Preventable mortality

Summary points

Preventable mortality refers to causes of death that are considered preventable through effective public health and primary prevention interventions (subject to age limits if appropriate). This includes deaths caused by tuberculosis, hepatitis C, HIV/AIDS, some cancers, diabetes mellitus, alcohol related diseases, smoking, illicit drug use disorders, ischaemic heart disease, deep vein thrombosis (DVT), aortic aneurysm, influenza, COPD, transport accidents, injuries, suicide and self-inflicted injuries and homicide/assault.

- The preventable mortality rate in Bristol for 2024 is 170.2 deaths per 100,000 persons, significantly higher than the England average (145.8).
- The preventable mortality rate in Bristol for males is significantly higher than for females across three of the four major diseases including cardiovascular, cancer and liver.

Preventable mortality rate –persons (under 75s)

Bristol's preventable mortality rate of 170.2 deaths per 100,000 for 2024, is significantly higher than the England average of 145.8 per 100,000.

Bristol has the third lowest rate of all English core cities, behind Leeds with a rate of 162.3 per 100,000 and Sheffield which has the lowest rate of 157.3 per 100,000 (Figure 1).

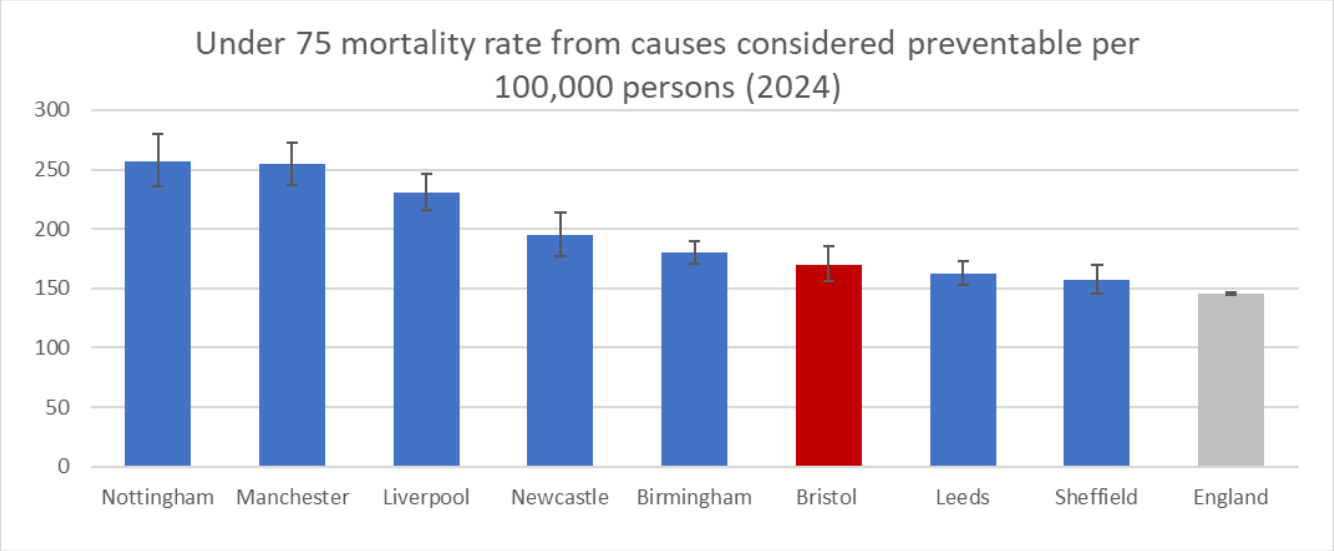

Figure 1: Core city comparison for preventable mortality, 2024 (Source via OHID Mortality Profile, Apr 2026)

Gender: Rates for preventable mortality are significantly higher in males than females. Male preventable mortality rates in Bristol are 220.1 per 100,000, significantly higher than the England average for males (193.4). Female preventable mortality rates in Bristol (121.7 per 100,000) are also significantly higher than the England average for females (100.9).

Figure 2 below illustrates both the national and Bristol trend in the mortality rate from causes considered preventable from 2001 to 2024 and is broken down by gender. It shows the

significant difference between males and females over this period, although the rate for males has decreased significantly over the last 20 years.

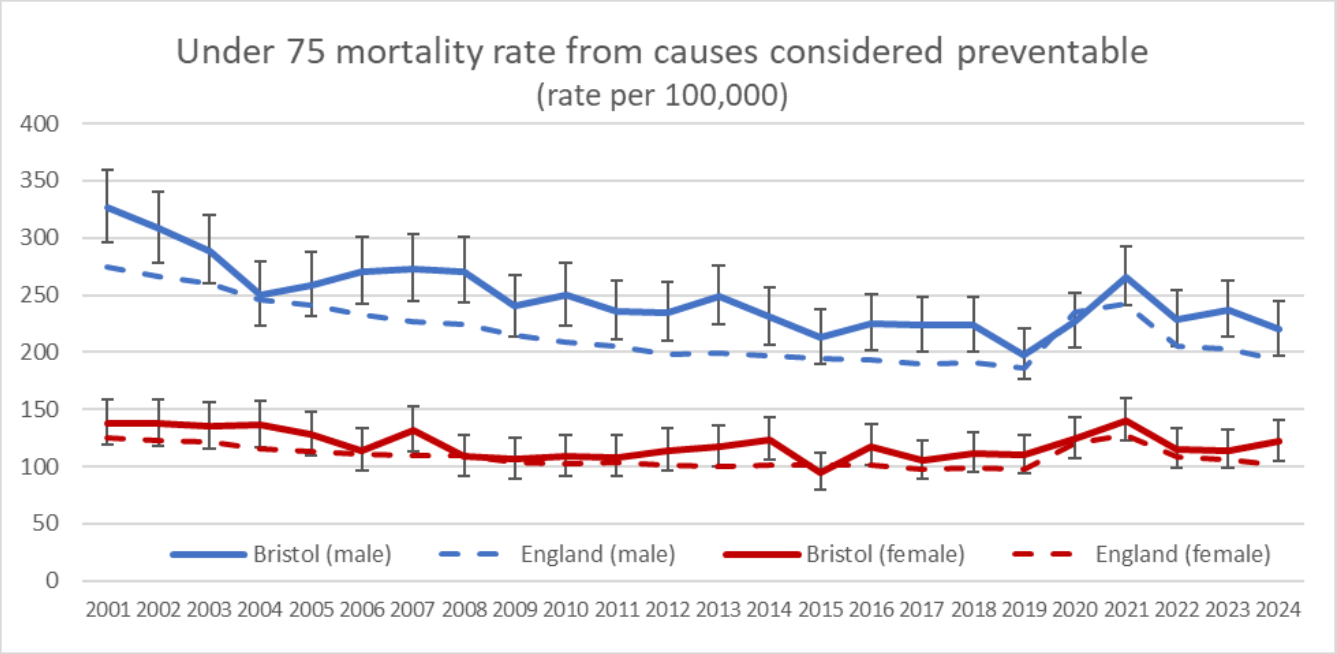

Figure 2: Rates of deaths from causes considered preventable, by gender for Bristol and England average (Source via OHID Mortality Profile, March 2026)

Preventable mortality rate – by cause

The preventable mortality rate for persons aged under 75 (per 100,000 persons) can be broken down by a number of common causes of death, as shown in Figure 3 below. Bristol's preventable mortality rate is higher (worse) than the England average for all major causes, with the exception of Cardiovascular disease, and significantly higher than the England average for cancer and respiratory disease.

2022-2024	Bristol			England		
Rate per 100,000 persons	*Under 75 mortality rate*	*Under 75 mortality rate - male*	*Under 75 mortality rate - female*	*Under 75 mortality rate*	*Under 75 mortality rate - male*	*Under 75 mortality rate - female*
Cardiovascular disease	30.0	44.2	16.3	30.2	44.2	17.1
Cancer	58.1	74.1	42.7	48.6	61.1	36.9
Liver disease	20.3	28.3	12.5	18.9	25.0	13.1
Respiratory disease	24.6	26.4	22.9	19.3	21.4	17.3

Figure 3: Under 75 rates of deaths from specific causes considered preventable, by gender for Bristol and England average (Source via OHID Mortality Profile, March 2026)

Gender: In Bristol, the preventable mortality rate for all major disease groups (with the exception of respiratory disease) is significantly higher for males than females. The preventable mortality rate for both males and females under 75 in Bristol is statistically significantly higher for cancer and respiratory disease, compared to the England average.

For females in Bristol rates are lower than the national average for cardiovascular disease and liver disease. Males are more than twice as likely to die of cardiovascular disease and liver disease than females.

Further data / links / consultations:

- OHID Mortality Profile

Covid-19 impact:

It is difficult to identify the full impact of the pandemic on preventable mortality, However with continued pressures on the health care system it may be increasingly challenging to mitigate the risk factors associated with preventable ill health and preventable mortality.

Date updated: April 2026 **Date of next update**: April 2027