TRANSCRIPT

HOST: We're joined today by Dr. Robert Anderson, the chief of mortality statistics at CDC's National Center for health statistics.

HOST: So NCHS is the agency that ranks the leading causes of death in the country, and this is based on data from the death certificates. Could you tell us a little bit of how NCHS goes about ranking leading causes of death?

ROBERT ANDERSON: Sure, well we have a standard tabulation list that we use typically to present cause of death data and the causes that are eligible to be ranked are determined by that cause list. So you know, there's this nothing sort of magical about leading causes of death - I mean we decide which causes can be ranked and then we rank them you see that list. Other lists could be used and other lists are used in different countries or on an international level for ranking. The rankings for the United States in comparison with other countries, for example, that may look a little bit different but in the United States we have a sort of standard process for ranking leading causes and we try to keep that process as consistent over time as possible because those rankings actually are used for planning and funding in those agencies responsible for doing this work.

HOST: OK - and then another topic that NCHS is the source for is longevity, or life expectancy in the U.S. How does the death certificate data help us learn about that?

ROBERT ANDERSON: Right. So you know, life expectancy information is derived from the death certificate data. Now in this case we don't need cause of death because we are only interested in whether people die or not, and so the life expectancy is based on the information. And what we do is we construct a life table based on all of the death certificates and life expectancy is derived from that table.

HOST: One more question here - what about future initiatives or modifications that might be in the works to build on what we have already in terms of information on the death certificate?

ROBERT ANDERSON: Yeah there's a couple of things that we've been working on, and one of these involves improving timeliness. We've seen dramatic improvements in times over the last few years, but there's still more improvement that could be made. And that mainly involves development of electronic registration systems – these have had the biggest impact on timeliness in the past. And making these systems interoperable with other systems - for example, systems that involve electronic medical records our systems that involve medical examiner or corner records. If we can make these systems talk to each other, we can get more timely information because then information doesn't then have to be transferred manually from one system to another system. This can also help us with the quality of the data as well, which is another thing that we're really working on. If the physician, medical examiner, coroner that has to certify the cause of death has information from the, let's say the electronic health record, at their fingertips then they have better information on which to base the cause of death statement. So these are these are things that we're working on right now and we hope to see improvements, further improvements in timeliness and improvements in the quality of the data as we move forward.

HOST: So to follow up on that, you had mentioned about the provisional data being incomplete. Is it possible then that in the future provisional data may be more complete or might provide more details?

ROBERT ANDERSON: Yeah that's the hope, is that if we can improve the timeliness of the data that allows us to get a more complete picture in the provisional data in a more timely fashion. So it means that we can actually publish something sooner than we currently can. Now we have to wait until the data are complete enough to provide a picture. It's sort of like putting together a puzzle. You know, when you get enough pieces in you can kind of see what the puzzle looks like, but if you're still missing a lot you may not be able to see that picture. So we have to continually put these pieces in until we have something that we can recognize. And then when we do that then we can push that information out and publish it as provisional. And then when we get all the pieces in of course the data become final but the sooner we can get those pieces into the puzzle, the sooner we can show a picture of what's happening with regarding mortality in the country.

HOST: Thanks to Robert Anderson for joining us on this edition of "Statcast."