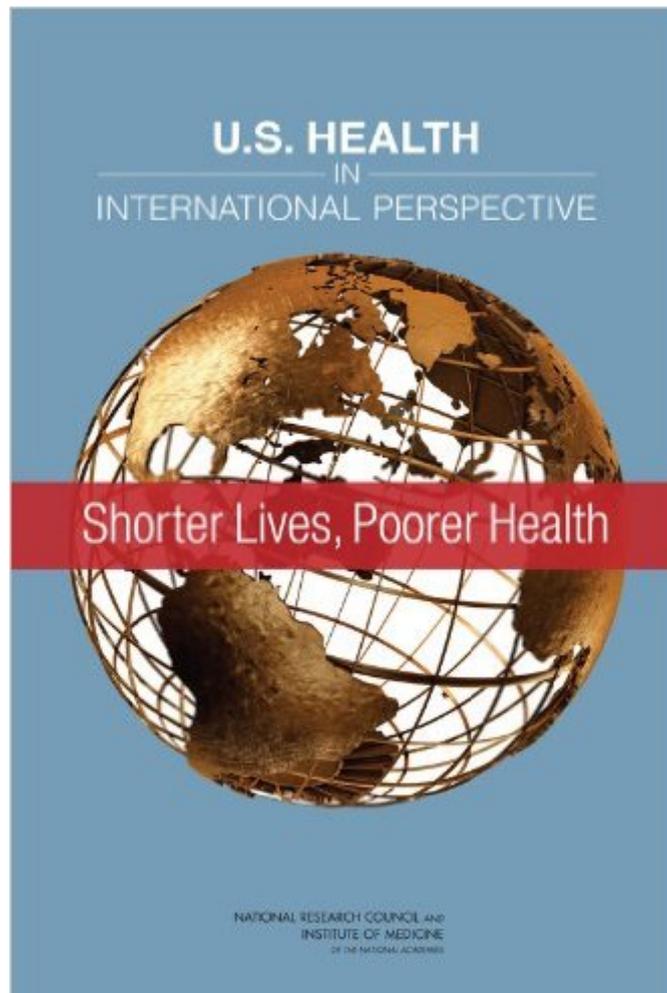


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U.S. Health In International Perspective: Shorter Lives, Poorer Health



Synopsis

The United States is among the wealthiest nations in the world, but it is far from the healthiest. Although life expectancy and survival rates in the United States have improved dramatically over the past century, Americans live shorter lives and experience more injuries and illnesses than people in other high-income countries. The U.S. health disadvantage cannot be attributed solely to the adverse health status of racial or ethnic minorities or poor people: even highly advantaged Americans are in worse health than their counterparts in other, "peer" countries. In light of the new and growing evidence about the U.S. health disadvantage, the National Institutes of Health asked the National Research Council (NRC) and the Institute of Medicine (IOM) to convene a panel of experts to study the issue. The Panel on Understanding Cross-National Health Differences Among High-Income Countries examined whether the U.S. health disadvantage exists across the life span, considered potential explanations, and assessed the larger implications of the findings. U.S. Health in International Perspective presents detailed evidence on the issue, explores the possible explanations for the shorter and less healthy lives of Americans than those of people in comparable countries, and recommends actions by both government and nongovernment agencies and organizations to address the U.S. health disadvantage.

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Customer Reviews

A very interesting and important report issued by committee of experts sponsored by the National Academy of Sciences. This well written and documented report describes the disturbing

phenomenon of a considerable gap in health between the USA and other industrialized nations. Somewhat surprisingly, this gap is present across all age groups but the very old and appears to be present even among affluent Americans. The gap has many dimensions; America has higher infant mortality, more drug abuse related problems, more traffic fatalities by relevant measures, more premature births, and several other important differences from peer nations. The authors of this report stress that causes of these discrepancies are likely to be multifactorial and interacting in complex ways. A fragmented health care system with reduced access for many Americans, excessive reliance on automobiles for transportation, and lack of emphasis on public health interventions are all likely contributors to the gaps. The report mentions, though only in passing, that these gaps exist despite considerably higher health care expenditures in the USA. A corollary point not mentioned by the authors is that as the US has fallen farther behind in population health over the last generation, our rate of health care spending increase has outstripped that of peer nations. These facts point to a remarkable degree of inefficiency in our health care system. Given the complexity of this phenomenon, the authors are reluctant to wade into a long list of policy recommendations but they do point to some specific problems contributing to the gap and in and of itself, this is a very useful step forward. The authors also point to the need for more research on this topic.

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