SALUD URBANA EN AMÉRICA LATINA

Scaling of Mortality in 742 Metropolitan Areas of the Americas

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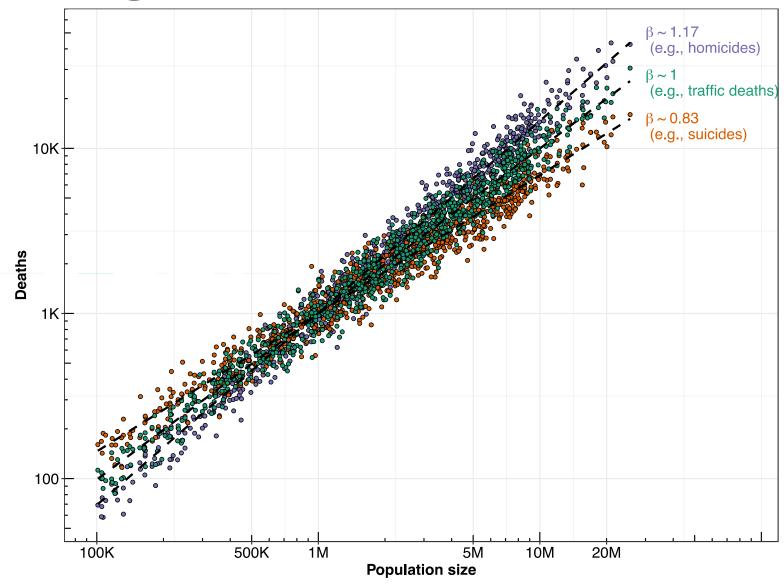






What is urban scaling?

 Like biological organisms, as cities grow the complexity of their processes also grows. **Understanding the urban** scaling of mortality can help us prioritize interventions by city population size.



Objectives

 We examined scaling properties of mortality across 742 cities with >100,000 residents in the US and Latin America from 2010 to 2016

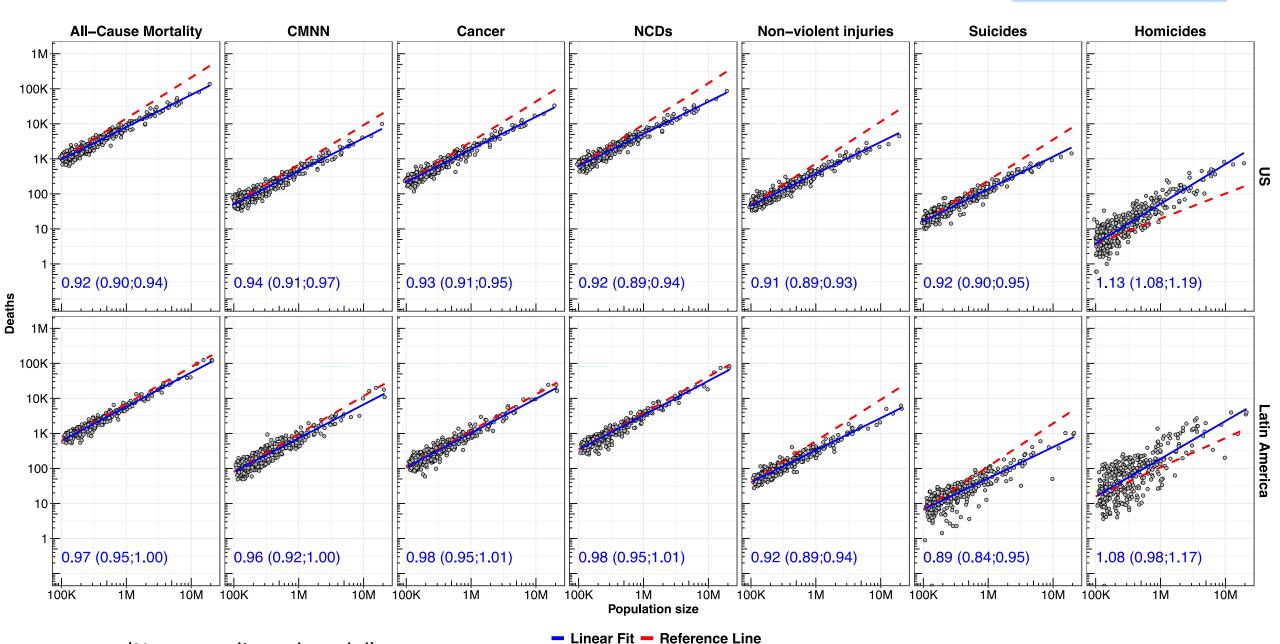


Methods

- Latin America: 366 cities from 10 countries (SALURBAL study)
- US: 376 Metropolitan Statistical Areas
- Sources: vital registration mortality data, population projects
 - LA data corrected for undercounting
- Categorization of causes of death (based on Global Health Estimates):
 - All-cause mortality
 - 5 large groups
 - 25 smaller groups
- Unadjusted model: $\log(mortality_i) = \alpha + \beta * \log(population_i) + \epsilon_i$
- Subsequent models: adjusted by country and age distribution (% aged 0-14, 15-39, 40-64, 65+).



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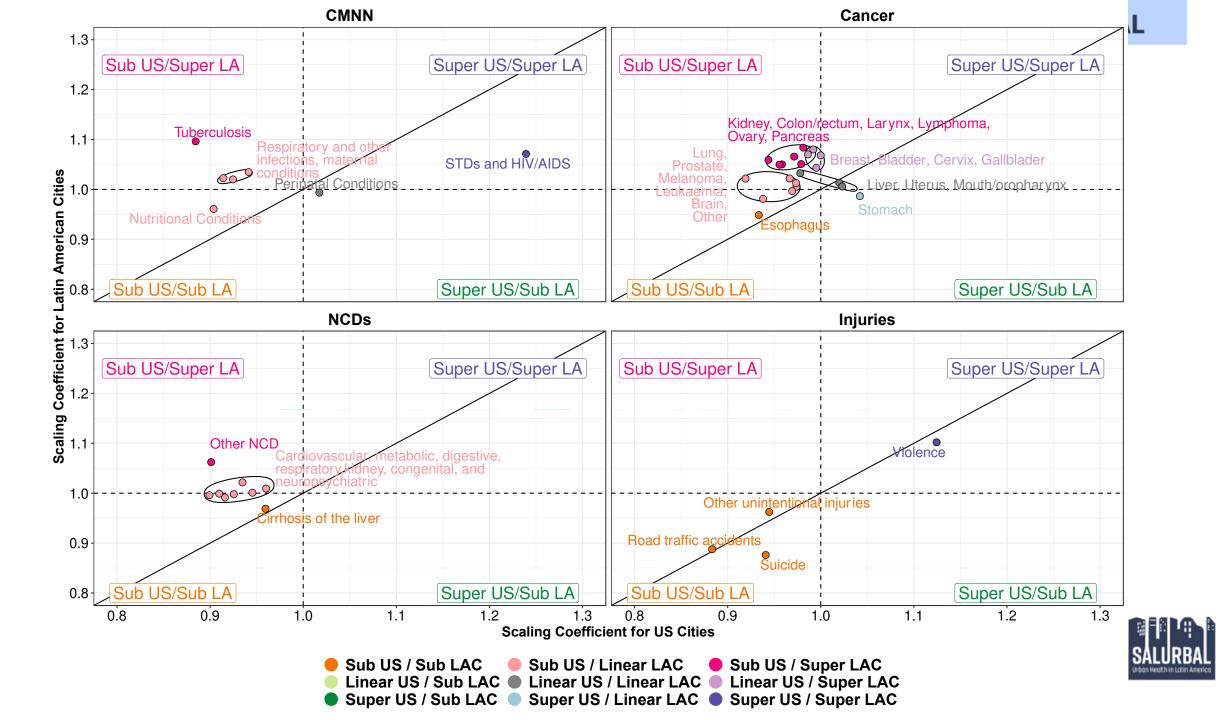


(Note: unadjusted model)

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Cause/group	US**	LA**
All-Cause	0.94	1.00
Mortality	(0.93;0.95)	(0.99;1.01)
CMNN	0.95	1.01
	(0.92;0.97)	(0.98;1.03)
Cancer	0.95	1.01
	(0.94;0.97)	(1.00;1.03)
CVD/NCDs	0.94	1.00
	(0.92;0.95)	(0.99;1.01)
Non-violent	0.92	0.93
injuries	(0.90;0.94)	(0.90;0.95)
Suicides	0.94	0.88
	(0.92;0.97)	(0.84;0.92)
Homicides	1.12	1.10
	(1.07;1.18)	(1.04;1.17)

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Conclusions

- Heterogeneous pattern regarding the scaling of mortality in cities of the Americas.
- All-cause mortality was higher in smaller cities of the US, and similar across city sizes in Latin America.
- Non-violent injuries were consistently less common in bigger cities, while homicides were more common in larger cities of both regions.
- These general patterns can help prioritize interventions for specific conditions by city size.



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