	60	31	50	25	70	32	74	32	72	30	86	39	75	30	Before	95	36.6	110	40.8
SPA 2: San Fernando	343	19	409	22	407	22	490	25	595	29	568	27	606	29	618	27	B	657	27.5	703	30.0
SPA 3: San Gabriel	268	16	307	18	313	19	384	22	381	21	399	21	422	23	473	23		516	24.9	504	24.2
SPA 4: Metro	120	12	137	13	142	13	131	12	189	16	169	14	190	19	222	20		219	18.5	222	19.1
SPA 5: West	133	17	161	20	116	15	167	21	198	23	216	25	210	24	188	20		225	23.8	212	23.3
SPA 6: South	108	18	101	17	99	16	89	14	128	19	128	19	96	17	139	22		135	19.8	148	22.0
SPA 7: East	144	14	148	14	194	18	170	15	240	20	262	22	293	27	263	22		269	21.6	283	23.1
SPA 8: South Bay	175	14	222	17	221	17	272	20	309	22	311	21	339	24	367	24		359	23.2	395	24.9

*Age-adjusted rate per 100,000. The death rates for 2004-2009 were recalculated using new population estimates based on the 2010 Census, therefore, death rates in this report may differ from rates previously published. See Note on Page 5 for additional information.
**NHOPI= Native Hawaiian and other Pacific Islander.

+From 2004-2011, the number of deaths and death rates for Asians includes NHOPI. Starting 2012, Asian and NHOPI were separated into different race categories. Trends for Asian population should be interpreted with caution.

Breast Cancer (Female)

IN 2013, BREAST CANCER was the leading cause of premature death for Latina and Asian women, and the second-leading cause of premature death for white and black women. The median age at death from breast cancer was 61 years for Latinas, compared with 62 years for Asians, 65 years for blacks, and 70 years for whites. In 2013, the breast cancer death rates for Latinas and Asian women were below the Healthy People 2020 objective.

In simple terms . . .

Cancer is a term for diseases in which cells in your body grow out of control. Cancer cells can invade nearby tissue and spread to other parts of the body through the blood and lymph systems. Breast cancer starts in the cells of the breast. Men can get breast cancer, but it is uncommon.

Risk factors (for women)

Age, family or personal history of breast cancer, having a BRCA1 or BRCA2 gene mutation, history of radiation treatment to the chest area, early menstruation (before age 12), late menopause (after age 55), never giving birth, excessive alcohol consumption, long-term use of combined hormone replacement therapy, being overweight, lack of physical activity

Community opportunities for prevention

- Promote the availability of breast cancer screening and follow-up
- Provide education on the importance of receiving breast cancer screening on-schedule
- Promote physical activity by providing access to safe places like parks and schools to walk, play, and exercise

Individual opportunities for prevention

- Follow recommended guidelines for breast cancer screening** and follow-up
- Know your family history of breast cancer
- Limit alcohol consumption
- Maintain a healthy weight
- Eat a healthy diet that is rich in fruits, vegetables, and whole grains
- Make time to be physically active every day with your children, partner, pet, friends, or on your own
- Talk to your doctor about the risks and benefits of hormone replacement therapy

2nd cause of premature death (females)7th cause of death (females)

LOS ANGELES COUNTY

Deaths Death Rate	
Healthy People 2020 Objective C-3	20.7 deaths per 100,000 females
ICD-9 codes (1979-1998)	174-175
ICD-10 codes (1999-2013)	C50
References	American Cancer Society
Kelelelices	www.cancer.org
	National Cancer Institute, Surveillance, Epidemiology and End Results (SEER) Program www.seer.cancer.gov/registries/ los_angeles.html
	Centers for Disease Control and Prevention www.cdc.gov/cancer/breast
	Guide to Community Preventive Services www.thecommunityguide.org
Referral	Los Angeles County Department of Public Health, Office of Women's Health Hotline 1-800-793-8090
	CA Department of Public Health,

Cancer Detection Programs Every Woman Counts 1-800-511-2300

*In 2013, there were 18 additional breast cancer deaths among males.

Figure T4. Trends in breast cancer (female) mortality

	200	04	200	5	200	06	200	07	200	08	200	09	201	10	201	11		201	2	201	13
	No. of deaths	Death rate*	d be	No. of deaths	Death rate*	No. of deaths	Death rate*														
Los Angeles County	1,157	24	1,168	24	1,063	21	1,127	22	1,071	21	1,166	23	1,109	21	1,143	21	trends should	1,170	21.1	1,138	20.5
Females																	e, trer				
White	613	27	631	28	557	25	571	25	560	24	593	26	532	24	552	24	refor on.	594	26.5	542	24.6
Latina	222	16	223	16	237	15	249	16	221	14	262	17	247	15	267	15	*, therefor caution.	268	14.3	288	15.9
Black	199	40	181	37	164	33	194	39	180	36	187	36	187	36	196	38	vith o	163	31.0	155	29.8
Asian [†]	120	16	132	17	101	13	112	14	108	13	120	15	137	15	123	13	included NHOPI*	142	14.7	147	14.9
SPA 1: Antelope Valley	30	23	51	36	40	26	39	26	38	24	34	22	42	26	53	30	inclu	52	28.7	45	24.1
SPA 2: San Fernando	241	23	261	24	264	24	249	22	240	21	235	20	251	21	240	20	sian	271	21.6	280	22.3
SPA 3: San Gabriel	209	22	204	21	192	20	202	21	187	19	233	23	230	22	213	20	12, A	228	20.9	211	19.4
SPA 4: Metro	130	23	117	21	104	19	120	21	108	19	92	16	86	15	115	20	9 201	105	17.6	96	15.9
SPA 5: West	97	26	99	25	85	22	84	21	98	23	96	23	83	20	83	21	efore	78	18.9	85	20.2
SPA 6: South	113	29	113	30	110	28	100	25	104	26	121	30	120	29	115	27	8	94	21.7	100	22.8
SPA 7: East	130	22	130	21	122	20	142	23	117	18	153	24	118	18	129	19		148	21.5	143	21.3
SPA 8: South Bay	201	26	192	25	143	18	185	23	176	22	202	25	178	21	194	23		194	22.3	177	20.4

*Age-adjusted rate per 100,000 females. The death rates for 2004-2009 were recalculated using new population estimates based on the 2010 Census, therefore, death rates in this report may differ from rates previously published. See Note on Page 5 for additional information.
**NHOPI= Native Hawaiian and other Pacific Islander.

+From 2004-2011, the number of deaths and death rates for Asians includes NHOPI. Starting 2012, Asian and NHOPI were separated into different race categories. Trends for Asians should be interpreted with caution.

AT A GLANCE **COPD** (Chronic Obstructive Pulmonary Disease)

12th cause of premature death **3rd** cause of death

COPD has moved up to the third-leading cause of death in 2013 while it has been the fourth-leading cause of death overall for each of the last 9 years. In 2013, the median age at death among black men was 75 years, and it was the fifth leading causes of death. The death rate for Latino men was 20 deaths per 100,000 population while the greatest rate was among black men at 48 deaths per 100,000 population. The lowest rates, 9 deaths and 13 deaths per 100,000 population, were among Asian women and Latinas, respectively.

In simple terms . . .

Chronic obstructive pulmonary disease (COPD) refers to conditions that interfere with the flow of air into and out of the lungs, making it difficult to breathe. Emphysema is the most common type of COPD and is a condition where the air sacs (alveoli) in the lungs have been destroyed because they cannot completely deflate. This makes them less able to take in oxygen from fresh air.

Risk factors

Tobacco smoking; exposure to lung irritants like breathing in the smoke of others (secondhand smoke), exposure to air pollution, chemical fumes, and dust; asthma

Community opportunities for prevention

- Restrict smoking in public places, worksites and multi-unit housing to decrease exposure to indoor and outdoor secondhand smoke
- Provide access to affordable smoking-cessation programs
- Reduce youth access to tobacco products through policies and their enforcement
- Increase the tobacco tax

Individual opportunities for prevention

- If you smoke, get help to quit: 1-800-NO-BUTTS
- If you don't smoke, don't start
- Avoid being near people who are smoking

_		LOS ANGELES COUNTY
	Deaths Death Rate	2,874 29.2 deaths per 100,000 population 83.5 deaths per 100,000 adults aged 45 years and over*
	Healthy People 2020 Objective RD-10	102.6 deaths per 100,000 adults aged 45 years and over
	ICD-9 codes (1979-1998)	492, 496
_	ICD-10 codes (1999-2013)	J40-J44 (2011-2013) J43-J44 (before 2011)
	References	www.lungusa.org National Heart, Lung, and Blood Institute www.nhlbi.nih.gov It's Quitting Time L.A. www.laquits.com "Adult Smoking on the Decline, but Disparities Remain" www.publichealth.lacounty.gov/ha/ reports/LAHealthBrief2011/Smoking/ Smoking2012_finalS.pdf
	Referrar	1-800-LUNG-USA1 California Smokers' Helpline 1-800-NO-BUTTS

NS ANICELES COLINITY

Figure T5. Trends in COPD mortality

	200	04	200	05	200)6	200	07	200	08	200	09	20	0		201	1		201	2	201	3
	No. of deaths	Death rate*		No. of deaths	Death rate*		No. of deaths	Death rate*	No. of deaths	Death rate*												
Los Angeles County	2,641	32	2,770	33	2,665	32	2,625	30	2,889	32	2,904	32	2,622	30	013.	2,874	30		2,646	26.8	2,874	29.2
Male	1,278	39	1,348	40	1,275	38	1,286	37	1,398	39	1,420	39	1,246	35	11-2(1,342	35		1,266	31.4	1,406	35.1
Female	1,363	28	1,422	28	1,390	28	1,339	26	1,491	28	1,484	27	1,376	26	comparable to 2011-2013.	1,532	27	caution.	1,380	23.6	1,468	25.0
White	1,835	42	1,840	42	1,771	41	1,801	41	1,955	43	1,895	41	1,743	40	para	1,843	40	with o	1,709	37.0	1,866	41.2
Latino/a	305	18	344	19	346	18	299	15	343	16	392	19	345	17		383	17	eted	368	14.7	400	16.0
Black	297	39	331	43	329	43	265	34	318	39	337	41	289	35	not be	349	41	terpr	304	33.9	329	36.3
Asian [†] Males	192	18	238	21	213	18	247	19	258	19	267	19	229	16	2004-2010 may n	287	18	should be interpreted with	241	14.0	260	14.7
White	830	46	823	46	793	45	823	46	894	48	887	47	762	42	004-	799	42	trends s	763	38.9	864	45.3
Latino	162	25	177	25	167	23	155	20	175	21	194	24	172	21	th, 2	186	20		176	18.1	200	20.3
Black	154	53	184	61	170	58	144	48	157	50	176	57	161	50	of death,	181	54	efore	163	46.8	169	47.7
Asian [†]	125	28	154	32	141	28	155	30	162	29	158	28	138	24	cause	167	27	included NHOPI**, therefore,	152	22.2	158	22.4
Females White	1,005	38	1,017	38	978	38	978	38	1,061	40	1,008	37	981	38	s for this	1,044	39	ed NHC	946	35.6	1,002	38.0
Latina	143	30 14	167	15	179	15	144	12	168	13	1,008	15	173	14	code	1,044	14	lolud	192	12.5	200	13.1
Black	143	32	147	31	159	34	121	25	161	32	161	31	128	26	0-10	168	32	Asian ir	141	26.0	160	28.9
Asian [†]	67	11	84	13	72	10	92	12	96	12	109	13	91	10	to the ICD-10 codes for	120	12	2012,	89	8.4	102	9.4
SPA 1: Antelope Valley	120	58	159	74	150	67	148	63	184	74	202	78	172	70	changes	204	76	Before	176	61.9	170	58.9
SPA 2: San Fernando	513	29	563	31	578	32	562	30	527	27	572	28	539	27	f chai	596	28	В	563	25.0	592	26.7
SPA 3: San Gabriel	515	32	537	33	536	33	504	29	614	35	631	36	534	30	se of	625	33		542	27.1	601	30.2
SPA 4: Metro	234	24	270	27	247	25	236	23	260	24	251	23	189	19	Because	206	20		235	21.0	248	21.9
SPA 5: West	166	23	158	22	139	19	140	19	195	25	182	23	146	19	_	180	21		156	18.4	154	18.4
SPA 6: South	205	34	219	35	197	31	185	29	214	33	216	33	202	33		217	33		206	29.5	224	32.0
SPA 7: East	372	36	316	30	330	31	366	33	381	34	359	32	339	32		325	28		309	25.6	351	29.9
SPA 8: South Bay	497	39	542	42	479	37	475	35	501	36	488	34	496	36		521	35		458	30.1	532	34.4

*Age-adjusted rate per 100,000. The death rates for 2004-2009 were recalculated using new population estimates based on the 2010 Census, therefore, death rates in this report may differ from rates previously published. See Note on Page 5 for additional information. **NHOPI= Native Hawaiian and other Pacific Islander. +From 2004-2011, the number of deaths and death rates for Asians includes NHOPI. Starting 2012, Asian and NHOPI were separated into different race categories. Trends for Asians should be interpreted

with caution.

Colorectal Cancer

11th cause of premature death**8th** cause of death

COLORECTAL CANCER has been the eighth-leading cause of death overall since 2005. In 2013, the overall median age at death from colorectal cancer was 71 years while it was 67 years for black women. It was the fifth-leading cause of premature death for Asian women. Since 2004, the colorectal death rate among blacks decreased 31%, from 29 deaths to 20 deaths per 100,000 population. The colorectal cancer death rates were consistently lower for Asian women and Latinas than for other race/ethnic groups.

In simple terms . . .

Cancer is a term for diseases in which cells in your body grow out of control. Cancer cells can invade nearby tissue and spread to other parts of the body through the blood and lymph systems. Colorectal cancer starts in the cells of the colon or rectum.

Risk factors

Age, family history of colorectal cancer or colorectal polyps, inflammatory bowel disease (e.g., ulcerative colitis or Crohn's disease), inherited genetic syndromes related to colorectal cancer, (e.g., familial adenomatous polyposis [FAP] or hereditary non-polyposis colorectal cancer [Lynch syndrome]), excessive alcohol consumption, tobacco use, being overweight, lack of physical activity

Community opportunities for prevention

- Promote the availability of colorectal cancer screening and follow-up
- Provide education on the importance of receiving colorectal cancer screening on-schedule
- Promote physical activity by providing access to safe places like parks and schools to walk, play, and exercise

Individual opportunities for prevention

- Follow recommended guidelines for colorectal cancer screening* that can detect colon cancer early, and remove precancerous colorectal polyps and early cancer growths
- Know your family history of colorectal cancer
- Limit alcohol consumption
- Maintain a healthy weight
- Eat a healthy diet that is rich in fruits, vegetables, and whole grains
- Make time to be physically active every day with your children, partner, pet, friends, or on your own

LOS ANGELES COUNTY

Deaths Death Rate	1,376 13.8 deaths per 100,000 population
Healthy People 2020 Objective C-5	14.5 deaths per 100,000 population
ICD-9 codes (1979-1998)	153-154
ICD-10 codes (1999-2013)	C18-C21, C26.0 (2011-2013) C18-C21 (before 2011)
References	American Cancer Society www.cancer.org
	National Cancer Institute www.cancer.gov
	National Cancer Institute, Surveillance, Epidemiology and End Results (SEER) Program www.seer.cancer.gov/registries/los_ angeles.html
	Guide to Community Preventive Services www.thecommunityguide.org
Referral	American Cancer Society Helpline 1-800-227-2345

Figure T6. Trends in colorectal cancer mortality

	200	04	200	05	200)6	200	07	200	08	200)9	201	0		201	1		201	2	201	13
	No. of deaths	Death rate*		No. of deaths	Death rate*		No. of deaths	Death rate*	No. of deaths	Death rate*												
Los Angeles County	1,414	17	1,409	17	1,362	16	1,323	15	1,365	15	1,388	15	1,285	14	2011-2013.	1,400	14		1,397	13.9	1,376	13.8
Male	674	19	708	20	686	19	686	18	703	18	710	18	663	17	2011-	715	17		737	16.8	709	16.3
Female	740	15	701	14	676	14	637	13	662	13	678	13	622	12	comparable to	685	13	caution.	660	11.6	667	11.8
White	767	18	737	17	689	16	689	16	660	15	696	16	619	15	mpa	613	14	with o	606	14.0	632	15.0
Latino/a	230	12	270	12	275	12	264	11	306	12	286	11	296	11	be co	359	13		345	11.2	347	11.5
Black	237	29	213	26	223	28	181	22	196	23	209	25	195	23	not be	194	22	be interpreted	221	24.0	181	19.7
Asian [†] Males	177	15	184	15	171	13	184	14	197	14	195	14	173	11	2004-2010 may	228	14	should be in	216	12.5	204	11.6
White	358	20	365	20	350	20	352	19	325	17	345	18	317	17	, 200	312	16	trends :	313	16.2	306	16.2
Latino	116	15	154	17	134	15	146	15	167	15	169	17	157	14	death,	192	16	e, tre	191	14.3	194	14.8
Black	111	34	102	30	110	34	88	27	96	28	95	27	97	28	ď	94	27	refore	114	30.6	88	23.4
Asian [†]	87	17	82	15	89	16	98	17	111	18	101	16	91	14	for this cause	113	16	2012, Asian included NHOPI**, therefore,	116	15.9	114	15.1
Females White	409	16	372	15	339	14	337	14	335	13	351	14	302	13	codes for	301	13	led NH0	293	12.0	326	13.7
Latina	114	10	116	9	141	10	118	9	139	10	117	8	139	9	10 co	167	11	ncluc	154	9.0	153	9.1
Black	126	26	111	23	113	23	93	19	100	20	114	23	98	20	the ICD-10	100	19	sian i	107	19.6	93	17.3
Asian [†]	90	13	102	15	82	11	86	11	86	11	94	11	82	9	요	115	12		100	10.0	90	9.1
SPA 1: Antelope Valley	59	26	56	24	30	13	35	14	36	14	52	19	49	17	of changes	39	12	Before	52	16.0	52	16.8
SPA 2: San Fernando	322	18	327	18	306	16	306	16	301	15	294	14	281	14	of cl	312	14	8	288	12.6	308	13.6
SPA 3: San Gabriel	248	15	286	17	267	16	239	14	251	14	263	15	250	14	Because	267	14		268	13.5	307	15.5
SPA 4: Metro	146	15	148	15	151	15	149	14	154	15	149	14	133	13	Bec	152	14		173	15.8	142	12.9
SPA 5: West	89	13	103	14	89	13	108	15	98	13	102	13	92	12		99	13		83	10.1	75	9.4
SPA 6: South	149	24	134	21	143	22	112	17	128	19	140	21	117	17		119	17		135	18.5	116	16.0
SPA 7: East	159	15	148	14	161	15	160	14	163	15	152	13	149	13		176	15		186	15.3	168	14.2
SPA 8: South Bay	230	18	204	15	213	16	208	15	229	16	235	16	213	15		235	16		211	13.4	208	13.1

*Age-adjusted rate per 100,000. The death rates for 2004-2009 were recalculated using new population estimates based on the 2010 Census, therefore, death rates in this report may differ from rates previously published. See Note on Page 5 for additional information. **NHOPI= Native Hawaiian and other Pacific Islander.

+From 2004-2011, the number of deaths and death rates for Asians includes NHOPI. Starting 2012, Asian and NHOPI were separated into different race categories. Trends for Asians should be interpreted with caution.

Coronary Heart Disease

CORONARY HEART DISEASE has been the leading cause of death and premature death among all race/ethnic groups every year for the past 10 years. In 2013, the overall coronary heart disease death rate has increased by 2%. It was the leading cause of death among black women aged 25 to 44 years (12 deaths per 100,000 population). The highest coronary heart disease death rate was among black men (222 deaths per 100,000 population), while the lowest rate was among Asian men (105 deaths per 100,000 population).

In simple terms . . .

Coronary heart disease is a condition where cholesterol plaque builds up in the arteries that supply blood to the heart (called coronary arteries). This plaque can build up and cause arteries to narrow over time.

Artery narrowing can cause chest pain or discomfort (angina) when the heart muscle does not get enough blood, or can result in a heart attack, which occurs when plaque completely blocks an artery carrying blood to the heart. This can happen when plaque deposits break off and clog a coronary artery.

Risk factors

Age (over 45 years for men and over 55 years for women), family history of early heart disease, previous heart attack or angina, tobacco use, high cholesterol, high blood pressure, excessive alcohol consumption, diabetes, being overweight, lack of physical activity

Community opportunities for prevention

- Promote physical activity by providing access to safe places like parks and schools to walk, play, and exercise
- Restrict smoking in public places and worksites

- Provide access to affordable smoking-cessation programs
- Provide greater access to community screening for undiagnosed hypertension and management of this risk factor through programs that use community health workers or community pharmacists

Individual opportunities for prevention

- Know your family history of heart disease
- If you smoke, get help to quit: 1-800-NO-BUTTS
- Work with your health care provider to maintain good control of diabetes, cholesterol, and blood pressure
- Maintain a healthy weight
- Eat a healthy diet that is rich in fruits, vegetables, whole grains, nuts, fiber, and omega-3
- Make time to be physically active every day with your children, partner, pet, friends, or on your own

1st cause of premature death**1st** cause of death

LOS ANGELES COUNTY

Deaths 11,827 Death Rate 116.7 deaths per 100,000 population

Healthy People 2020 103.4 deaths per 100,000 population Objective HDS-2

ICD-9 codes 402, 410-414, 429.2

ICD-10 codes (1999-2013) I20-I25 (2011-2013) I11, I20-I25 (before 2011)

References American Heart Association www.americanheart.org

Centers for Disease Control and Prevention www.cdc.gov/heartdisease

The Million Hearts Initiative www.millionhearts.hhs.gov

Referral Los Angeles County Division of the American Heart Association 213-291-7000

No. of death Death eath No. of death Death rate No. of rate Death rate No. of rat No. of rate No. of rate
Male 7,662 226 7,613 220 7,541 216 7,082 195 7,001 185 6,638 171 6,651 175 5,675 96 195 5,345 87.1 87.1 87.1 87.1 87.1 87.1 87.1 87.1 87.1 87.1 87.1 87.1 87.1 87.1 87.
Female 7,634 149 7,541 145 7,301 139 6,808 125 6,427 114 6,087 106 5,984 108 98 5,766 96 96 97 6,345 87.1 5,391 88 White 9,336 2,026 143 2,766 143 2,676 143 2,676 133 2,475 114 2,526 113 2,426 166 6,845 151 6,845 151 6,845 151 6,845 151 6,845 151 6,845 151 1,83 132.1 6,188 132.1 6,188 132.1 6,188 132.1 6,188 132.1 6,188 132.1 6,181 141 141 1,930 1,930 29 1,930 1,931 1,837 1,91 1,721 208 1,51 1,53 1,331 1,51 1,9 1,331 1,337 1,33 1,357 1,41 1,721 208 1,51 1,53 1,33 1,36 1,371 1,9 1,331 1,331 1,331 1,331 1,331 <t< th=""></t<>
Female 7,634 149 7,541 145 7,301 139 6,808 125 6,427 114 6,087 106 5,984 108 98 5,766 96 96 97 6,345 87.1 5,391 88 White 9,336 2,026 143 2,766 143 2,676 143 2,676 133 2,475 114 2,526 113 2,426 166 6,845 151 6,845 151 6,845 151 6,845 151 6,845 151 6,845 151 1,83 132.1 6,188 132.1 6,188 132.1 6,188 132.1 6,188 132.1 6,188 132.1 6,181 141 141 1,930 1,930 29 1,930 1,931 1,837 1,91 1,721 208 1,51 1,53 1,331 1,51 1,9 1,331 1,337 1,33 1,357 1,41 1,721 208 1,51 1,53 1,33 1,36 1,371 1,9 1,331 1,331 1,331 1,331 1,331 <t< th=""></t<>
Latino/a 2,626 143 2,766 143 2,675 133 2,475 114 2,536 113 2,428 105 2,555 111 8 2,404 96 6 2,383 88.1 2,616 92 Black 2,085 269 2,045 260 2,053 263 1,936 239 1,804 218 1,878 221 1,721 208 96 1,571 179 1,583 17.38 1,619 177 Males Males 4,505 248 4,362 240 4,299 239 4,030 219 3,905 205 3,598 186 3,566 192 3,342 171 1,91 3,411 171.9 3,360 172 Males 4,505 248 4,362 240 4,299 239 4,030 219 3,905 205 3,598 186 3,566 192 3,342 171 1,31 1,411 171.9 3,342 171 1,321 1,414 171.9 3,345 23.7 83 23.7 83
Latinola 2,626 143 2,766 143 2,675 133 2,475 114 2,536 113 2,428 105 2,555 111 9 2,404 96 9 2,383 88.1 2,516 92 Black 2,085 269 2,045 260 2,053 263 1,936 239 1,804 218 1,878 221 1,721 208 96 1,571 179 1,583 17.38 1,318 1,619 177 Males White 4,505 248 4,362 240 4,299 239 4,030 219 3,905 205 3,598 186 3,566 192 3,342 171 1,91 3,411 171.9 3,360 172 Black 1,012 300 1,044 332 1,053 343 950 293 940 285 957 279 888 273 817 228 833 23.7 833 23.7 833 23.7 833 23.7 833 23.7 833 23.7 833
Males White 4,505 248 4,362 240 4,299 239 4,030 219 3,905 205 3,598 186 3,566 192 3,342 171 3,411 171.9 3,360 172 Latino 1,415 184 1,465 180 1,414 167 1,319 142 1,349 141 1,333 135 1,372 138 1,323 124 1,271 109.7 1,418 121 Black 1,012 330 1,044 332 1,053 343 950 293 940 285 957 279 898 273 817 228 863 233.7 836 221 Females K K 141 167 1,319 142 761 136 770 132 778 19 776 128 817 228 863 233.7 836 221 Females K K 142 761 136 770 132 3382 111 3,279 166 90 707
Males White 4,505 248 4,362 240 4,299 239 4,030 219 3,905 205 3,598 186 3,566 192 3,342 171 3,411 171.9 3,360 172 Latino 1,415 184 1,465 180 1,414 167 1,319 142 1,349 141 1,333 135 1,372 138 1,323 124 1,271 109.7 1,418 121 Black 1,012 330 1,044 332 1,053 343 950 293 940 285 957 279 898 273 817 228 863 233.7 836 221 Females K K 141 167 1,319 142 761 136 770 132 778 19 776 128 817 228 863 233.7 836 221 Females K K 142 761 136 770 132 3382 111 3,279 166 90 707
White 4,303 248 4,322 240 4,239 239 4,030 219 3,303 203 3,380 100 192 12 3,342 171 14 171 9 3,300 172 Latino 1,415 184 1,465 180 1,414 167 1,319 142 1,349 141 1,333 135 1,372 138 1 1,213 124 12 1,271 109.7 1,418 121 Black 1,012 330 1,044 332 1,053 343 950 293 940 285 957 279 898 273 817 228 863 233.7 836 221 Asian [†] 696 143 717 141 748 142 761 136 770 132 718 119 776 128 174 417 417 417 418 417 418 417 418 418 419 418 419 418 418 419 418 418 419 418
Latino 1,415 184 1,465 180 1,414 167 1,319 142 1,349 141 1,333 135 1,372 138 9 1,323 124 9 9 1,323 124 9 1,323 124 9 1,319 142 1,319 141 1,333 135 1,372 138 9 1,323 124 9 1,323 124 9 1,319 142 1,319 141 1,333 135 1,372 138 9 1,323 124 9 817 228 9 863 233.7 836 221 Asian [†] 696 143 717 141 748 142 761 136 770 132 718 119 776 128 97 706 106 4 4 707 98.1 765 104 Females White 4,731 162 4,591 157 4,354 151 3,964 136 3,691 123 3,382 111 3,279 116 90 91
Black 1,012 330 1,044 332 1,053 343 950 293 940 285 957 279 898 273 5 817 228 5 633 233.7 836 221 Asian ¹ 696 143 717 141 748 142 761 136 770 132 718 119 776 128 706 106 14 707 98.1 765 104 Females
Females White 4,731 162 4,591 157 4,354 151 3,964 136 3,691 123 3,382 111 3,279 116 90 91 90 92 1,183 90 92 1,081 75 2,887 97.6 2,828 98 Black 1,073 224 1,001 207 1,000 206 986 199 864 171 921 178 823 163 99 754 141 18 720 129.8 783 141
White 4,731 162 4,591 157 4,354 151 3,964 136 3,691 123 3,382 111 3,279 116 16 97 2,887 97.6 2,828 98 Latina 1,211 114 1,301 116 1,261 108 1,156 92 1,187 91 1,095 82 1,183 90 9 1,081 75 1,112 71.4 1,098 70 Black 1,073 224 1,001 207 1,000 206 986 199 864 171 921 178 823 163 9 720 129.8 783 141
Latina 1,211 114 1,301 116 1,261 108 1,156 92 1,187 91 1,095 82 1,183 90 92 1,081 75 92 1,112 71.4 1,098 700 Black 1,073 224 1,001 207 1,000 206 986 199 864 171 921 178 823 163 90 754 141 100 129.8 783 141 Mark 1,001 207 1,000 206 986 199 864 171 921 178 823 163 90 754 141 100 129.8 783 141 Mark 1,001 207 1,000 206 986 199 864 171 921 178 823 163 90 754 141 100 129.8 783 141 Mark 1,001 207 1,000 206 986 199 178 823 163 90 754 141 100 149.8
Black 1,073 224 1,001 207 1,000 206 986 199 864 171 921 178 823 163 😳 754 141 👼 720 129.8 783 141
Asian'i 596 03 627 03 661 04 601 00 667 81 669 70 675 77 - 600 70 - 504 563 633 59
SPA 1: Antelope Valley 488 232 467 214 463 205 468 192 459 176 476 180 499 188 56 404 142 423 142.4 453 148 SPA 2: San Fernando 3,419 189 3,377 184 3,262 176 3,071 159 3,081 152 2,828 135 2,852 137 56 2,657 113.3 2,717 118
SPA 3: San Gabriel 2,704 165 2,781 167 2,666 159 2,541 145 2,486 137 2,304 126 2,270 124 29 2,219 112 2,168 106.7 2,193 106 SPA 4: Metro 1,662 166 1,724 169 1,673 163 1,478 140 1,469 135 1,414 130 1,495 148 20 1,350 125 1,333 117.5 1,323 116
SPA 5: West 1,036 138 980 129 1,004 135 912 120 882 111 854 104 817 98 823 94 822 94.1 764 87 SPA 6: South 1,442 204 1,404 202 1,402 204 1,205 100 1,202 102 1,204 107 1,204 1,204 1,204 1,404 1
SPA 6: South 1,443 234 1,404 223 1,422 224 1,295 199 1,222 183 1,271 187 1,112 173 1,063 155 1,031 142.1 1,061 147 SPA 7: East 1,847 175 1,854 169 1,660 147 1,588 139 1,463 134 1,401 119 1,345 109.1 1,373 113
SPA 7. East 1,647 175 1,654 173 1,656 169 1,660 147 1,566 159 1,466 126 1,465 154 1,465 154 1,461 119 1,545 169 1,545 169 1,575 113 SPA 8: South Bay 2,529 196 2,493 189 2,360 177 2,332 168 2,143 149 2,029 137 2,064 144 1,936 127 1,896 120.4 1,933 122

*Age-adjusted rate per 100,000. The death rates for 2004-2009 were recalculated using new population estimates based on the 2010 Census, therefore, death rates in this report may differ from rates previously published. See Note on Page 5 for additional information. **NHOPI= Native Hawaiian and other Pacific Islander.

+From 2004-2011, the number of deaths and death rates for Asians includes NHOPI. Starting 2012, Asian and NHOPI were separated into different race categories. Trends for Asians should be interpreted with caution.

at a glance **Diabetes**

Hea

DIABETES has been a leading cause of death and premature death for each of the past 10 years. In 2012-2013, it was the second-leading cause of death for AIANs, Latinos, and NHOPIs. Overall, it was the fourth-leading cause of death among age groups 45 to 64 years (20 deaths per 100,000 population) and 65 to 74 years (77 deaths per 100,000 population).

In simple terms . . .

Diabetes is a disease in which the body either does not produce, does not properly use, or is partially resistant to the effects of insulin.

Insulin is a hormone that moves sugar from the blood into the cells, where the sugar can be stored or converted into energy.

Uncontrolled diabetes leads to high levels of sugar in the blood, which can damage the eyes, kidneys, nerves, heart, and blood vessels, and reduce the body's ability to fight infections.

Risk factors

Being overweight, lack of physical activity, age, race/ethnicity, family history of diabetes, history of gestational diabetes

Community opportunities for prevention

- Educate the public about diabetes and pre-diabetes through community health education campaigns
- Promote community self-care management programs to prevent diabetes complications
- Promote physical activity by providing access to safe places like parks and schools to walk, play, and exercise

- Offer incentives for employers to provide, and employees to participate in, workplace wellness programs and lifestyle
- change programs such as the National Diabetes Prevention Program
- Improve access to nutritious foods, and make it easier for the public to find and choose healthier foods

Individual opportunities for prevention

- Follow recommended screening* and treatment guidelines
- Maintain a healthy weight
- Follow a low-calorie, low glycemic load** meal plan with a variety of vegetables, whole grains, fruits, non-fat dairy, beans, fish, poultry, and lean meats
- Make time to be physically active every day with your children, partner, pet, friends, or on your own
- Work with your health care provider to maintain good diabetes and blood pressure control, and manage cholesterol and depression
- If you smoke, get help to quit: 1-800-NO-BUTTS
- For new mothers, exclusive breastfeeding for at least 3 months can help promote weight loss and may reduce the risk of diabetes

LOS ANGELES COUNTY

Deaths Death Rate	2,172 21.9 deaths per 100,000 population
llthy People 2020 Objective D-3	Not comparable
ICD-9 codes (1979-1998)	250
ICD-10 codes (1999-2013)	Е10-Е14
References	American Diabetes Association www.diabetes.org National Diabetes Prevention Program www.cdc.gov/diabetes/prevention/ index.html "Carbohydrates and Blood Sugar" www.hsph.harvard.edu/nutrition- source/carbohydrates/carbohydrates- and-blood-sugar/ "Trends in Diabetes: Time for Action" www.publichealth.lacounty.gov/ha/ reports/LAHealthBrief2011/Diabe- tes/Diabetes_2012_FinalS.pdf
Referral	American Diabetes Association Information Line 1-800-DIABETES

*Available at www.uspreventiveservicestaskforce.org/uspstf/uspsdiab.htm.

**The lower a food's glycemic load, the less it affects blood sugar and insulin levels.

Figure T8. Trends in diabetes mortality

	200)4	200)5	200	06	200	07	200)8	200)9	20	10	201	11		201	2	201	13
	No. of deaths	Death rate*		No. of deaths	Death rate*	No. of deaths	Death rate*														
Los Angeles County	2,201	26	2,305	27	2,188	26	2,127	24	2,190	24	1,964	21	1,894	21	2,196	23		2,204	22.4	2,172	21.9
Male	1,063	30	1,140	32	1,099	30	1,040	28	1,084	28	1,024	26	993	26	1,170	28		1,151	26.8	1,126	26.4
Female	1,138	24	1,165	24	1,089	22	1,087	21	1,106	21	940	18	901	17	1,026	19	caution.	1,053	18.7	1,046	18.4
White	863	20	897	21	806	19	751	17	801	18	672	15	667	16	783	18	with c	736	16.9	675	15.5
Latino/a	741	37	773	37	774	36	754	32	764	32	694	28	690	29	799	30	eted v	824	28.8	860	29.9
Black	339	42	389	49	367	46	357	44	359	43	340	40	294	35	316	36	erpre	345	38.9	286	31.5
Asian [†]	251	22	236	19	230	18	257	20	257	18	248	18	237	16	278	17	should be interpreted	273	16.2	318	18.3
Males																	s sho				
White	446	25	455	25	412	23	385	21	429	23	364	19	365	20	453	24	trends	402	20.8	374	19.7
Latino	347	41	390	43	371	40	378	37	371	36	361	35	356	34	430	36	re, tr	443	34.7	437	35.4
Black	158	49	181	56	178	55	147	45	157	46	161	46	144	43	150	43	erefo	168	45.9	150	40.1
Asian [†]	109	22	109	20	132	24	127	23	126	21	131	22	124	20	129	19	included NHOPI**, therefore,	122	17.5	154	21.3
Females																	NHC				
White	417	17	442	18	394	16	366	14	372	15	308	12	302	13	330	13	ndec	334	13.5	301	11.9
Latina	394	34	383	32	403	32	376	29	393	29	333	24	334	24	369	24	n inc	381	23.9	423	25.9
Black	181	38	208	44	189	39	210	43	202	41	179	35	150	30	166	32	Asian	177	33.2	136	25.1
Asian [†]	142	22	127	18	98	14	130	17	131	16	117	14	113	13	149	16	2012,	151	15.1	164	16.0
SPA 1: Antelope Valley	73	35	78	32	106	43	81	31	106	39	113	40	85	31	109	37	Before	102	33.4	103	32.0
SPA 2: San Fernando	396	22	411	22	377	20	349	18	408	20	337	16	343	17	391	18	В	390	17.3	392	17.7
SPA 3: San Gabriel	423	26	438	27	389	23	387	23	405	23	375	21	330	19	400	21		475	24.3	449	22.8
SPA 4: Metro	257	26	277	28	245	24	281	28	241	23	212	20	230	23	276	26		273	25.0	256	23.5
SPA 5: West	115	16	103	14	91	13	95	13	100	13	75	10	90	12	83	10		88	11.1	63	7.5
SPA 6: South	258	41	294	46	256	39	275	42	262	39	247	36	218	33	245	35		265	36.3	279	37.6
SPA 7: East	356	34	381	36	366	34	310	28	352	31	323	29	302	28	350	30		304	25.4	312	25.7
SPA 8: South Bay	310	23	320	24	343	25	339	24	309	21	282	19	293	21	336	22		307	19.9	317	20.1

*Age-adjusted rate per 100,000. The death rates for 2004-2009 were recalculated using new population estimates based on the 2010 Census, therefore, death rates in this report may differ from rates previously published. See Note on Page 5 for additional information. **NHOPI= Native Hawaiian and other Pacific Islander.

+From 2004-2011, the number of deaths and death rates for Asians includes NHOPI. Starting 2012, Asian and NHOPI were separated into different race categories. Trends for Asians should be interpreted with caution.

UNINTENTIONAL DRUG OVERDOSE has been one of the leading causes of premature death for each of the past 10 years. The majority of drug overdose deaths were among men, and in 2013, the highest drug overdose death rate was among white men (17 deaths per 100,000 population) with 8,388 YPLL. Drug overdose was the leading cause of death for 25-44 year old white women and men.

In simple terms . . .

In this report, drug overdose refers to any death from an unintentional overdose of illegal drugs, prescription or over-thecounter (OTC) medications, or alcohol.

Unintentional drug overdose does not include any drug, medicine, or alcohol taken with homicidal or suicidal intent.

Risk factors

Easy access to alcohol and other drugs (AOD); having a parent/caregiver who abuses substances, suffers from mental illness, or engages in criminal behavior; lack of a significant relationship with a caring adult; gang involvement; selfmedication for psychological or physical conditions; drug dependence from prolonged use for chronic pain

Community opportunities for prevention

- Increase enforcement of laws/policies to reduce AOD availability and consumption (e.g., retailer education)
- Educate youth in school and community settings about AOD to raise awareness and develop refusal skills
- Promote access to mental health and substance abuse prevention and treatment services

- Promote community activities that encourage positive choices to reduce acceptance and change norms around AOD use
- Use social media and work with local experts to raise awareness and perception of harm of AOD use, including medication misuse
- Provide opportunities for prescription medication disposal
- Increase access to naloxone hydrochloride to reverse opioid overdose

Individual opportunities for prevention

- Keep track of prescription and OTC medications at home, don't share medications, and dispose of all unused/ expired medications properly
- Increase youth strengths and assets to support the ability to refuse the use of AOD and engage in prosocial activities
- Seek help for AOD abuse from a health care provider, or call the Substance Abuse Prevention and Control Helpline: 1-800-564-6600

LOS ANGELES COUNTY

Deaths Death Rate	749 7.2 deaths per 100,000 population
Healthy People 2020 Objective SA-12	Not comparable
ICD-9 codes (1979-1998)	E850-E858, E860
ICD-10 codes (1999-2013)	X40-X45
References	Opioid Overdose Toolkit store.samhsa.gov/product/Opioid- Overdose-Prevention-Toolkit- Updated-2016/SMA16-4742
	Prevention of Drug Use in Children and Adolescents www.drugabuse.gov/publications/ preventing-drug-abuse-among- children-adolescents/introduction
	Addressing Prescription Drug Abuse in the United States www.cdc.gov/drugoverdose/pdf/ hhs_prescription_drug_abuse_ report_09.2013.pdf
Referral	Los Angeles County Department of Public Health, Substance Abuse Prevention and Control Helpline 1-800-564-6600
	Sheriff's Department Safe

Drug Drop-off Program

shq.lasdnews.net/content/uoa/SHB/ SafeDrugDropOff.pdf

Figure T9. Trends in drug overdose mortality

	200	04	200	5	200	06	200	07	200)8	200	09	201	10	20	11		201	2	201	13
	No. of deaths	Death rate*	No. of deaths	Death rate*	No. of deaths	Death rate*	No. of deaths	Death rate*	No. of deaths	Death rate*	No. of deaths	Death rate*	No. of deaths	Death rate*	No. of deaths	Death rate*		No. of deaths	Death rate*‡	No. of deaths	Death rate* [‡]
Los Angeles County	556	6	528	5	557	6	691	7	625	6	685	7	611	6	580	6		609	5.9	749	7.2
Male	388	8	377	8	372	8	501	10	431	9	471	10	435	9	407	8		428	8.4	524	10.2
Female	168	3	151	3	185	4	190	4	194	4	214	4	176	3	173	3	caution.	181	3.5	225	4.3
White	308	9	266	8	288	9	351	11	326	10	356	11	314	10	324	10	with o	323	10.6	407	12.8
Latino/a	155	4	137	4	172	4	232	6	195	5	219	5	194	4	167	4	eted	184	4.1	224	4.8
Black	80	9	113	12	81	9	92	10	87	9	93	10	90	10	71	8	terpr	77	8.0	86	9.1
Asian [†] Males	6	-	5	-	10		13		13		13		9		15		should be interpreted with caution.	17	1.2	24	1.6
White	204	12	180	11	181	11	229	14	204	13	229	14	209	13	216	14	spue	217	13.8	279	17.3
Latino	128	6	114	6	134	7	200	10	164	8	181	9	163	8	133	6	e, tre	150	6.8	174	7.7
Black	47	11	73	18	46	11	61	14	53	13	53	13	56	13	45	10	refor	42	9.3	50	11.1
Asian [†]	<5		5		6		9		7		6		<5		12		2012, Asian included NHOPI**, therefore, trends	13	2.0	17	2.4
Females																	μ				
White	104	6	86	5	107	6	122	7	122	7	127	8	105	7	108	7	nded	106	7.2	128	8.1
Latina	27	1	23	1	38	2	32	2	31	2	38	2	31	1	34	1	n ind	34	1.6	50	2.1
Black	33	7	40	8	35	7	31	6	34	7	40	8	34	7	26	5	Asiaı	35	7.1	36	7.6
Asian ^t	<5		<5		<5		<5		6		7		6		<5		e 2012,	<5		7	0.9
SPA 1: Antelope Valley	31	10	19		31	9	33	9	24	7	27	8	38	10	32	8	Before	35	8.8	47	12.2
SPA 2: San Fernando	101	5	114	5	104	5	113	5	133	6	146	7	122	5	146	6	"	133	5.8	170	7.3
SPA 3: San Gabriel	65	4	64	4	75	4	89	5	70	4	91	5	70	4	69	4		87	4.8	82	4.5
SPA 4: Metro	84	7	67	6	73	6	97	8	91	8	89	8	89	7	80	7		98	8.1	108	8.8
SPA 5: West	41	6	29	4	33	5	47	7	46	6	41	6	42	6	33	5		44	6.2	60	8.6
SPA 6: South	45	5	68	8	49	6	70	9	63	8	69	9	57	6	52	6		52	5.6	82	8.7
SPA 7: East	60	5	51	4	75	6	77	6	62	5	70	6	56	5	42	3		63	5.0	65	5.1
SPA 8: South Bay	90	6	79	5	81	5	105	7	110	7	108	7	102	6	121	8		96	5.9	129	8.0

*Age-adjusted rate per 100,000. The death rates for 2004-2009 were recalculated using new population estimates based on the 2010 Census, therefore, death rates in this report may differ from rates previously published. See Note on Page 5 for additional information.

**NHOPI= Native Hawaiian and other Pacific Islander.

+From 2004-2011, the number of deaths and death rates for Asians includes NHOPI. Starting 2012, Asian and NHOPI were separated into different race categories. Trends for Asians should be interpreted with caution.

+From 2004-2011, rates based on deaths < 20 are suppressed with (--). Starting 2012, rates based on 5-19 deaths are presented, which are considered unreliable and should be interpreted with caution.

Homicide

HOMICIDE has been the second-leading cause of premature death every year for the past 10 years. In 2013, it was the leading cause of death for 15-24 year olds (12 deaths per 100,000 population), and it was the leading cause of

premature death in the South SPA. The median age at death from homicide in 2013 was 30 years, and the death rate for men was 10 times higher than the rate for women, highlighting the dramatic impact of homicide on premature death.

In simple terms . . .

Homicide is the killing of one person by another, including acts of terrorism. The majority of homicides do not involve selfdefense. Homicide may be committed with a weapon such as a gun or knife, or may result from means including strangulation, drowning, poisoning, burning, pushing the victim from a high place, neglect, abandonment, or abuse. Deaths from injuries caused by law enforcement officers or military in the line of duty[†] are not included in this category.

Risk factors

Witnessing and experiencing violence and child abuse, intimate partner violence, poor access to quality education, lack of employment opportunities, social isolation, lack of prosocial opportunities for youth, gang affiliation, alcohol and substance abuse, access to firearms

Community opportunities for prevention

- Provide educational and recreational opportunities for children and adolescents such as after-school and summer programs
- Support nurse home-visitation programs for teenage parents

- Participate in community-based youth violence prevention approaches such as Striving To Reduce Youth Violence Everywhere (STRYVE) and Urban Networks to Increase Thriving Youth (UNITY) (see References for links)
- Develop policies that reduce access to firearms and promote their safe storage
- Support community policing and gang intervention
- Build communities that discourage street violence with well-lit streets and promote increased biking and walking

Individual opportunities for prevention

- Build healthy relationships and develop conflict resolution skills to handle tough social situations and resolve problems without using violence
- Participate in mentoring programs that pair positive role models with young people
- Seek help for drug or alcohol abuse
- Unload and lock firearms in the home with the ammunition stored and locked separately

2nd cause of premature death **20th** cause of death

LOS ANGELES COUNTY

Deaths	584
Death Rate	5.7 deaths per 100,000 population

Healthy People 2020 5.5 deaths per 100,000 population Objective IVP-29

> ICD-9 codes E960-E969 (1979-1998)

> > (1999-2013)

ICD-10 codes *U01-*U02, X85-Y09, Y87.1

References VETO Violence-STRYVE

http://vetoviolence.cdc.gov

Prevention Institute UNITY http://preventioninstitute.org/unity

CDC National Center for Injury Prevention and Control www.cdc.gov/ncipc/dvp/dvp.htm

Violence Prevention Coalition of Greater Los Angeles www.vpcgla.org

Referral TeenLine

www.teenlineonline.org 1-800-TLC-TEEN

Los Angeles County Department of Public Health, Substance Abuse Prevention and Control Helpline 1-800-564-6600 Figure T10. Trends in homicide mortality

	200)4	200)5	200	06	200)7	200	08	200	09	201	10	20	11		201	2	201	13
	No. of deaths	Death rate*	No. of deaths	Death rate*	No. of deaths	Death rate*		No. of deaths	Death rate ^{*‡}	No. of deaths	Death rate*‡										
Los Angeles County	1,069	10	1,066	10	1,043	10	869	8	838	8	723	7	651	6	609	6		596	5.8	584	5.7
Male	940	18	940	18	916	18	751	15	710	14	618	12	545	10	512	10		515	10.0	51 2	9.9
Female	129	3	126	3	127	3	118	2	128	3	105	2	106	2	97	2	caution.	81	1.6	72	1.4
White	105	4	101	3	97	3	92	3	83	3	64	2	76	2	61	2	with	69	2.3	63	2.1
Latino/a	531	10	570	11	545	10	474	9	458	9	397	8	328	6	333	6	retec	305	5.8	279	5.4
Black	388	41	362	39	344	38	272	29	250	27	227	24	219	25	192	22	terp	199	23.2	223	26.0
Asian [†]	42	3	33	2	50	4	30	2	43	3	32	2	24	2	21	1	should be interpreted	19	1.3	14	1.0
Males		~		-		~		~			10	0		0		•				-	
White	77	5	69	5	76	5	71	5	62	4	43	3	51	3	45	3	tren	44	2.8	51	3.4
Latino	481	18	528	19	491	18	420	16	407	15	344	13	288	11	285	11	ore,	277	10.2	246	9.3
Black	348	80	320	74	298	69	240	55	214	49	207	46	186	45	168	41	Jeref	179	43.9	203	50.0
Asian ^T	33	5	23	3	46	7	20	3	24	4	23	3	18		13		included NHOPI**, therefore, trends	11	1.6	8	1.2
Females																	Ť				
White	28	2	32	2	21	1	21	1	21	1	21	1	25	2	16		ndeo	25	1.8	12	0.7
Latina	50	2	42	2	54	2	54	2	51	2	53	2	40	2	48	2	incl	28	1.2	33	1.4
Black	40	8	42	9	46	9	32	6	36	8	20	4	33	7	24	5	Asian	20	4.6	20	4.3
Asian [†]	9		10		<5		10		19		9		6		8		2012,	8	1.1	6	0.7
SPA 1: Antelope Valley	33	10	37	11	46	13	37	10	26	6	31	7	23	6	26	7	Before :	17	4.2	28	6.9
SPA 2: San Fernando	101	5	104	5	98	5	81	4	91	4	79	4	71	3	54	2	ă	74	3.4	47	2.1
SPA 3: San Gabriel	131	7	103	6	116	6	106	6	108	6	69	4	71	4	66	4		59	3.3	80	4.4
SPA 4: Metro	115	9	118	10	112	10	110	10	102	9	82	7	73	6	62	5		69	5.7	46	3.9
SPA 5: West	24	4	26	4	25	5	14		18	-	14		12		17			10	1.6	17	2.4
SPA 6: South	356	33	372	35	310	29	245	23	233	22	194	18	189	17	184	17		180	16.8	166	15.2
SPA 7: East	108	8	130	9	126	9	108	8	99	7	101	7	88	6	82	6		72	5.3	71	5.4
SPA 8: South Bay	177	11	161	10	179	12	145	9	140	9	144	9	120	8	117	8		113	7.2	127	8.1

*Age-adjusted rate per 100,000. The death rates for 2004-2009 were recalculated using new population estimates based on the 2010 Census, therefore, death rates in this report may differ from rates reviously published. See Note on Page 5 for additional information. **NHOPI= Native Hawaiian and other Pacific Islander.

+From 2004-2011, the number of deaths and death rates for Asians includes NHOPI. Starting 2012, Asian and NHOPI were separated into different race categories. Trends for Asians should be interpreted with caution.

+From 2004-2011, rates based on deaths < 20 are suppressed with (--). Starting 2012, rates based on 5-19 deaths are presented, which are considered unreliable and should be interpreted with caution.

HIV remained an important cause of death and premature death among some groups even though it has not been one of the overall leading causes of death or premature death in the county since 2004. In 2013, the HIV death rate for black men, 15 deaths per 100,000 population with 1,591 YPLL, was seven times higher than the overall county HIV death rate. The overall YPLL for men was 5,025 years.

In simple terms . . .

HIV (human immunodeficiency virus) affects the body's ability to fight infections and certain cancers by damaging the immune system. HIV is spread by sexual contact through blood or mucous membrane exposure to infected blood, semen, vaginal secretions, or rectal mucus; by sharing needles and/or syringes with someone who is infected, or, less commonly—and extremely rarely in the U.S.—through transfusions of infected blood, blood clotting factors, or organ/tissue donation. Babies born to HIV-infected women may become infected before or during birth, or through breastfeeding after birth. There is no scientific evidence that HIV can be transmitted in other ways.

Risk factors

Having unprotected sex and/or sharing drug needles and syringes with an HIVinfected person or a person whose HIV status is unknown

Community opportunities for prevention

• Educate the community about how HIV is transmitted and how to avoid getting infected

- Provide routine HIV screening as part of a regular medical visit
- Provide access to pre-exposure prophylaxis (PrEP) for high-risk persons
- Provide access to drug treatment programs and sexually transmitted disease testing and treatment
- Screen pregnant women for HIV infection and use drug therapies to reduce the transmission of HIV from mother to baby

Individual opportunities for prevention

- Use latex condoms consistently and correctly with HIV-infected sexual partners or those whose HIV status is unknown
- Do not share drug needles and syringes
- Learn your HIV status by getting tested for antibodies to HIV. Approximately 60,000 people are estimated to be living with HIV in Los Angeles County, 12% of whom are believed to be unaware of their infection
- If you test positive for HIV, seek medical care immediately since getting treatment can save your life and protect others

LOS ANGELES COUNTY

Deaths	223
Death Rate	2.2 deaths per 100,000 population

Healthy People 2020 3.3 deaths per 100,000 population Objective HIV-12

> ICD-9 codes (1979-1998) 042-044

ICD-10 codes (1999-2013) B20-B24

References National Institute of Allergy and Infectious Diseases https://www.niaid.nih.gov/diseasesconditions/hivaids

CDC HIV/AIDS Prevention www.cdc.gov/hiv

"Los Angeles County Five-Year Comprehensive HIV Plan" publichealth.lacounty.gov/dhsp/Reports/HIV/LAC-ComprehensiveHIV-Plan2013-2017.pdf

Referral California HIV/AIDS Service Referrals and Hotline 1-800-367-2437 (AIDS)

www.aidshotline.org

LAcondom.com for free condoms and information

Figure T11. Trends in HIV mortality

	200)4	200	5	200	06	200	07	200)8	200	09	201	0	201	11		201	2	201	3
	No. of deaths	Death rate*	No. of deaths	Death rate*	No. of deaths	Death rate*	No. of deaths	Death rate*	No. of deaths	Death rate*		No. of deaths	Death rate*‡	No. of deaths	Death rate*‡						
Los Angeles County	498	5	438	5	414	4	391	4	371	4	313	3	274	3	243	2		225	2.2	223	2.2
Male	436	9	378	8	355	7	338	7	310	6	256	5	232	5	199	4		196	3.9	197	4.0
Female	62	1	60	1	59	1	53	1	61	1	57	1	42	1	44	1	caution.	29	0.6	26	0.5
White	174	5	139	4	155	4	119	3	96	3	84	2	74	2	72	2	with o	72	2.0	56	1.8
Latino/a	177	5	158	4	139	4	132	3	137	4	108	3	114	3	84	2	eted	78	1.8	76	1.8
Black	136	15	131	14	108	12	125	14	113	12	109	12	80	9	77	9	terpr	65	7.2	79	8.4
Asian [†] Males	7		6		8		11		21	1	11		5	-	8		should be interpreted with	7	0.4	11	0.7
White	159	9	126	7	139	8	112	6	86	5	74	4	65	4	60	3	trends s	68	3.7	52	3.2
Latino	159	9	140	7	121	6	119	6	114	6	91	5	98	5	70	4	e, trei	69	3.2	69	3.4
Black	109	26	102	25	87	22	94	23	90	22	79	19	64	15	61	15	efore	51	12.0	65	14.9
Asian [†]	6		6		6		10		16		11		<5		7		Asian included NHOPI**, therefore,	7	1.0	11	1.6
Females																	OHN P				
White	15		13		16		7		10		10		9		12		Indec	<5		<5	
Latina	18		18		18		13		23	1	17		16		14		ninc	9	0.4	7	0.4
Black	27	5	29	6	21	4	31	6	23	5	30	6	16		16		Asia	14	3.0	14	2.9
Asian ^t	<5		<5		<5		<5		5		<5		<5		<5		e 2012,	<5		<5	
SPA 1: Antelope Valley	<5		9		6		11		5		10		10		6		Before	7	2.0	9	2.5
SPA 2: San Fernando	67	3	68	3	53	2	51	2	45	2	34	1	37	2	37	2		29	1.3	24	1.1
SPA 3: San Gabriel	49	3	30	2	47	3	30	2	30	2	32	2	30	2	24	1		26	1.4	27	1.5
SPA 4: Metro	133	11	129	11	132	11	112	10	93	8	81	7	71	6	71	6		48	4.1	56	4.8
SPA 5: West	23	3	14		17		10		11		11		7		7			7	1.0	<5	
SPA 6: South	106	13	76	9	57	7	76	9	85	10	63	8	41	5	34	4		38	4.1	40	4.4
SPA 7: East	35	3	35	3	31	3	28	2	27	2	23	2	34	3	20	2		24	1.9	16	1.3
SPA 8: South Bay	71	5	69	5	65	4	70	5	72	5	56	4	41	3	42	3		45	2.8	49	3.1

*Age-adjusted rate per 100,000. The death rates for 2004-2009 were recalculated using new population estimates based on the 2010 Census, therefore, death rates in this report may differ from rates reviously published. See Note on Page 5 for additional information. **NHOPI= Native Hawaiian and other Pacific Islander.

+From 2004-2011, the number of deaths and death rates for Asians includes NHOPI. Starting 2012, Asian and NHOPI were separated into different race categories. Trends for Asians should be interpreted with caution.

+From 2004-2011, rates based on deaths < 20 are suppressed with (--). Starting 2012, rates based on 5-19 deaths are presented, which are considered unreliable and should be interpreted with caution.

Liver Disease/Cirrhosis

LIVER DISEASE/CIRRHOSIS has been a leading cause of premature death every year for the past 10 years and a leading cause of death since 2006. Death rates from liver disease have been consistently higher for men than for women, with the rate for men twice higher than the rate for women in 2013. It was the second-leading cause of death for overall 45-64 year olds and Latino men (29 deaths per 100,000 population) while it was the second-leading cause of premature death for AIAN women in 2012-2013.

In simple terms . . .

The liver stores vitamins and nutrients from food. It also breaks down toxic substances from the blood and removes waste products from the body. When normal liver cells are damaged, they are replaced by scar tissue. The scar tissue interferes with the flow of blood through the liver and prevents the liver from carrying out its normal functions. Damage from scarring of the liver (cirrhosis) cannot be reversed. Sustained heavy alcohol consumption is the leading cause of cirrhosis. Chronic hepatitis, a prolonged inflammation of the liver, also causes liver damage and can cause cirrhosis. Liver disease can also be caused by viral infections such as hepatitis B and hepatitis C, as well as non-viral causes such as autoimmune disease, and exposure to certain drugs and environmental toxins.

Risk factors

Excessive alcohol consumption, prolonged exposure to certain chemicals and medications, hepatitis B or hepatitis C infection

Community opportunities for prevention

• Provide access to alcohol treatment programs

- Promote hepatitis B vaccination for groups at high risk
- Provide hepatitis B and hepatitis C screening for high-risk populations which, for hepatitis C, includes adults born between 1945 and 1965
- Regulate alcohol outlet density, maintain limits on hours and days of sale, and enhance enforcement of laws prohibiting sales to minors

Individual opportunities for prevention

- Limit alcohol intake
- Follow manufacturer's instructions when using household and industrial chemicals
- Follow doctor's instructions when taking prescription and over-the-counter drugs, and dietary supplements
- Avoid behaviors that promote transmission of hepatitis B and hepatitis C, such as injection drug use and unprotected sex
- Talk to your doctor about screening for the hepatitis B and hepatitis C viruses, and treatment for alcohol abuse

6th cause of premature death 9th cause of death

LOS ANGELES COUNTY

Deaths 1,315 Death Rate 12.8 deaths per 100,000 population

Healthy People 2020 8.2 deaths per 100,000 population Objective SA-11

> ICD-9 codes 571 (1979-1998)

ICD-10 codes K70, K73-K74

References American Liver Foundation www.liverfoundation.org

> National Digestive Diseases Information Clearinghouse www.digestive.niddk.nih.gov

"Disparities and Deaths from Chronic Liver Disease and Cirrhosis, Los Angeles County, 2000-2008" www.publichealth.lacounty.gov/epi/ docs/CLD_mortality_final_web.pdf

Referral Greater Los Angeles Chapter of the American Liver Foundation 310-670-4624

Figure T12. Trends in liver disease/cirrhosis mortality

	200)4	200)5	200	06	200	07	200	8	200)9	20	10	20 ⁻	11		201	2	201	13
	No. of deaths	Death rate*		No. of deaths	Death rate*	No. of deaths	Death rate*														
Los Angeles County	1,035	12	1,061	12	1,102	12	1,133	12	1,134	12	1,246	13	1,171	12	1,246	12		1,275	12.4	1,315	12.8
Male	698	17	759	18	758	17	792	18	773	17	837	18	787	17	818	17		875	18.0	898	18.5
Female	337	7	302	6	344	7	341	7	361	7	409	8	384	7	428	8	caution.	400	7.4	417	7.7
White	428	11	397	10	386	10	396	10	398	10	419	11	416	11	436	11	with o	422	10.9	471	12.3
Latino/a	458	17	501	18	554	19	586	20	594	19	645	21	587	18	637	19	eted	672	19.0	666	18.8
Black	98	11	102	11	98	11	86	10	69	7	112	12	97	10	104	11	terpre	103	10.5	85	8.7
Asian [†]	46	4	48	4	49	4	55	4	59	4	58	4	55	4	56	4	should be interpreted with	71	4.4	77	4.5
Males																	s sho				
White	295	16	267	14	263	14	260	14	268	14	272	14	262	14	269	14	trend	299	15.8	311	16.7
Latino	308	24	383	30	397	28	439	31	413	28	448	30	423	29	455	27	ore, t	467	27.1	487	28.8
Black	62	16	68	18	59	15	51	13	45	11	75	18	54	12	54	12	Jeref	61	13.6	47	10.4
Asian ^T	29	5	31	5	29	5	35	6	39	6	37	5	38	5	34	5	I**, tl	44	6.2	44	5.8
Females																	Asian included NHOPI**, therefore, trends				
White	133	7	130	6	123	6	136	7	130	6	147	7	154	8	167	8	Indec	123	6.2	160	8.0
Latina	150	12	118	8	157	11	147	10	181	12	197	13	164	10	182	11	n inc	205	11.7	179	10.1
Black	36	7	34	7	39	8	35	7	24	5	37	7	43	8	50	10	Asia	42	8.0	38	7.3
Asian ^T	17		17		20	3	20	3	20	3	21	3	17		22	2	2012,	27	2.9	33	3.4
SPA 1: Antelope Valley	40	13	39	13	43	14	50	16	45	14	53	17	47	13	55	15	Before	47	13.6	58	15.7
SPA 2: San Fernando	190	10	199	10	200	10	189	9	207	10	200	9	192	9	218	10		243	10.4	273	11.6
SPA 3: San Gabriel	173	10	197	12	207	12	179	10	194	11	217	12	191	11	215	11		240	12.2	224	11.6
SPA 4: Metro	131	13	127	12	136	13	144	13	147	13	163	15	151	14	156	14		147	13.0	171	15.0
SPA 5: West	40	6	41	6	41	6	44	6	40	5	55	7	45	6	61	8		60	8.2	56	7.5
SPA 6: South	118	17	102	14	120	16	122	17	112	15	130	17	141	18	150	18		152	17.7	121	14.5
SPA 7: East	173	16	176	16	163	14	199	17	198	17	226	19	210	18	193	16		194	15.7	214	17.2
SPA 8: South Bay	139	10	159	11	156	11	184	12	174	11	176	11	181	12	196	12		191	11.8	196	12.1

*Age-adjusted rate per 100,000. The death rates for 2004-2009 were recalculated using new population estimates based on the 2010 Census, therefore, death rates in this report may differ from rates previously published. See Note on Page 5 for additional information. **NHOPI= Native Hawaiian and other Pacific Islander. +From 2004-2011, the number of deaths and death rates for Asians includes NHOPI. Starting 2012, Asian and NHOPI were separated into different race categories. Trends for Asians should be interpreted

with caution.

--Number of deaths is too small to calculate a reliable rate.

Lung Cancer

LUNG CANCER has dropped from the third to the fourth-leading cause of death in 2013. The number of deaths was proportionately represented between men (1,407 deaths) and women (1,280 deaths) while it has been rising among Asian women in the past 10 years. It was the third-leading cause of death in the Antelope Valley (43 deaths per 100,000 population) and Metro (25 deaths per 100,000 population) SPAs. The lung cancer death rate has decreased approximately 22% between 2012 and 2013 among black men.

In simple terms . . .

Cancer is a term for diseases in which cells in your body grow out of control. Cancer cells can invade nearby tissue and spread to other parts of the body through the blood and lymph systems. Lung cancer starts in the cells of the lung or bronchus.

Risk factors

Tobacco smoking, breathing in the smoke of others (secondhand smoke), exposure to cancer-causing substances including radon, asbestos, uranium, and arsenic

Community opportunities for prevention

- Restrict smoking in public places, worksites and multi-unit housing to decrease exposure to indoor and outdoor secondhand smoke
- Provide access to affordable smoking cessation programs
- Reduce youth access to tobacco products through policies and their enforcement
- Increase the tobacco tax
- Promote lung cancer screening for high risk individuals

Individual opportunities for prevention

- If you smoke, get help to quit: 1-800-NO-BUTTS
- If you don't smoke, don't start
- Avoid being near people who are smoking
- Reduce exposure to cancer-causing substances
- Follow recommended guidelines* for lung cancer screening of high-risk individuals

7th cause of premature death 4th cause of death

LOS ANGELES COUNTY

Deaths 2,687 Death Rate 27.5 deaths per 100,000 population

Healthy People 2020 45.5 deaths per 100,000 population Objective C-2

> ICD-9 codes 162 (1979-1998)

ICD-10 codes (1999-2013) C33-C34 (before 2011)

References American Cancer Society www.cancer.org

> Guide to Community Preventive Services www.thecommunityguide.org

National Cancer Institute, Surveillance, Epidemiology and End Results (SEER) Program www.seer.cancer.gov/registries/los_ angeles.html

It's Quitting Time L.A. www.laquits.com

Referral American Cancer Society Helpline 1-800-227-2345

> California Smokers' Helpline 1-800-NO-BUTTS

*Available at www.uspreventiveservicestaskforce.org/uspstf/uspslung.htm.

Figure T13. Trends in lung cancer mortality

	200	04	200)5	200	06	20	07	20	08	200	09	201	0		201	1		201	2	201	13
	No. of deaths	Death rate*		No. of deaths	Death rate*		No. of deaths	Death rate*	No. of deaths	Death rate*												
Los Angeles County	3,034	37	3,036	36	3,021	36	2,950	34	2,910	33	2,958	33	2,941	33	2011-2013.	2,908	31		2,809	28.7	2,687	27.5
Male	1,710	49	1,608	46	1,719	48	1,568	43	1,568	42	1,650	43	1,602	41	2011-	1,596	40		1,486	35.1	1,407	33.4
Female	1,324	28	1,428	30	1,302	27	1,382	28	1,342	26	1,308	25	1,339	26	comparable to 2	1,312	24	caution.	1,323	23.9	1,280	23.2
White	1,825	44	1,830	44	1,788	43	1,700	41	1,687	39	1,702	40	1,655	40	ompara	1,578	37	with	1,563	36.2	1,438	33.9
Latino/a	366	19	370	18	384	18	398	18	433	19	408	17	441	18	þ	452	18	eted	393	14.0	440	16.5
Black	452	56	457	57	480	60	464	56	377	45	432	51	433	51	y not	431	49	be interpreted	414	44.9	370	40.1
Asian [†]	379	31	368	30	359	28	378	28	406	29	412	29	400	27	2004-2010 may	428	27	should be in	411	24.5	419	24.1
Males White	974	54	024	51	044	50		47	850	46	892	47	855	47	200	846	45	ds sl	783	40.1	732	38.3
Latino	231	54 30	921 210	24	941 236	53 28	860 233	26	253	46 28	243	47 25	260	47 26	death,	040 253	45 24	, trends	217	40.1 18.6	240	20.3
Black	263	30 79	210	24 75	236	20 88	235	73	200	20 60	243 247	72	200	20 66	5	255	24 63	efore	217	59.7	240 190	20.3 49.4
Asian [†]	205	45	243	44	250	45	243	39	260	44	247	44	249	39	cause	258	38	there	241	34.0	232	31.4
	200	40	220		200	40	224	55	201		200		245	55	for this ca	200	50	NHOPI**, therefore,	241	04.0	252	01.4
Females										0.5		~ .			les fo			і Про				
White	851	36	909	39	847	36	840	36	837	35	810	34	800	35) codes	732	31	included	780	33.2	706	30.4
Latina Black	135 189	12 40	160 214	13 45	148 194	12 41	165 219	12 45	180 177	13 36	165 185	12 37	181 205	13 41	the ICD-10	199 206	13 39	an in	176 189	10.7 34.9	200 180	12.3 33.5
Asian [†]	144	40 21	140	45 20	194	41 15	154	45 20	145	30 18	146	37 18	151	41 18	he IC	170	39 19	, Asian	170	34.9 17.6	187	33.5 18.8
Asiaii	144	21	140	20	103	15	104	20	145	10	140	10	131	10	2	170	19	e 2012,	170	17.0	107	10.0
SPA 1: Antelope Valley	114	50	122	53	123	51	134	52	128	48	118	42	123	44	of changes	110	38	Before	120	39.1	130	42.5
SPA 2: San Fernando	643	36	683	38	675	37	637	34	620	31	664	33	625	31		638	30	"	658	29.4	625	28.4
SPA 3: San Gabriel	531	33	596	37	562	34	550	33	564	33	573	33	566	32	Because	575	31		525	27.3	550	28.0
SPA 4: Metro	290	30	285	30	267	28	274	27	294	29	265	26	302	31	Bec	267	26		261	24.4	271	25.2
SPA 5: West	222	33	220	31	217	31	204	29	212	29	216	29	226	31		191	25		207	25.9	189	24.3
SPA 6: South	297	48	293	47	271	43	280	44	242	38	275	42	268	41		277	40		266	36.7	223	30.7
SPA 7: East	366	35	332	32	325	31	341	32	346	32	300	27	299	28		337	30		290	23.9	259	22.4
SPA 8: South Bay	544	41	496	37	564	42	520	38	494	35	541	38	529	38		511	34		478	31.3	440	28.1

*Age-adjusted rate per 100,000. The death rates for 2004-2009 were recalculated using new population estimates based on the 2010 Census, therefore, death rates in this report may differ from rates previously published. See Note on Page 5 for additional information. **NHOPI= Native Hawaiian and other Pacific Islander. +From 2004-2011, the number of deaths and death rates for Asians includes NHOPI. Starting 2012, Asian and NHOPI were separated into different race categories. Trends for Asians should be interpreted

with caution.

Motor Vehicle Crash

3rd cause of premature death **17th** cause of death

MOTOR VEHICLE CRASHES were the third-leading cause of premature death in 2013. They were a leading cause of death for women between the ages of 15 and 24 years. In 2013, nearly 36% were pedestrian-related deaths. The highest motor vehicle crash death rate, 13 deaths per 100,000 population, was among black men. The overall county YPLL was 22,986 years, while Latino men represented nearly 45% of YPLL with median age at death as 34 years.

In simple terms . . .

Traffic-related motor vehicle crashes occur on any public roadway, including streets or highways. Crashes can also occur in nonpublic areas such as parking lots, private roads, or driveways.

Any type of vehicle can be involved in a motor vehicle crash, including a car, truck, bus, or motorcycle. The person injured may be the driver or passenger of the vehicle that caused the crash, or of the vehicle that was hit, or a pedestrian or bicyclist.

Risk factors

Risk factors for crashing: lack of driving experience, driving under the influence of alcohol or drugs (illicit, prescription, or over-the-counter), distracted driving, disobeying traffic laws, younger or older age, speeding, unsafe street design, hazardous road conditions, neglecting routine car maintenance

Risk factors for injury after a crash: not using seat belts or other passenger safety restraints such as child safety seats, unsafe car design, not wearing a helmet when riding a motorcycle or bicycle

Community opportunities for prevention

• Actively enforce all traffic laws, including those addressing distracted driving, seat belt use, child passenger safety, speeding, and driving under the influence

- Use media and educational campaigns to reduce alcohol-impaired driving and to improve child passenger and teen driving safety
- Provide safely designed streets with sidewalks, bike lanes, and crosswalks; traffic calming measures and signal timing; and good lighting
- Support national efforts for safe car design features such as antilock brakes and electronic stability control systems

Individual opportunities for prevention

- Do not drive while impaired by alcohol or drugs
- Do not text while driving
- Always wear seat belts, even for short trips
- Buckle children under age 8 in an age-appropriate, properly installed child safety seat or booster seat in the back seat of the car
- Wear helmets when using bikes, scooters, skates, and skateboards
- When walking near traffic, supervise young children and hold their hand
- Keep your vehicle in good working order

LOS ANGELES COUNTY

Deaths	733 (710 traffic-related)
Death Rate	7.1 deaths per 100,000 population
	6.9 deaths per 100,000 population
	for traffic-related deaths only*

Healthy People 2020 12.4 deaths per 100,000 population Objective IVP 13.1 for traffic-related deaths only

> ICD-9 codes (1979-1998) E810-E825

- ICD-10 codes (1999-2013) V02-V04, V09.0, V09.2, V12-V14, V19.0-V19.2, V19.4-V19.6, V20-V79, V80.3-V80.5, V81.0-V81.1, V82.0-V82.1, V83-V86, V87.0-V87.8, V88.0-V88.8, V89.0, V89.2 (codes are for all motor vehicle crashes)
 - References Guide to Community Preventive Services www.thecommunityguide.org

The National Highway Traffic Safety Administration www.nhtsa.gov/

Referral California Highway Patrol (non-emergency) 1-800-TELL-CHP

*Shown for comparability with Healthy People 2020 Objective.

Figure T14. Trends in motor vehicle crash mortality

	200	04	200)5	200	06	200	07	200	08	200	09	201	10	201	11		201	2	201	13
	No. of deaths	Death rate*		No. of deaths	Death rate*	No. of deaths	Death rate*														
Los Angeles County	947	10	925	10	965	10	908	9	822	8	677	7	625	6	620	6		692	6.8	733	7.1
Male	647	14	650	14	681	14	669	14	623	13	484	10	428	9	427	9		499	10.0	542	10.9
Female	300	6	275	6	284	6	239	5	199	4	193	4	197	4	193	4	caution.	193	3.7	191	3.5
White	340	11	287	9	312	10	272	8	253	8	220	7	200	6	189	6	with	214	6.7	210	6.5
Latino/a	374	9	428	10	425	10	436	10	367	9	312	7	290	7	291	7	eted	317	6.8	356	7.6
Black	120	13	106	12	115	13	110	12	107	12	74	8	71	8	70	8	terpr	91	10.4	79	8.8
Asian [†] Males	107	8	95	7	110	8	86	7	92	7	69	5	62	4	63	4	hould be interpreted with	61	3.8	83	5.2
White	218	14	201	13	220	14	191	12	198	13	169	10	136	8	132	8	s spu	158	10.0	166	10.4
Latino	270	13	304	14	321	16	334	16	290	14	223	11	213	10	204	9	, trei	228	9.7	267	11.6
Black	85	20	83	21	82	21	84	21	77	19	52	13	54	13	47	11	efore	66	16.9	54	13.2
Asian [†]	71	12	58	10	55	9	57	9	56	9	39	6	25	4	42	6	PI**, ther	41	5.6	51	7.2
Females	400	-		-				-		0		•				0	OHN be				
White	122	7	86	5	92	6 5	81	5	55	3	51	3	64	4	57	3	clude	56	3.4	44	2.6
Latina Black	104 35	5 7	124 23	6 5	104 33	5	102 26	5 5	77 30	4 6	89 22	4 4	77 17	4	87 23	4 5	an in	89 25	3.9 5.3	89 25	3.9 5.3
Asian [†]	36	5	37	5	55	7	29	4	36	5	30	4	37	4	23	3	2012, Asian included NHOPI**, therefore, trends should	20	2.3	32	3.4
SPA 1: Antelope Valley	83	27	80	25	73	22	51	15	44	12	45	13	35	10	45	12	Before	54	13.9	61	16.2
SPA 2: San Fernando	180	9	197	10	197	10	156	8	167	8	142	7	127	6	118	5	ñ	151	6.7	159	7.1
SPA 3: San Gabriel	153	9	179	10	147	8	153	9	124	7	109	6	100	6	102	6		90	5.0	116	6.2
SPA 4: Metro	84	8	91	8	82	7	87	8	76	7	65	6	75	7	53	5		57	4.8	92	7.8
SPA 5: West	37	6	35	6	41	6	39	6	32	5	31	4	30	5	32	4		33	4.7	27	3.9
SPA 6: South	106	11	99	11	118	13	119	13	112	13	94	10	70	7	89	9		96	10.0	85	8.5
SPA 7: East	105	8	106	8	110	9	124	10	111	9	85	7	88	7	87	7		92	6.9	93	7.0
SPA 8: South Bay	112	7	117	8	137	9	113	7	113	7	89	6	83	5	89	6		118	7.6	97	6.1

*Age-adjusted rate per 100,000. The death rates for 2004-2009 were recalculated using new population estimates based on the 2010 Census, therefore, death rates in this report may differ from rates previously published. See Note on Page 5 for additional information. **NHOPI= Native Hawaiian and other Pacific Islander.

+From 2004-2011, the number of deaths and death rates for Asians includes NHOPI. Starting 2012, Asian and NHOPI were separated into different race categories. Trends for Asians should be interpreted with caution.

--Number of deaths is too small to calculate a reliable rate.

AT A GLANCE Pneumonia/Influenza

PNEUMONIA/INFLUENZA has been a leading cause of death in the past 10 years. In 2013, the overall death rate from pneumonia/influenza was 23 deaths per 100,000 population while the death rate among men was 27 deaths per 100,000 population. Pnuemonia/influenza was the fifth-leading cause of death in the West SPA (19 deaths per 100,000 population) and for seniors 75 years of age or older (325 deaths per 100,000 population).

In simple terms . . .

Pneumonia is an inflammation of the lungs caused by an infection or, less commonly, by a chemical or physical irritant that can result in difficulty breathing. Pneumonia is a common illness that is often mild but can be quite severe, even fatal. The severity of the infection depends on the cause and the person's age and health. Lung infections can be caused by bacteria, viruses, or fungi. Influenza, often called "the flu," is one of many viruses that cause mild to severe respiratory illness, including pneumonia, which can result in death. Influenza and some forms of bacterial pneumonia can be spread from person to person. Influenza and some kinds of pneumonia are vaccine preventable.

Risk factors (for complications) Age (young and old), underlying chronic medical conditions such as diabetes and heart disease, being morbidly obese, weakened immune system, chronic lung disease, tobacco smoking, breathing in the smoke of others (secondhand smoke)

Community opportunities for prevention

- Educate the community about the recommendations for influenza and pneumococcal vaccination
- Provide information about the availability of no-cost vaccinations
- Encourage vaccination by providing accurate information about its protective benefits

Individual opportunities for prevention

- Follow recommended guidelines for influenza and pneumococcal vaccination
- Wash your hands frequently with soap and water
- If you smoke, get help to quit: 1-800-NO-BUTTS
- Stay away from people who are sick and avoid spreading illness to others by staying home if you have a fever, cough and runny nose
- Avoid touching your eyes, nose, or mouth

18th cause of premature death **6th** cause of death

LOS ANGELES COUNTY

Deaths 2,264 Death Rate 22.5 deaths per 100,000 population

Healthy People 2020 None

ICD-9 codes 480-487 (1979-1998)

ICD-10 codes J09-J18 (1999- 2013)

References American Lung Association www.lungusa.org

Centers for Disease Control and Prevention www.cdc.gov/flu

U.S. Department of Health and Human Services www.flu.gov

California Department of Public Health www.cdph.ca.gov/HealthInfo/discond/Pages/Influenza(Flu).aspx

Referral Los Angeles County Info Line for free or low-cost immunization clinics 2-1-1, or 1-800-427-8700

Figure T15. Trends in pneumonia/influenza mortality

	200)4	200)5	200)6	200	07	200	08	200	09	20	10	20 ⁻	11		201	2	201	13
	No. of deaths	Death rate*		No. of deaths	Death rate*	No. of deaths	Death rate*														
Los Angeles County	2,272	27	2,333	28	2,283	27	2,184	25	2,171	24	2,097	22	1,964	22	2,062	21		2,048	20.3	2,264	22.5
Male	1,013	32	1,055	33	1,083	33	1,018	30	990	28	1,016	28	910	26	962	25		975	24.2	1,069	26.6
Female	1,259	24	1,278	24	1,200	23	1,166	21	1,181	21	1,081	19	1,054	19	1,100	19	caution.	1,073	17.6	1,195	19.6
White	1,330	28	1,338	28	1,314	28	1,198	25	1,203	24	1,076	22	1,011	22	982	20	with	965	19.7	1,094	22.8
Latino/a	408	24	448	25	429	22	418	21	430	20	492	21	399	19	509	21	eted	419	16.4	509	19.7
Black	257	35	238	32	246	33	259	34	232	29	223	27	247	31	242	29	erpre	245	27.9	257	28.7
Asian [†] Males	265	25	300	26	284	24	305	24	297	22	290	21	296	21	319	20	should be interpreted	395	22.8	393	22.0
White	613	34	580	32	612	35	532	29	541	29	528	28	480	26	475	24	ids s	465	23.4	519	26.6
Latino	174	27	208	32	198	27	197	29 25	192	29	232	20 24	179	20 21	212	24	, trends	405 196	23.4 19.2	242	23.3
Black	100	37	103	37	117	43	134	47	119	40	100	32	91	30	93	30	efore	99	29.2	111	32.2
Asian [†]	118	26	161	34	152	31	154	30	135	25	148	26	155	27	174	27	there	203	29.5	187	26.3
Females		20		04	102	01	104		100	20	140	20	100	2,		2,	2012, Asian included NHOPI**, therefore,	200	20.0	107	20.0
White	717	24	758	25	702	24	666	22	662	21	548	19	531	19	507	18	ded	500	17.1	575	20.3
Latina	234	22	240	22	231	20	221	18	238	18	260	19	220	17	297	21	inclu	223	14.6	267	17.2
Black	157	33	135	28	129	27	125	26	113	23	123	24	156	31	149	28	sian	146	26.5	146	26.5
Asian [†]	147	23	139	21	132	19	151	20	162	20	142	17	141	16	145	15	e 2012, A	192	18.3	206	19.1
SPA 1: Antelope Valley	50	25	68	35	70	32	51	22	51	21	59	23	61	25	56	22	Before	59	20.8	84	29.1
SPA 2: San Fernando	500	28	472	26	454	25	407	21	415	20	414	20	415	20	394	18	ш	355	15.5	476	21.0
SPA 3: San Gabriel	488	30	477	29	409	24	454	26	449	25	404	22	390	21	422	21		413	20.4	425	20.6
SPA 4: Metro	293	29	319	31	302	29	294	27	255	23	256	23	229	23	257	24		272	23.5	261	23.2
SPA 5: West	184	24	188	24	188	24	184	24	218	27	162	19	158	19	166	18		140	15.5	173	18.9
SPA 6: South	183	30	181	29	202	32	195	31	188	28	178	26	181	30	201	30		189	27.2	217	31.1
SPA 7: East	500 D.1000 D.V	25	256	24	284	26	239	21	248	22	263	23	216	20	216	19		257	21.1	253	21.0
SPA 8: South Bay	298	24	360	28	366	28	354	26	343	24	360	25	311	22	350	23		361	23.3	374	23.9

*Age-adjusted rate per 100,000. The death rates for 2004-2009 were recalculated using new population estimates based on the 2010 Census, therefore, death rates in this report may differ from rates previously published. See Note on Page 5 for additional information.
**NHOPI= Native Hawaiian and other Pacific Islander.

+From 2004-2011, the number of deaths and death rates for Asians includes NHOPI. Starting 2012, Asian and NHOPI were separated into different race categories. Trends for Asians should be interpreted with caution.

Stroke

STROKE has been the second-leading cause of death for each of the past 10 years, and it has been the seventh to ninth-leading cause of premature death. The stroke death rates for blacks (48 deaths per 100,000 population) were consistently higher than for other race/ethnic groups. In 2013, the median age at death from stroke was 77 years for blacks and Latinos, compared with 83 for Asians, and 86 for whites. Stroke was the second-leading cause of death for all SPAs except for Antelope Valley and San Fernando Valley.

In simple terms . . .

A stroke occurs when the blood supply to part of the brain is suddenly interrupted or when a blood vessel in the brain bursts, spilling blood into the soft tissue and the spaces containing or surrounding brain cells. When that happens, part of the brain cannot get the blood and oxygen it needs. Without oxygen, nerve cells in the affected part of the brain usually die within minutes and the soft tissue can develop scarring, resulting in the loss of functions controlled by that part of the brain.

Risk factors

High blood pressure, tobacco smoking, diabetes, high cholesterol, being overweight, excessive alcohol use, age, family history of stroke, prior stroke or heart attack

Community opportunities for prevention

• Promote community access to blood pressure screening and treatment of high blood pressure through programs that use community health workers or community pharmacists for medication management

- Promote physical activity by providing access to safe places like parks and schools to walk, play, and exercise
- Restrict smoking in public places and worksites to decrease exposure to indoor and outdoor secondhand smoke
- Provide access to affordable smoking cessation programs

Individual opportunities for prevention

- Work with your health care provider to control blood pressure and manage diabetes
- If you smoke, get help to quit: 1-800-NO-BUTTS
- Maintain a healthy weight
- Make time to be physically active every day with your children, partner, pet, friends, or on your own
- Eat a low salt diet and replace animal (saturated) fats with plant oils (monoor poly-unsaturated)
- Learn the stroke warning signs

LOS ANGELES COUNTY

Deaths	3,300
Death Rate	32.8 deaths per 100,000 population

Healthy People 2020 34.8 deaths per 100,000 population Objective HDS-3

> ICD-9 codes 430-434, 436-438 (1979-1998)

ICD-10 codes 160-169 (1999-2013)

> References American Stroke Association www.strokeassociation.org

> > National Institute of Neurological Disorders and Stroke www.ninds.nih.gov/disorders/stroke

Referral Los Angeles County Division of the American Heart Association 213-291-7000 Figure T16. Trends in stroke mortality

	200	04	200)5	200	06	200	07	200	08	200	09	20	10	201	11		201	2	201	3
	No. of deaths	Death rate*		No. of deaths	Death rate*	No. of deaths	Death rate*														
Los Angeles County	4,121	50	3,775	45	3,622	42	3,323	37	3,280	36	3,301	35	3,278	36	3,256	34		3,360	33.5	3,300	32.8
Male	1,718	52	1,554	46	1,501	43	1,409	39	1,373	37	1,399	37	1,405	38	1,370	34		1,406	33.8	1,439	34.7
Female	2,403	47	2,221	43	2,121	41	1,914	36	1,907	35	1,902	34	1,873	34	1,886	33	caution.	1,954	32.6	1,861	31.0
White	2,234	48	1,962	42	1,817	40	1,587	34	1,552	32	1,623	34	1,534	34	1,546	32	with o	1,543	32.1	1,506	31.6
Latino/a	785	42	782	39	779	37	742	33	749	32	733	31	780	34	774	30	eted	854	31.5	831	30.2
Black	572	75	530	68	495	62	516	64	469	58	433	52	446	54	423	49	terpre	418	46.2	434	48.4
Asian [†]	513	45	489	41	522	42	469	35	496	36	504	36	501	34	498	31	should be interpreted with	513	30.1	511	29.1
Males																	ls sh				
White	881	49	770	43	704	40	645	36	603	32	668	35	629	35	596	31	trends	593	30.3	625	32.3
Latino	364	47	360	44	356	39	338	35	343	34	325	31	346	35	344	31		386	33.4	399	34.2
Black	208	72	206	69	202	63	209	64	194	59	170	51	179	56	183	53	heref	157	41.8	172	46.7
Asian ^t	260	54	216	43	235	45	211	37	223	39	235	40	243	40	237	36	NHOPI**, therefore,	250	35.4	233	32.1
Females	4 050	47	4.400			40				00	0.55	00		00	050	00	N pa			004	00.0
White Latina	1,353 421	47 38	1,192 422	41 36	1,113 423	40 34	942 404	33 31	949 406	32 31	955 408	33 30	905 434	32 32	950 430	32 29	clude	950 468	32.6 29.7	881 432	30.6 26.9
Black	364	30 77	324	30 67	423 293	54 61	307	62	275	55	263	52	267	52 53	430 240	29 46	Asian included	400 261	47.2	432 262	48.2
Asian [†]	253	38	273	40	287	40	258	34	273	34	269	32	258	30	240	28	2, Asi	263	26.2	278	26.8
															5.2		2012,	20109/100385232			
SPA 1: Antelope Valley	125	61	124	60	125	56	110	44	120	48	94	37	114	45	99	37	Before	122	43.3	113	38.4
SPA 2: San Fernando	905	50	734	40	758	41	623	33	628	31	690	33	661	32	657	30	В	700	30.6	649	28.5
SPA 3: San Gabriel	756	46	729	44	679	41	608	35	629	35	694	38	650	36	616	32		660	33.0	673	33.5
SPA 4: Metro	426	42	374	37	400	40	358	34	367	35	344	32	311	31	345	32		341	30.3	357	31.5
SPA 5: West	321	42	332	44	258	35	251	33	262	33	232	29	253	30	242	28		236	26.9	249	27.6
SPA 6: South	407	66	376	60	349	54	377	57	355	53	323	48	307	48	311	45		317	43.8	292	40.4
SPA 7: East	499	47	460	43	421	39	435	38	378	33	411	35	426	39	432	37		436	35.5	413	34.3
SPA 8: South Bay	635	50	638	49	600	45	535	39	519	36	510	35	551	39	551	36		545	35.1	553	35.6

*Age-adjusted rate per 100,000. The death rates for 2004-2009 were recalculated using new population estimates based on the 2010 Census, therefore, death rates in this report may differ from rates previously published. See Note on Page 5 for additional information.
**NHOPI= Native Hawaiian and other Pacific Islander.

+From 2004-2011, the number of deaths and death rates for Asians includes NHOPI. Starting 2012, Asian and NHOPI were separated into different race categories. Trends for Asians should be interpreted with caution.

Suicide

SUICIDE has been a leading cause of premature death for each of the last 10 years. In 2013, most suicides were among 25 to 64 year olds (71%), among men (79%), and among Latino and white men (63%). Suffocation/hanging was the most common method among women (37%), while firearm among whites (40%). The highest suicide rate, 24 deaths per 100,000 population, was among men 75 years of age or older; the death rate for this group has decreased 25% between 2004 and 2013.

In simple terms . . .

Suicide refers to a person intentionally taking his or her own life.

Risk factors

Suicidal behavior is complex. Risk factors for suicidal behavior include mental illness such as depression or bipolar disorder, alcohol or drug abuse, previous suicide attempts, family history of suicide, history of being sexually abused, impulsive or aggressive tendencies, and having a firearm in the home.

Community opportunities for prevention

- Increase public awareness that suicide is preventable
- Educate health care providers and the public to identify and respond to persons at risk for suicide
- Provide access to mental health and substance abuse services
- Use media campaigns to reduce stigma about seeking help for mental health issues and suicide

Individual opportunities for prevention

- Limit access to lethal means of self-harm, including the stockpiling of prescription medications
- Remove firearms from the home, or store them unloaded and locked with the ammunition locked separately
- Seek help for substance abuse (drug or alcohol) from a health care provider, or call the Substance Abuse Prevention and Control helpline: 1-800-564-6600
- Seek mental health counseling for untreated mental illness or depression, or call the Department of Mental Health: 1-800-854-7711
- For suicidal thoughts, call the National Suicide Prevention Lifeline: 1-800-273-8255
- Respond to threats of self-harm and do not leave a suicidal person alone

5th cause of premature death 15th cause of death

LOS ANGELES COUNTY

Deaths 789 Death Rate 7.7 deaths per 100,000 population

Healthy People 2020 10.2 deaths per 100,000 population Objective MHMD-1

> ICD-9 codes (1979-1998) E950-E959

ICD-10 codes *U03, X60-X84, Y87.0 (1999-2013)

References National Institute of Mental Health www.nimh.nih.gov

> U.S. Department of Health and Human Services www.mentalhealth.gov

Know the Signs www.suicideispreventable.org

Referral Los Angeles County Department of Mental Health http://dmh.lacounty.gov

1-800-854-7771

Didi Hirsch Community Mental Health Center Suicide Prevention Center 1-877-727-4747

National Suicide Prevention Lifeline 1-800-273-8255

Figure T17. Trends in suicide mortality

	200)4	200)5	200	06	200	07	200	08	200)9	20	10	201	1		201	2	201	3
	No. of deaths	Death rate*		No. of deaths	Death rate ^{*‡}	No. of deaths	Death rate ^{*‡}														
Los Angeles County	696	7	695	7	662	7	667	7	802	8	775	8	792	8	766	8		757	7.5	789	7.7
Male	537	12	524	12	506	11	529	12	620	13	580	12	635	13	593	12		598	12.3	614	12.4
Female	159	3	171	3	156	3	138	3	182	4	195	4	157	3	173	3	caution.	159	3.1	175	3.3
White	379	11	388	11	367	11	374	11	478	14	449	13	420	13	412	12	with o	421	12.5	437	12.8
Latino/a	182	4	172	4	165	4	161	4	160	4	173	4	203	4	206	4	eted	182	4.0	196	4.1
Black	42	5	50	6	47	5	48	5	65	7	47	5	56	6	49	6	terpre	58	6.7	51	6.0
Asian [†] Males	92	7	81	6	82	6	80	6	93	6	101	7	107	7	97	6	should be interpreted	90	5.6	97	6.1
White	284	17	286	17	279	16	297	17	363	21	329	18	324	19	315	19	s spr	337	20.0	332	19.3
Latino	154	8	143	7	133	7	137	7	132	6	142	7	181	8	170	8	, trer	149	6.9	165	7.2
Black	32	8	37	9	40	10	38	9	52	12	33	8	46	11	40	10	efore	44	11.2	39	9.8
Asian [†]	67	11	54	8	54	8	54	8	70	11	73	11	81	12	66	9	included NHOPI**, therefore, trends	64	8.6	74	10.1
Females						_				_		_					OHN P				
White	95	6	102	6	88	5	77	4	115	7	120	7	96	6	97	6	clude	84	5.3	105	6.4
Latina Black	28 10	1	29	1	32	1	24 10	1	28	1	31	2	22 10	1	36 9	1	anin	33	1.4 3.0	31 12	1.2 2.6
Asian [†]	25	4	13 27	4	28	4	26	4	13 23	3	14 28	4	26	3	31	4	2012, Asian	14 26	3.0 3.2	23	2.8
SPA 1: Antelope Valley	35	11	34	12	37	11	27	8	48	14	29	8	53	15	47	13	Before	35	9.6	32	8.6
SPA 2: San Fernando	159	8	154	7	145	7	168	8	193	9	192	9	169	8	190	9	m	207	9.0	199	8.6
SPA 3: San Gabriel	118	7	122	7	118	7	106	6	101	6	128	7	132	7	128	7		132	7.2	129	6.9
SPA 4: Metro	78	7	89	8	81	7	88	8	99	9	101	9	113	10	83	7		77	6.5	94	7.8
SPA 5: West	59	9	70	10	56	8	53	8	82	12	79	11	53	8	75	11		79	11.2	55	7.8
SPA 6: South	46	5	33	4	46	5	38	4	48	5	33	4	45	4	41	4		35	3.7	43	4.1
SPA 7: East	67	5	67	6	57	5	65	5	72	6	93	7	65	5	81	6		62	4.8	91	7.1
SPA 8: South Bay	112	8	113	8	105	7	105	7	143	9	109	7	147	10	118	8		128	8.3	144	9.0

*Age-adjusted rate per 100,000. The death rates for 2004-2009 were recalculated using new population estimates based on the 2010 Census, therefore, death rates in this report may differ from rates reviously published. See Note on Page 5 for additional information. **NHOPI= Native Hawaiian and other Pacific Islander.

+From 2004-2011, the number of deaths and death rates for Asians includes NHOPI. Starting 2012, Asian and NHOPI were separated into different race categories. Trends for Asians should be interpreted with caution.

+From 2004-2011, rates based on deaths < 20 are suppressed with (--). Starting 2012, rates based on 5-19 deaths are presented, which are considered unreliable and should be interpreted with caution.

	200	04	20	05	20	06	200	07	20	08	200	09	201	10	20	11		201	12	201	13
	No. of deaths	Death rate*	No. of deaths	Death rate*	No. of deaths	Death rate*	No. of deaths		No. of deaths	Death rate*	No. of deaths		No. of deaths	Death rate*	No. of deaths	Death rate*		No. of deaths	Death rate*	No. of deaths	Death rate*
Los Angeles County	59,153	696	60,145	697	59,461	683	58,316	649	58,043	629	57,620	614	56,538	615	57,988	596		58,498	581	59,678	593
Male	29,839	834	30,308	833	30,035	818	29,630	782	29,402	754	29,342	739	28,772	739	29,191	707		29,610	688	30,413	710
Female	29,314	587	29,837	588	29,426	575	28,686	543	28,641	528	28,278	514	27,766	517	28,797	506	caution.	28,888	492	29,265	499
White	32,324	741	32,101	735	31,376	727	30,593	699	30,149	670	29,622	651	28,738	667	29,104	647	with c	29,123	645	29,188	655
Latino/a	50 2010/01/02/01/02/01	572	13,574	589	13,783	576	13,429	528	13,591	525	13,671	521	13,751	529	14,301	512	reted v	14,467	486	15,243	511
Black	8,372	1,044	8,413	1,043	8,185	1,016	8,023	976	7,697	918	7,825	918	7,438	891	7,623	875	interpre	7,644	847	7,721	854
Asian [†]	5,591	482	5,820	481	5,884	470	6,088	458	6,354	459	6,267	442	6,343	429	6,630	417	þ	6,783	400	7,038	405
Males																	should				
White	15,615	872	15,336	857	15,182	857	14,872	826	14,768	796	14,553	771	14,184	783	14,232	751	trends	14,378	746	14,533	767
Latino	6,950	704	7,517	731	7,440	695	7,370	643	7,316	630	7,433	636	7,448	644	7,591	612		7,670	579	8,139	618
Black	4,224	1,290	4,321	1,305	4,181	1,275	4,078	1,214	3,871	1,131	3,961	1,135	3,704	1,087	3,788	1,062	erefore,	3,857	1,038	3,901	1,042
Asian [†]	2,919	581	3,012	577	3,106	576	3,205	565	3,301	563	3,276	546	3,277	532	3,386	509	**, ther	3,431	485	3,580	494
																	NHOPI**				
Females								_													
White		634	16,765	634	16,194	621	15,721	594	15,381	566	15,069	552	14,554	568	14,872	556	cluded	14,745	554	14,655	557
Latina	ŕ	471	6,057	479	6,343	482	6,059	435	6,275	441	6,238	431	6,303	440	6,710	432	an incl	6,797	411	7,104	426
Black Asian [†]	4,148	865	4,092	848 407	4,004 2,778	829 389	3,945	802 376	3,826 3,053	763 379	3,864	759 362	3,734	748 354	3,835	737 348	, Asian	3,787 3,352	702 336	3,820	707
Asiaii	2,672	406	2,808	407	2,770	309	2,883	370	3,055	379	2,991	302	3,066	304	3,244	340	2012,	3,352	330	3,458	338
SPA 1: Antelope Valley	1,972	870	2,137	916	2,125	866	2,109	805	2,165	795	2,230	802	2,214	799	2,243	760	Before	2,267	739	2,419	776
SPA 2: San Fernando	12,435	680	12,591	677	12,345	658	12,018	620	12,259	604	12,132	580	12,032	577	12,313	559	m	12,731	554	13,029	574
SPA 3: San Gabriel	10,582	643	11,074	663	10,736	637	10,569	607	10,616	595	10,636	590	10,457	580	10,758	560		11,049	558	11,230	562
SPA 4: Metro	6,516	643	6,687	651	6,540	633	6,340	598	6,210	576	6,032	557	5,982	585	6,098	565		6,153	546	6,249	552
SPA 5: West	4,098	565	4,135	565	4,039	556	4,026	544	4,112	533	3,967	500	3,943	497	4,040	485		4,050	480	4,053	483
SPA 6: South	6,058	908	6,019	888	5,853	859	5,731	826	5,614	795	5,638	794	5,234	762	5,477	759		5,449	720	5,484	727
SPA 7: East	7,240	675	7,359	675	7,370	667	7,153	628	7,130	620	7,184	620	6,914	622	7,161	604		7,107	577	7,337	604
SPA 8: South Bay	9,453	714	9,796	728	9,739	716	9,629	685	9,415	650	9,455	641	9,402	655	9,722	639		9,645	618	9,832	624

*Age-adjusted rate per 100,000. The death rates for 2004-2009 were recalculated using new population estimates based on the 2010 Census, therefore, death rates in this report may differ from rates previously published. See Note on Page 5 for additional information.
**NHOPI= Native Hawaiian and other Pacific Islander.

+From 2004-2011, the number of deaths and death rates for Asians includes NHOPI. Starting 2012, Asian and NHOPI were separated into different race categories. Trends for Asians should be interpreted with caution.



Figure T19. Trends* in death rates from the leading causes of death

*The death rates for 2004-2009 were recalculated using new population estimates based on the 2010 Census, therefore, death rates in this report may differ from rates previously published. See Notes on Page 5 for additional information.

Appendix 1. Sample California Certificate of Death

	CORONER'S	USE ONLY		PHYSICIAN'S CERTIFICATION		CAUSE O	F DEATH		PLACE OF DEATH	FUNERAL DIRI			SRDP AND FORMATION	INFOR- MANT	USUAL RESIDENCE	DECEDE	NT'S PERSO	NAL DATA		
126. SIGNATURE OF CORONER / DEPUTY CORONER	LOCATION OF INJURY (Street and number, or location, and	123. PLACE OF INJURY (e.g., home, construction site, wooded area, etc.) 124. DESCRIBE HOW INJURY OCCURRED (Events which resulted in injury)	DEATH	It1. CERIFY THAT TO THE BEST OF FW KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE. AND PLACE STATED FROM THE CAUSES STATED. Decedent Attended Since (A) mm/dd/ccyy (B) mm/dd/ccyy	113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM	(D) AST	Sequentially, list conditions, if any, leading to cause on Line A. Enter UNDERLYING CAUSE follsense or CAUSE follsense or	IMMEDIATE CAUSE (A) (Final disease or condition resulting (B) (B)	COUNTY 105. FACIL	41. TYPE OF DISPOSITION(S) 44. NAME OF FUNERAL ESTABLISHMENT	ION DATE mm/dd/ccyy 40. PLACE OF FINAL	35. NAME OF MOTHER/PARENT-FIRST	28. NAME OF SURVIVING SPOUSE/SHUP-FIRST 31. NAME OF FATHER/PARENT-FIRST	MA	20. DECEDENT'S RESIDENCE (Streef and number, or location) 21. CITY 22. CITY 22. CITY 22. CITY	(see worksheet on back)	9. BIRTH STATE/FOREIGN COUNTRY 10. SOCIAL SECURITY NUMBER 13. EDUCATION - Highest Level/Degree 14/15. WAS DECEDENT HISPANIC/LATINO/A	AKA. ALSO KNOWN AS - Include full AKA (FIRST, MIDDLE, LAST)	1. NAME OF DECEDENT- FIRST (Given)	STATE DI E NIMADEN
	city, and zip)	ea, etc.) in inium)	ie Suicide Pending Investigat	115. SIGNATURE AND TITLE	VITEM 107 OR 112? (If yes, list type of			diseases, injuries, or complicat arrest, or ventricular fibrillation	OR LOCATION WHERE FO	42. SIGNATURE 45. LICENSE M	DISPOSITION	36. MIDDLE	29. MIDDLE	-	COUNTY/PROVINCE	18	J/SPANISH? (IF		2. MIDDLE	USE BLACK INK ON
127. DATE mm/dd/ccyy			e CAUSES STATED. ng Could not be ligation determined	OF CERTIFIER	of operation and date.)			vithout showing the etiology. DO NOT ABBREVIATE.	FOUND (Street and number, or loca	SENUMBER 46 SIGNATURE				27. INFORMANT'S MAILING ADDRESS	23. ZIP CODE	SS OR INDU	IN U.S. ARMED FORCES? 12. IS NO UNK UNK yes, see worksheet on back) 16. I	4. DATE OF B		CERTIFICATE OF DEATH STATE OF CALIFORNIA USE BLACK INK ONLY / NO ERASURES, WHITEOUTS OR ALTERATIONS
128. TYPE NAME, TITLE OF CORONER / DI			120. INJURED AT WORK?	ADDRESS, ZIP CODE				NOT ABBREVATE.		OF LOCAL REGISTRAR		37. LAST (BIRTH NAME)	30. LAST (BIRTH NAME) 33. LAST	(Street and number, or rural route	24. YEARS IN COUNTY	(e.g., grocery store, road construction, e	MARITAL STATUS/GROP' (at Time of Death) 7. D/	BIRTH mm/dd/ccyy 5, AGE Ys. FUN	3. LAST (Family)	TH ALTERATIONS
EPUTY CORONER			121. INJURY DATE mm/dd/scyy 122. HOUR (24 Hours)	116. LICENSE NUMBER 117. DATE mm/dd/coyy			CT) 110. AUTOPSY PERFORMED? YES NO	(AT) 108. DEATH REPORTED TO CORPORER? (AT) PEE NO REFERENCE NAMERA (BT) 109. BIOPSY PERFORMED?	106. CITY	43. LICENSE NUMBER 47. DATE mm/dd/osyy		38. BIRTH STATE	34. BIRTH STATE	number, city or town, state and zip)	25. STATE/FOREIGN COUNTRY	agency, et	ATE OF DEATH mm/dd/scyy 8. HOUR (24 Hours)	DEP ONE YEAR IF UNDER 24 HOURS 6. SEX	OCAL REGISTRATION NUMBER	

Appendix 2. Los Angeles County population estimates and United States standard population

Los Angeles County population estimates, 2013

					Age	Group (yea	rs)					
Males	Less than 1	1-4	5-14	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85+	All ages
White	12,452	49,563	124,867	162,276	212,315	194,858	230,970	210,517	128,741	73,071	33,080	1,432,710
Latino	41,939	168,191	407,369	441,449	395,001	363,702	287,489	172,791	81,587	38,894	13,048	2,411,460
Black	5,141	20,253	53,014	66,296	54,456	50,193	61,334	47,674	26,293	13,703	4,349	402,706
Asian	6,376	26,856	68,032	93,961	106,120	97,200	95,073	86,784	51,666	28,133	11,374	671,575
NHOPI*	152	625	1,673	2,021	1,971	1,606	1,613	1,084	657	287	73	11,762
American Indian/Alaska Native	81	326	944	1,262	1,264	1,329	1,644	1,383	771	389	127	9,520
All races	66,141	265,814	655,899	767,265	771,127	708,888	678,123	520,233	289,715	154,477	62,051	4,939,733
Females	Less than 1	1-4	5-14	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85+	All ages
												-
White	11,700	46,626	117,602	158,072	194,818	178,625	213,522	206,987	140,300	92,497	59,220	1,419,969
Latina	40,158	162,198	391,197	419,659	367,513	356,491	292,746	197,193	105,134	59,237	24,709	2,416,235
Black	5,091	19,482	50,854	67,057	61,216	58,699	70,700	57,315	35,651	20,475	9,843	456,383
Asian	5,994	25,331	64,389	91,147	115,995	115,919	116,568	108,075	63,640	39,090	18,782	764,930
NHOPI*	150	605 337	1,523	1,969	1,934	1,782	1,695	1,230	707	326	120	12,041
American Indian/Alaska Native All races	86 63,179	254,579	896 626,461	1,217 739,121	1,320 742,796	1,355 712,871	1,683 696,914	1,600 572,400	893 346,325	438 212,063	246 112,920	10,071 5,079,629
Los Angeles County	Less than 1	1-4	5-14	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85+	All ages
White	24,152	96,189	242,469	320,348	407,133	373,483	444,492	417,504	269,041	165,568	92,300	2,852,679
Latino/a	82,097	330,389	798,566	861,108	762,514	720,193	580,235	369,984	186,721	98,131	37,757	4,827,695
Black	10,232	39,735	103,868	133,353	115,672	108,892	132,034	104,989	61,944	34,178	14,192	859,089
Asian	12,370	52,187	132,421	185,108	222,115	213,119	211,641	194,859	115,306	67,223	30,156	1,436,505
NHOPI*	302	1,230	3,196	3,990	3,905	3,388	3,308	2,314	1,364	613	193	23,803
American Indian/Alaska Native	167	663	1,840	2,479	2,584	2,684	3,327	2,983	1,664	827	373	19,591
All races	129,320	520,393	1,282,360	1,506,386	1,513,923	1,421,759	1,375,037	1,092,633	636,040	366,540	174,971	10,019,362

*Native Hawaiian and other Pacific Islanders

Notes: July 1, 2013 population estimates prepared for LA County Internal Services Department, released September 28, 2015.

United States standard population, 2000⁶

					Age	Group (year	rs)					
United States	Less than 1	1-4	5-14	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85+	All ages
All races	3,794,901	15,191,619	39,976,619	38,076,743	37,233,437	44,659,185	37,030,152	23,961,506	18,135,514	12,314,793	4,259,173	274,633,642

⁶Hoyert DL, Heron MP, Murphy SL, Kung H. Deaths: Final data for 2003. National vital statistics reports; vol 54 no 13. Hyattsville, MD: National Center for Health Statistics. 2006.



SPA 1 Antelope Valley Pop. 390,938	SPA 2 San Fernando Pop. 2,173,738	SPA 3 San Gabriel Pop. 1,777,757	SPA 4 Metro Pop. 1,140,739	SPA 5 West Pop. 646,531	SPA 6 South Pop. 1,030,078	SPA 7 East Pop. 1,309,383	SPA 8 South Bay Pop. 1,550,198
Lancaster	Agoura Hills	Alhambra	Los Angeles	Beverly Hills	Compton	Artesia	Avalon
Palmdale	Burbank	Arcadia	West Hollywood	Culver City	Los Angeles	Bell	Carson
	Calabasas	Azusa		Los Angeles	Lynwood	Bell Gardens	El Segundo
	Glendale	Baldwin Park		Malibu	Paramount	Bellflower	Gardena
	Hidden Hills	Bradbury		Santa Monica		Cerritos	Hawthorne
	La Canada Flintridge	Claremont				Commerce	Hermosa Beach
	Los Angeles	Covina				Cudahy	Inglewood
	San Fernando	Diamond Bar				Downey	Lawndale
	Santa Clarita	Duarte				Hawaiian Gardens	Lomita
	Westlake Village	El Monte				Huntington Park	Long Beach
		Glendora				La Habra Heights	Los Angeles
		Industry				La Mirada	Manhattan Beach
		Irwindale				Lakewood	Palos Verdes Estates
		La Puente				Maywood	Rancho Palos Verdes
		La Verne				Montebello	Redondo Beach
		Monrovia				Norwalk	Rolling Hills
		Monterey Park				Pico Rivera	Rolling Hills Estates
		Pasadena				Santa Fe Springs	Torrance
		Pomona				Signal Hill	
		Rosemead				South Gate	
		San Dimas				Vernon	
		San Gabriel				Whittier	
		San Marino					
		Sierra Madre					
		South El Monte					
		South Pasadena					
		Temple City					
		Walnut					
		West Covina					

Calculating stable mortality rates for American Indian and Alaska Native (AIAN) and Native Hawaiian and other Pacific Islander (NHOPI) has proven to be challenging. As described on Page 5, the death rate is derived from two sources: the certificate of death and the Census. Death certificates provide causes of death as well as demographic information on the deceased (gender, race/ethnicity, age). Census data provides demographic information on the population. While both sources provide information on race and Hispanic ethnicity, they obtain them in different ways. Race and ethnicity in Census data are based on self-report, whereas on the certificate of death they are completed by the funeral director or coroner. Both sources of data allow for the specification of multiple races.

The potential for racial misclassification may be greater for AIAN and NHOPI, compared with other race groups, because a larger proportion of their respective populations report two or more races and/or report Hispanic ethnicity. In the 2010 Census, 96% of all respondents reported only one race, but the two smallest population groups, NHOPI and AIAN, reported multiple races more frequently than other race groups.

As shown in Table 1, 22% of NHOPI reported Hispanic ethnicity in the Census, but only 4% of NHOPI decedents were reported as Hispanic on the Certificate of Death. Similarly, Hispanic ethnicity was reported in 62% AIAN in Census data, but in only 23% of AIAN deaths (Table 2). Again, while 52% of NHOPI reported multiple races in the Census, only 15% of NHOPI decedents were reported with multiple races. In contrast, only 48% of AIAN reported being multiracial in the Census, while 58% of AIAN decedents were reported with multiple races. Caution then is advised when interpreting death rates for these two racial groups. Crude death rates might range from 293 per 100,000 for all AIAN (including those reporting Hispanic ethnicity and multiple races) to 699 per 100,000 for non-Hispanic, single-race AIAN (data not shown). Similarly, rates might range from 378 per 100,000 for all NHOPI (including those reporting Hispanic ethnicity and multiple races) to 743 per 100,000 for non-Hispanic, single-race NHOPI (data not shown). Table 1. Deaths (2013) and population (2010) of NHOPI by ethnicity and multiple race status

Race and ethnicity	Dea	ths (%)	Рори	lation* (%)
Ethnicity				
Hispanic	7	(4%)	11,920	(22%)
Non-Hispanic	167	(96%)	42,249	(78%)
Race				
Single race	148	(85%)	26,094	(48%)
Two or more races	26	(15%)	28,075	(52%)
Total	174	(100%)	54,169	(100%)

*2010 Census Summary File 1 and 2

Table 2. Deaths (2013) and population (2010) of AIAN by ethnicity and multiple race status

Race and ethnicity	Dea	ths (%)	Populat	tion* (%)
Ethnicity				
Hispanic	96	(23%)	87,201	(62%)
Non-Hispanic	320	(77%)	53,563	(38%)
Race				
Single race	176	(42%)	72,828	(52%)
Two or more races	240	(58%)	67,936	(48%)
Total	416	(100%)	140,764	(100%)

*2010 Census Summary File 1 and 2.

HOW TO GET MORE INFORMATION

LA HealthDataNow! is an online query system to facilitate access to county mortality data. Users can query the system to obtain custom mortality statistics by cause of death, demographic group, and geographic area within the county.

The system is available at: https://dqs.publichealth.lacounty.gov/



MORTALITY IN LOS ANGELES COUNTY 2013

Leading Causes of Death and Premature Death with Trends for 2004-2013 A PUBLICATION OF THE LOS ANGELES COUNTY DEPARTMENT OF PUBLIC HEALTH

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Data are available online https://dqs.publichealth.lacounty.gov

Suggested citation: Los Angeles County Department of Public Health, Office of Health Assessment and Epidemiology. Mortality in Los Angeles County 2013 Leading causes of death and premature death with trends for 2004-2013. October 2016.



October 2016 Publication no: OHAE/EU-2016-1