

Reasons for regional variations in morbidity in the uk

[Science](#), [Epidemiology](#)



One big reason for variations in morbidity in the UK is quality of health care. In some parts of the UK health care is quite poor and lifestyles are quite unhealthy. For example, in Liverpool and other northern cities smoking is much more common than in Sussex or some areas of the south east. Men in the north have a higher mortality rate than those of the same social class in the south, up to 40% of those in manual jobs smoke, compared with 15% in professional jobs. This is possibly due to deprivation in terms of employment and housing as well as education.

This can also be linked to the lack of sporting facilities to those earning a lower income. Lung cancer/diseases are much more prevalent because of this. Age of population can also have a big effect on morbidity. In places like Dorset there is a large amount of elderly dependents and therefore strokes and heart attacks would be more likely to occur because most strokes happen to older people, and despite the greater availability of health care, there is still the highest incidence of cancer in the area, at 671 per 100, 000 population.

Also people living in urban areas are more prone to morbidity and diseases related to pollution and airborne disease. This is because are more people compacted into a small area and are therefore in contact with each other more so disease and viruses are spread easier than in rural areas where people are more spread out. This is shown in Glasgow, which is a large city that also has the lowest life expectancy in the UK, at 69. 3yrs.

Another key factor to the regional variation of morbidity in the UK is diet. The average adult in Scotland consumes up to 55 grams of saturated fat per day

(the recommended amount is around 20/25 grams). This is potentially a key reason as to why Scotland has such a high death rate, 302 per 100, 000. The reason for variation in morbidity in closer together areas, for example Kensington and Hackney, which are both in London also comes down to diet.

Hackney has the highest obesity percentage at 16%, and Kensington has the highest percentage of healthy eating adults, 45. 75%. This dieting difference affects the average morbidity of both areas, greatly increasing the chance of Coronary Heart Disease in Hackney and decreasing it in Kensington. The differing wealth of these areas is the key contributor to this difference in health, with the ' postcode lottery' theory coming into play, as in Hackney healthcare costs money in comparison to Chelsea where it is free.