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Letter to the editor/rapid response

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The UK Chief Medical Officers are rightly concerned about recent high mortality rates.¹ They focus on the lower-than-expected uptake of important cardiovascular interventions, and how increasing their uptake might help.¹ However, the framing of the causes of the high mortality is medicalised and individualised.¹

The stalled improvements in mortality, healthy life expectancy, and morbidity predate the pandemic, having been observed since around 2012 across the UK,² with mortality worsening for those living in the poorest areas.² The changed trends are seen in almost all causes of death (i.e. and are not restricted to cardiovascular disease), and almost all age groups.³ It is clear that the most important cause of the stalled trends is economic, in particular the austerity policies implemented from 2010 which led to social security benefits being worth less in real terms (with more conditions put on their receipt), and to substantial cuts in public services.^{4,5}

Against this background, the pandemic had three impacts. First, the direct additional mortality and morbidity caused by the virus. Second, there was substantial unmet healthcare need as NHS services were prioritised to treat COVID-19 patients, and the public responded by reducing their own demands. Third, there was disruption to the social and economic lives of the population, which impacted across the social determinants of health.⁶

The UK economic policy approach implemented since 2010 has not gone away, and we are left with a frayed social security system, and public services that are now some way beyond underfunded and stretched. The past year has also seen very rapid inflation of prices (without a commensurate increase in wages or benefit levels), leading to substantial reductions in real incomes.⁷ The impacts of this on health are likely to be large and predominantly negative.^{7,8}

A closer look at the evidence of the impacts of austerity and inflation, as well as the potential contribution from unmet healthcare need, is required to understand current UK mortality trends.

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