Instituto Nacional de Estadística

Press Release

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Deaths according to cause of death
Year 2020

24.3% of deaths were due to diseases of the circulatory system and 22.8% to tumours

Infectious diseases, which include *COVID-19, virus identified* and *COVID-19, virus suspected*, were the third leading cause of death (16.4% of the total)[1]

In 2020 there were 493,776 deaths in Spain, 75,073 more than in the previous year (17.9% more). By sex, 249,664 men died (17.4% more than in 2019) and 244,112 women (18.5% more).

The number of deaths increased with respect to the previous year every month of the year, except in January, February and June. The months with the highest increase in deaths were April (78.4% more than in April 2019), March (57.1% more) and November (21.8%).

Monthly deaths. Year 2020
Absolute values and percentage change

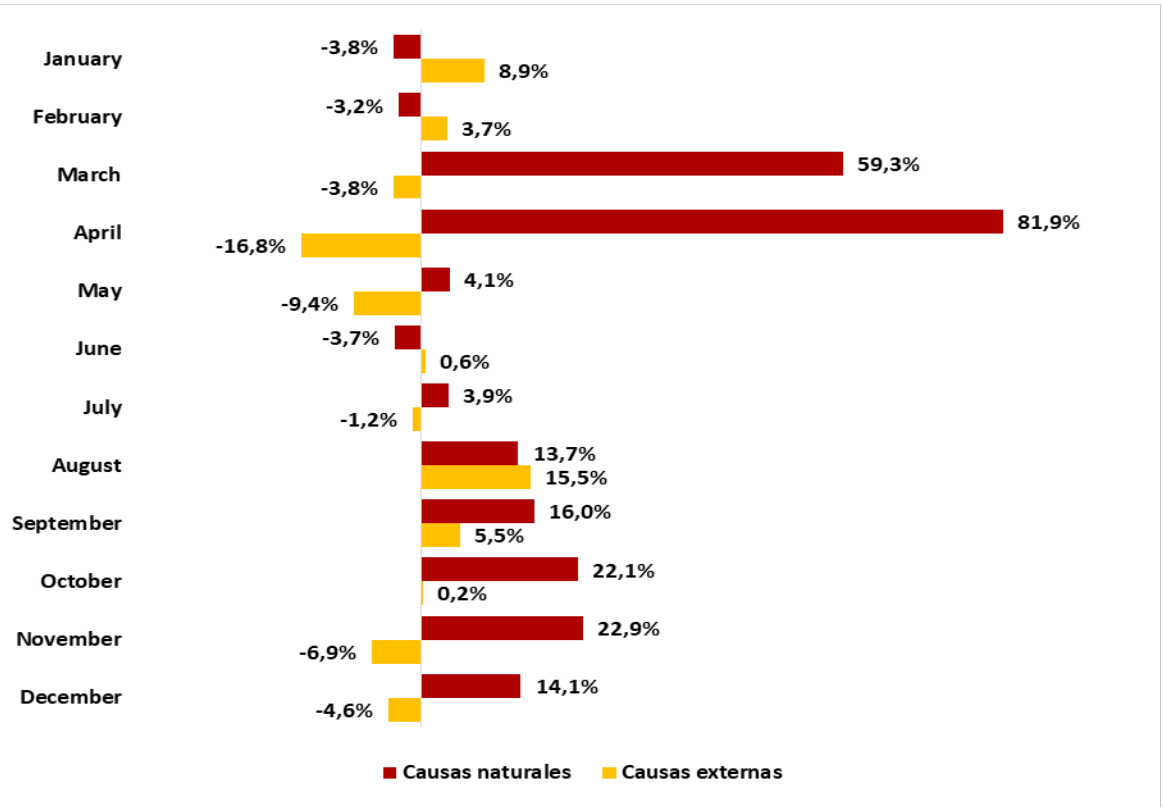
	Year 2020	Year 2019	Variation 2020/2019
Total deaths	493.776	418.703	17,9%
January	43.093	44.615	-3,4%
February	36.623	37.737	-3,0%
March	58.204	37.058	57,1%
April	61.025	34.201	78,4%
May	35.073	33.866	3,6%
June	30.755	31.873	-3,5%
July	34.768	33.551	3,6%
August	36.038	31.671	13,8%
September	34.568	29.916	15,6%
October	39.720	32.770	21,2%
November	42.264	34.706	21,8%
December	41.645	36.739	13,4%

[1] To interpret the information on COVID-19 related deaths in this Statistic, it is important to note that in March 2020, the World Health Organization (WHO) incorporated two new codes into the current International Classification of Diseases (ICD-10): *COVID-19, virus identified* to characterize deaths in which the deceased had been identified as having this pathology and *COVID-19 virus not identified (suspected)* to refer to deaths in which the virus was not identified in the deceased person, but in which the doctor suspected that it could have been present, due to the presentation of symptoms compatible with the disease. Statistics are prepared based on the Medical Death Certificates and the application of the WHO standards. Further information in the methodological note.

The crude mortality rate stood at 1,042.7 deaths per 100,000 inhabitants, an increase of 17.3% per cent over the previous year. The male rate was 1,075.8 deaths per 100,000 men (with an increase of 16.8%) and the female rate was 1,011.0 per 100,000 women (17.8% more than in 2019).

A total of 96.7% of deaths were due to natural causes *(diseases)*. In 2020, 477,698 people died from these causes, 18.7% more than in 2019. In relative terms, the largest increases were recorded in April (81.9%) and March (59.3%). For their part, *external causes* fell by 0.4% in 2020, with April (16.8%) and May (9.4%) showing the greatest decreases.

Deaths according to natural and external causes
Percentage variation 2020/2019



Main causes of death by disease group

The group known as *diseases of the circulatory system* remained the leading cause of death, with 24.3% of the total (and a rate of 253.1 deaths per 100,000 inhabitants), followed by *tumours*, with 22.8% of the total (and a rate of 238.1).

Infectious diseases, which include *COVID-19, identified virus* and *unidentified (suspected) COVID-19* virus, were the third leading cause of death, with 16.4% of the total (and a rate of 170.6). *Respiratory diseases* ranked as the fourth cause of death, with 8.6% of the total and a rate of 89.6 deaths per 100,000 inhabitants.

Compared to the previous year, deaths due to *infectious diseases* increased by 1,220.4% and those caused by *diseases of the circulatory system* rose by 2.8%.

On the contrary, those due to *diseases of the respiratory system* and those caused by *tumors* decreased by 11.0% and 0.3%, respectively.

By sex, *tumours* were the leading cause of death in men (with a rate of 289.8 deaths per 100,000 men) and the second in women (with 188.4 for every 100,00 women). The number of deaths from this cause decreased by 1.0% among men, while it increased by 0.9% in women.

On the other hand, *diseases of the circulatory system* were the first cause of female mortality (264.7 deaths per 100,000) and the second among males (241.1). Deaths from these causes increased 2.6% in men and 2.9% in women.

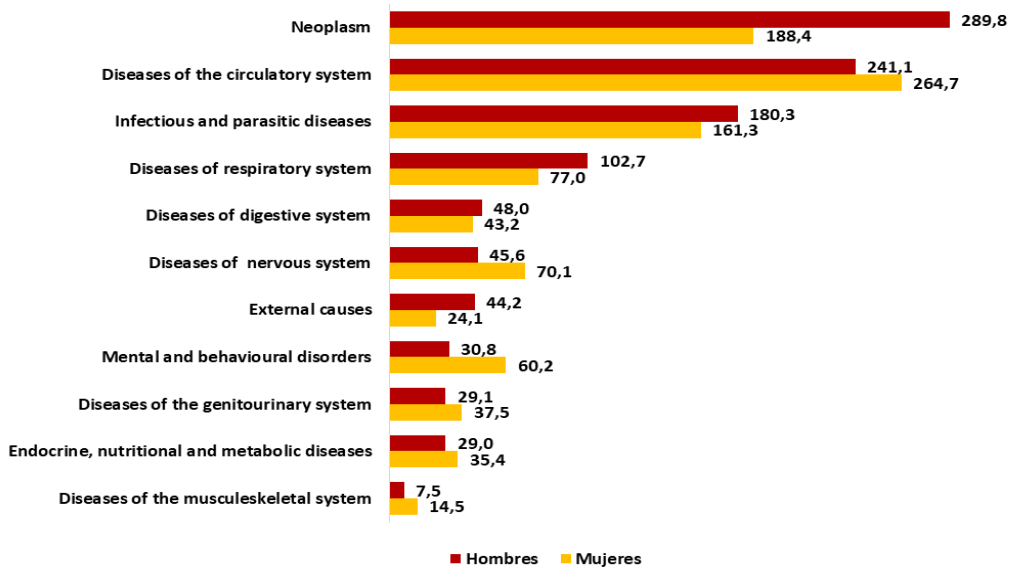
Infectious diseases ranked as the third cause of death in both sexes.

Deaths by ICD-10 chapters. Year 2020
Absolute values and percentages

ICD-10 Chapters	Deaths	%
Total Deaths	493.776	100,0
Diseases of the circulatory system	119.853	24,3
Neoplasm	112.741	22,8
Infectious and parasitic diseases	80.796	16,4
Diseases of respiratory system	42.423	8,6
Diseases of nervous system	27.508	5,6
Mental and behavioural disorders	21.697	4,4
Diseases of digestive system	21.565	4,4
External causes	16.078	3,3
Diseases of the genitourinary system	15.810	3,2
Endocrine, nutritional and metabolic diseases	15.290	3,1
Symptoms,signs and abnormal clinical and laboratory findings	9.475	1,9
Diseases of the musculeskeletal system	5.225	1,1
Diseases if the blood and blood-forming organs and certain disorders involving the immune mechanism	2.062	0,4
Diseases of the skin and subcutaneous tissue	1.902	0,4
Congenital malformations, deformations and chromosomal abnormalities	823	0,2
Certain conditions originating in the perinatal period	518	0,1
Pregnancy,childbirth and the puerperium	10	0,0

(1) Identified and non-identified (suspected) Covid-19 virus is included in the group of infectious and parasitic diseases

Deaths by cause of death by ICD-10 chapters and sex. Year 2020
Crude rates per 100,000 inhabitants



As with the total number of deaths, the number of deaths by groups of main diseases reflects a different trend and variation throughout the year.

Thus, the largest increases in the number of deaths due to *diseases of the circulatory system* and *tumours* occurred during the month of March, with 15.5% and 7.0% more, respectively.

For its part, January was the month with the greatest decrease in deaths from *diseases of the circulatory system* (5.5% less), while it was November in the case of *tumours* (5.9% less).

Main causes of death by ICD-10 chapters
Percentage change 2020/2019

	Diseases of the circulatory system	Neoplasm	Infectious and parasitic diseases	Diseases of respiratory system	Diseases of nervous system
Total deaths	2,8%	-0,3%	1220,4%	-11,0%	5,3%
January	-5,5%	1,2%	-4,5%	-9,7%	-3,0%
February	-3,0%	3,2%	0,7%	-14,5%	-2,3%
March	15,5%	7,0%	2928,5%	27,1%	29,6%
April	3,6%	-4,7%	5322,9%	-8,2%	24,3%
May	-5,1%	-5,3%	843,6%	-33,0%	0,0%
June	-3,7%	-2,6%	140,8%	-26,4%	-2,0%
July	0,7%	4,7%	92,4%	-11,3%	7,4%
August	11,9%	-0,4%	314,3%	10,1%	25,5%
September	7,3%	0,9%	790,4%	-2,4%	5,5%
October	10,5%	0,2%	1360,9%	-9,8%	-1,4%
November	-1,2%	-5,9%	2057,5%	-24,4%	-6,7%
December	6,4%	-1,8%	1215,3%	-31,6%	-8,8%

Main causes of death by age

Mortality increased in all age groups, except those under 20 years of age. The greatest increase was registered among people aged 70 to 79 (20.5% more).

Deaths by age groups. Year 2020
Absolute values and percentage change

	Year 2020	Year 2019	Variation 2020/2019
Total Deaths	493.776	418.703	17,9%
Less than 10 years	1.217	1.369	-11,1%
From 10 to 19 years	568	610	-6,9%
From 20 to 29 years	1.432	1.353	5,8%
From 30 to 39 years	3.159	2.948	7,2%
From 40 to 49 years	9.601	9.004	6,6%
From 50 to 59 years	26.236	24.378	7,6%
From 60 to 69 years	49.503	43.221	14,5%
From 70 to 79 years	91.191	75.704	20,5%
From 80 years and more	310.869	260.116	19,5%

As for causes of death, *perinatal conditions* (55.1% of the total) and *congenital malformations* (23.6%) were the main causes of death among children under one year of age. Compared to 2019, deaths in this age group due to *perinatal conditions* decreased by 11.7%, while those due to *congenital malformations* increased by 1.9%.

Tumours were the main cause of death in the age group between one and 14 years (32.4% of the total) with an increase of 4.4% compared to 2019. Second most common in this age group were external causes (20.7%), which decreased by 20.1%.

For their part, the main causes of death among people aged 15 to 39 were external causes (40.5% of the total) and *tumours* (22.4%), with increases of 1.7% and 6.6% compared to 2019, respectively.

Tumours (38.2% of the total) and *diseases of the circulatory system* (19.4%) were the main causes in the group aged 40 to 79 years, with increases of 0.3% and 3.7%, respectively, compared to 2019.

Finally, among those over 79 years of age, *diseases of the circulatory system* (27.3% of the total) and *infectious diseases* (17.8%) were the main reasons, with increases of 2.4% and 1,368.3%, respectively.

Main causes of death by place where the death occurred

During the year 2020, 266,235 people died in hospitals, 132,664 in their private homes and 73,216 in retirement and nursing homes[2].

The number of deaths in retirement and nursing homes increased by 33.7% compared to the previous year (there were 18,463 more). Deaths increased by 25.7% (27,115 more) in private homes, and by 15.6% (36,027 more) in hospital centres.

These increases in deaths were more pronounced during the months of March and April. In both months the number of deaths increased by 201.4% in residences, 52.1% in homes and 50.6% in hospitals.

The main causes of death by groups of diseases that occurred in hospitals were *tumours* (25.6% of the total), *infectious diseases* - which includes *COVID-19* - (21.3%) and *diseases of the circulatory system* (19.6%). Deaths due to diseases of the respiratory system represented 10.1%.

Deaths in hospital centres due to *infectious diseases* increased 1,068.2%. On the other hand, deaths due to *tumours*, *diseases of the circulatory system* and *diseases of the respiratory system* fell by 8.9%, 3.6% and 15.5%, respectively.

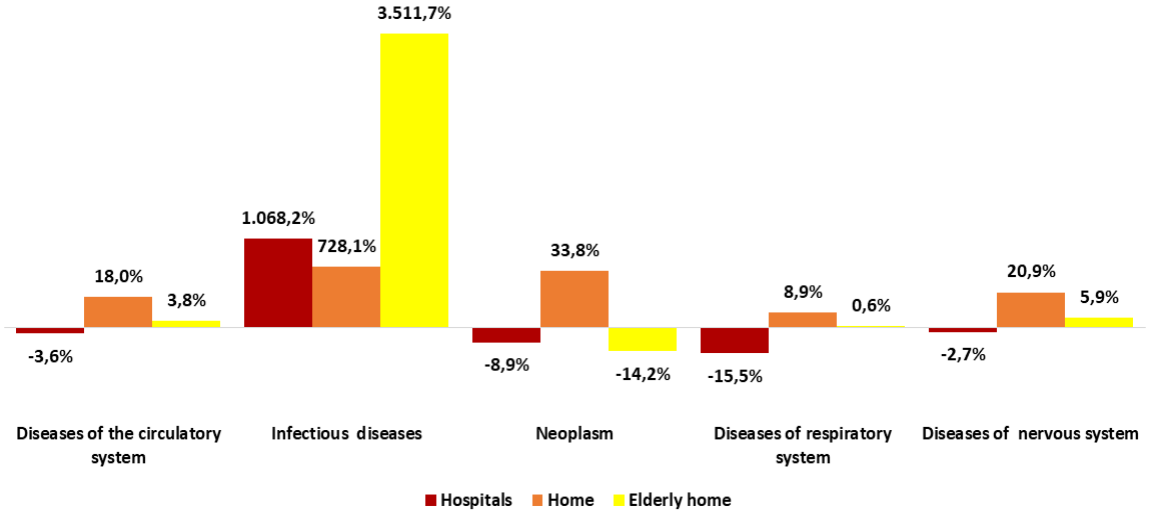
In nursing homes, *infectious diseases* were the main cause of death (24.4% of all deaths), followed by *diseases of the circulatory system* (23.7%). The group of diseases of the nervous system - which includes *Alzheimer's* - ranked third, with 11.3%. Deaths from these causes in residences increased 3,511.7%, 3.8% and 5.9%, respectively.

In private homes, the leading cause of death was *diseases of the circulatory system,* with 33.0% of the total and an increase of 18.0% compared to 2019.

Tumours (26.8% of the total and an increase of 33.8%) and *diseases of the respiratory system* (6.8% of the total and an increase of 8.9%) came afterwards.

[2] People who died elsewhere (12,000 people) and those whose place of death does not appear on the death certificate (9,661 people) are not included.

Main causes of death by ICD-10 chapters and place of occurrence
Percentage change 2020/2019



Most frequent diseases as cause of death

At a more detailed level, *COVID-19, virus identified,* from the group of *infectious diseases*, was the most frequent cause of death (with 60,358 deaths and a rate of 127.5 per 100,000 inhabitants).

COVID-19 doubled the number of deaths from *ischemic heart diseases,* in the *circulatory diseases* group (with 29,654 deaths, a rate of 62.6 and an increase of 1.4% compared to the previous year). In third place were *cerebrovascular diseases,* with 25,817 deaths, 0.4% more than in 2019.

Among the most frequent diseases, the causes of death that increased the most compared to 2019 were *hypertensive diseases* (20.4% more), *diabetes* (17.1%) and *Alzheimer's* (6.4%). In the three cases, the largest increases were recorded during the months of March and April (48.1%, 46.1% and 38.8% more, respectively).

On the other hand, the greatest decreases were in deaths from *chronic respiratory diseases, pneumonia* and *dementia* (7.8%, 6.6% and 5.9% less than in 2019, respectively).

Deaths according to the most frequent causes of death. Year 2020
Absolute values and percentage change

	Total	Men	Women	Total variation 2020/2019	Men variation 2020/2019	Women variation 2020/2019
All diseases	493.776	249.664	244.112	17,9%	17,4%	18,5%
Covid-19 virus identify	60.358	38.917	35.922	..	..	..
Ischaemic heart disease	29.654	18.123	11.531	1,4%	2,3%	-0,1%
Cerebrovascular disease	25.817	11.264	14.553	0,4%	1,6%	-0,5%
Cancer of lung and bronchus	21.893	16.599	5.294	-0,4%	-1,9%	4,4%
Dementia	20.822	6.622	14.200	-5,9%	-10,4%	-3,6%
Cardiac insufficiency	19.358	7.597	11.761	1,7%	2,8%	0,9%
Alzheimer disease	15.571	4.515	11.056	6,4%	3,9%	7,4%
Covid-19 virus non-identify	14.481	6.419	8.062	..	..	..
Hypertensive disease	14.271	4.694	9.577	20,4%	22,5%	19,4%
Acute lower respiratory infections	12.734	9.044	3.690	-7,8%	-8,7%	-5,4%
Diabetes mellitus	11.297	5.084	6.213	17,1%	17,4%	16,9%
Colon cancer	11.131	6.394	4.737	-3,6%	-5,4%	-1,1%
Pneumonia	8.768	4.704	4.064	-6,6%	-2,7%	-10,6%
Cancer of pancreas	7.427	3.824	3.603	1,6%	3,4%	-0,3%
Renal insufficiency	7.351	3.342	4.009	1,7%	0,2%	3,0%

COVID-19, virus identified was the leading cause of death in both sexes, with 140.0 deaths per 100,000 men and 115.4 deaths per 100,000 women.

Ischemic heart disease was the second most common cause of death among men (with a rate of 78.1), followed *by bronchial and lung cancer* (71.5).

In women, the second most common cause was *cerebrovascular disease* (60.3 per 100,000 women), followed by *dementia* (58.9).

Mortality from COVID-19 in 2020

In 2020 there were 60,358 deaths whose cause of death was *COVID-19, virus identified*. Another 14,481 people died of *COVID-19, virus suspected* due to having symptoms consistent with the disease (*unidentified COVID-19*). In March 2020, the World Health Organization incorporated these two *COVID-19* related causes of death into the International Classification of Diseases (ICD-10).

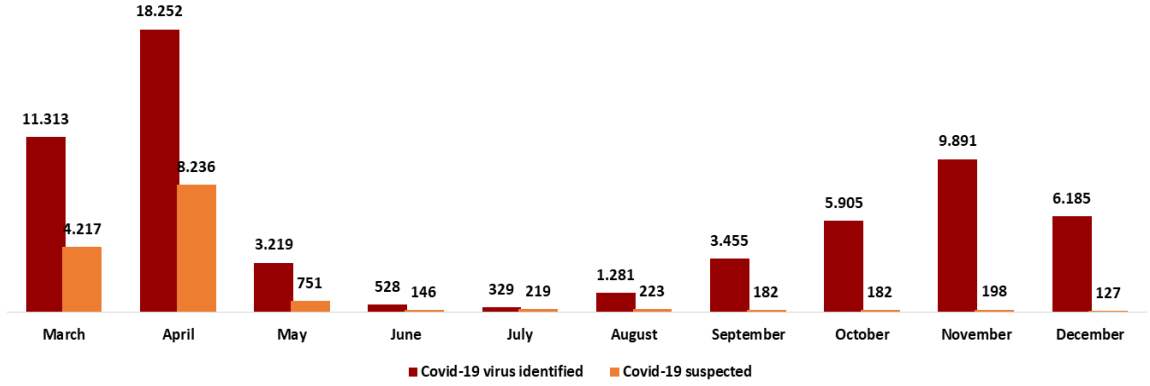
In addition, doctors certified 8,275 deaths in which the cause of death was from other causes, but where *COVID-19* contributed to the death as a comorbidity. In 3,770 cases the doctors identified the presence of COVID-19, and in 4,505 cases its presence was suspected because of symptoms compatible with the disease.

During the months of January and February, no deaths from *COVID-19* were certified. All deaths from this cause occurred thus occurred from March onwards.

The months with the highest number of deaths from *COVID-19, virus identified* were April, with 18,252 deaths (29.9% of the total for that month), March (with 11,313 deaths, 19.4% of the total) and November (with 9,891 deaths, 23.4% of the total).

Regarding deaths from *COVID-19, non-unidentified (suspected) virus,* the months with the most deaths were April (with 8,236), March (4,217) and May (751). From the month of May deaths from this cause decreased significantly.

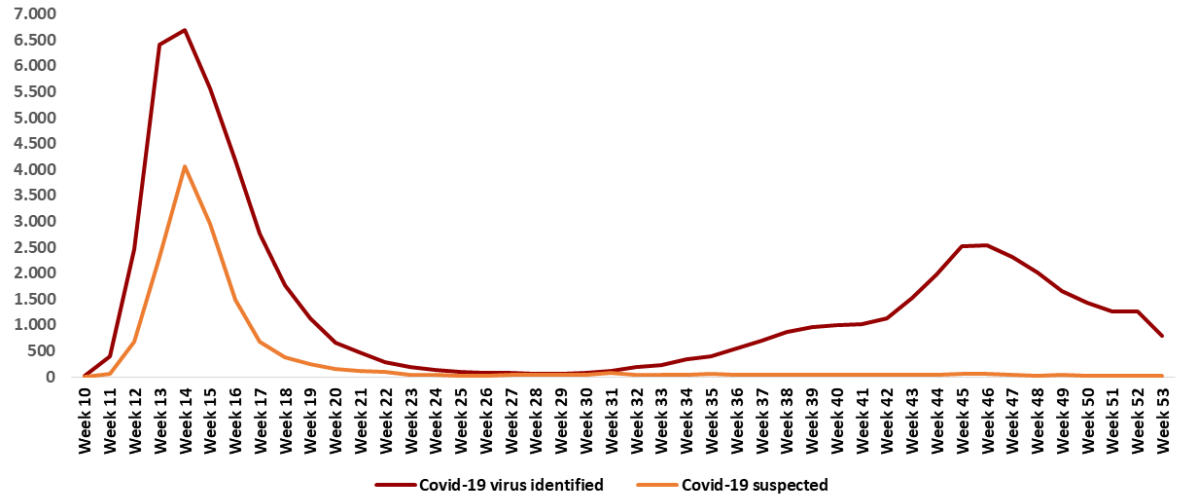
Deaths due to *COVID-19* by months. Year 2020
Absolute Values



In more detail, the week with the highest number of deaths from *COVID-19* was the 14th (from March 30 to April 5), with 6,686 people dying from *COVID-19, virus identified* and 4,060 from *COVID-19, non-identified (suspected*) virus (31.9% and 19.3%, respectively, of the total in that week.

Behind was week 13 (from March 23 to 29), with 6,410 deaths from *COVID-19, virus identified* and 2,305 from *COVID-19 unidentified (suspected) virus,* which accounted for 32.3% and 11, 6% of the total for that week.

Weekly deaths from *COVID-19*
Absolute Values



Deaths due to *COVID-19* by sex and age

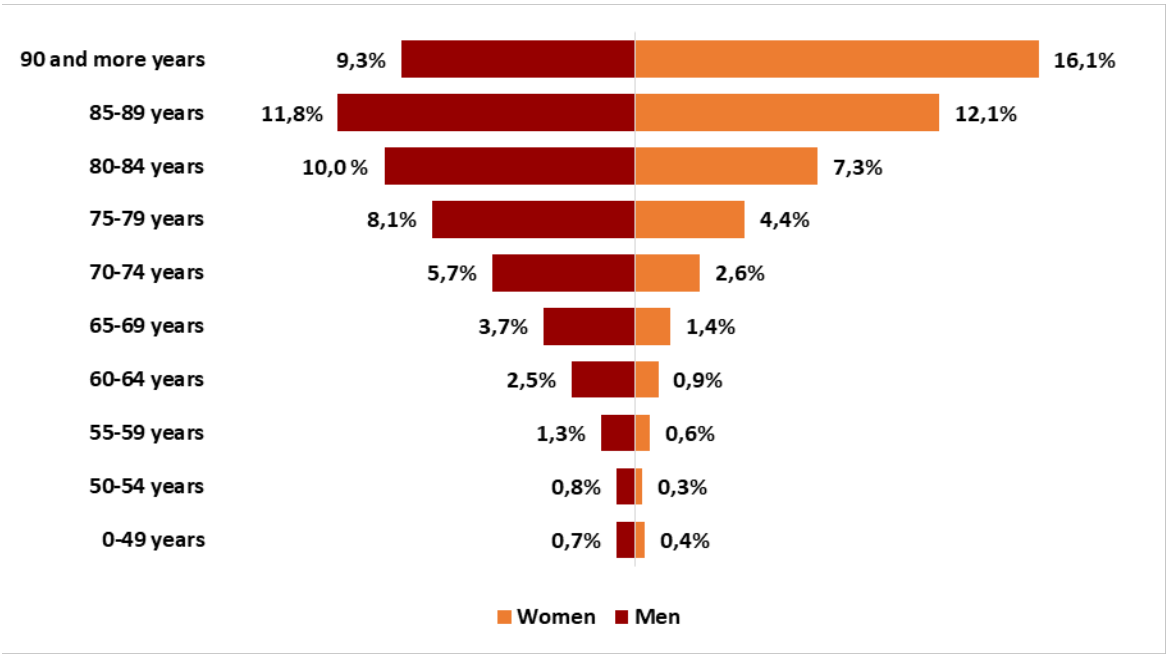
In 2020, 32,498 men and 27,860 women died from *COVID-19, virus identified*. And with *COVID-19 non-identified (suspected) virus*, 6,419 men and 8,062 women died.

These deaths were concentrated among the elderly. A total of 87.3% of those killed by *COVID-19*, *virus identified* and 93.3% of those killed by *COVID-19 non-identified (suspected) virus* were 70 years of age or older.

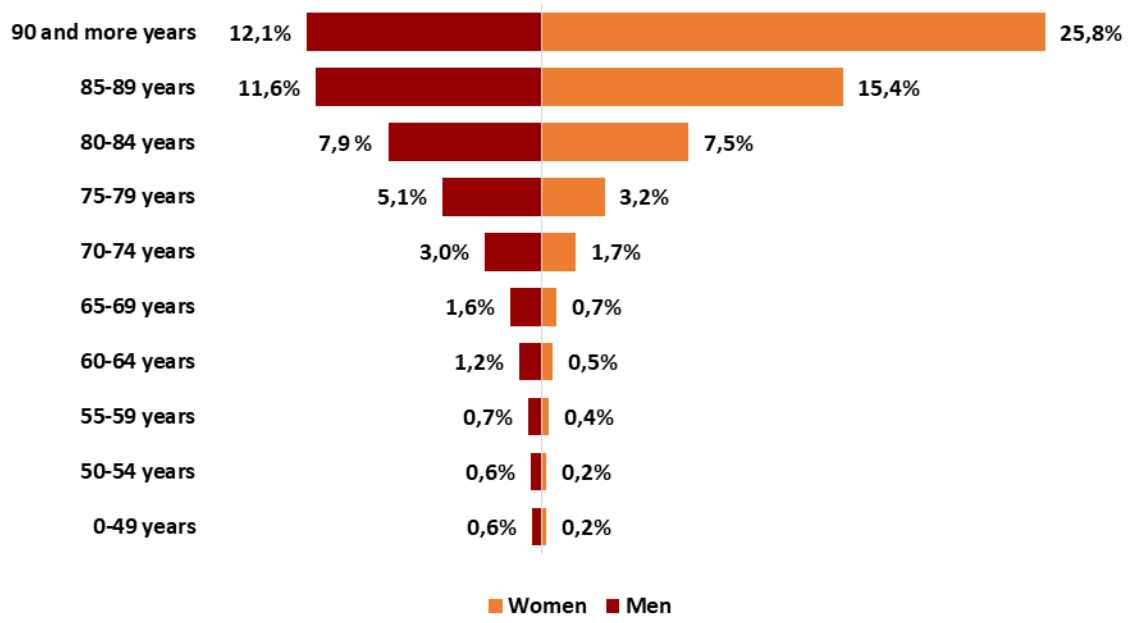
The risk of dying from *COVID-19, virus identified,* measured by age-specific rates, was less than 100 deaths per 100,000 inhabitants up to age 65. From that age onwards, the rates progressively increased until reaching 3,638.4 deaths per 100,000 inhabitants in the group of those 95 years and over.

In the case of *COVID-19, non-identified (suspected) virus,* the rates exceeded 100 deaths per 100,000 inhabitants from the age of 80 onwards. The highest rate occurred in people aged 95 and over (1,518.8).

Distribution of deaths from COVID-19, virus identified by sex and age groups
Percentages



Distribution of deaths from COVID-19, non-identified (suspected) virus by sex and age groups
Percentages



Deaths due to *COVID-19* by place of occurrence

During 2020, the deaths from *COVID-19, virus identified* occurred mainly in hospitals (79.5% of the total).

On the other hand, the highest number of deaths from *COVID-19, non-identified (suspected) virus* occurred in retirement and nursing homes (51.9% of the total).

In hospitals, 47,207 people died from the *COVID-19, virus identified* compared to 10,010 deaths in residences and 2,108 in private homes.

One the other hand, 4,814 people died in hospitals, 7,339 in residences and 1,922 in private homes due to *COVID-19 non-identified (suspected) virus*.

Deaths due to Covid-19 according to place of occurrence and months. Year 2020
Percentages

	Hospitals		Elderly Home		Home	
	Covid-19 virus identified	Covid-19 suspected	Covid-19 virus identified	Covid-19 suspected	Covid-19 virus identified	Covid-19 suspected
TOTAL	100,0%	100,0%	100,0%	100,0%	100,0%	100,0%
March	20,5%	27,2%	9,9%	29,0%	19,9%	33,8%
April	26,9%	45,9%	48,3%	66,8%	16,7%	47,1%
May	4,7%	9,5%	8,7%	2,1%	3,5%	6,3%
June	0,8%	2,0%	1,2%	0,3%	0,9%	1,1%
July	0,5%	3,1%	0,7%	0,3%	0,9%	2,2%
August	2,3%	2,7%	1,4%	0,6%	2,4%	2,1%
September	6,3%	2,7%	2,9%	0,2%	7,0%	1,5%
October	10,5%	2,5%	6,1%	0,2%	12,0%	2,2%
November	16,9%	2,5%	12,8%	0,4%	22,4%	2,5%
December	10,6%	1,9%	8,1%	0,2%	14,2%	1,0%

Most frequent complications and comorbidities in deaths from *COVID-19*

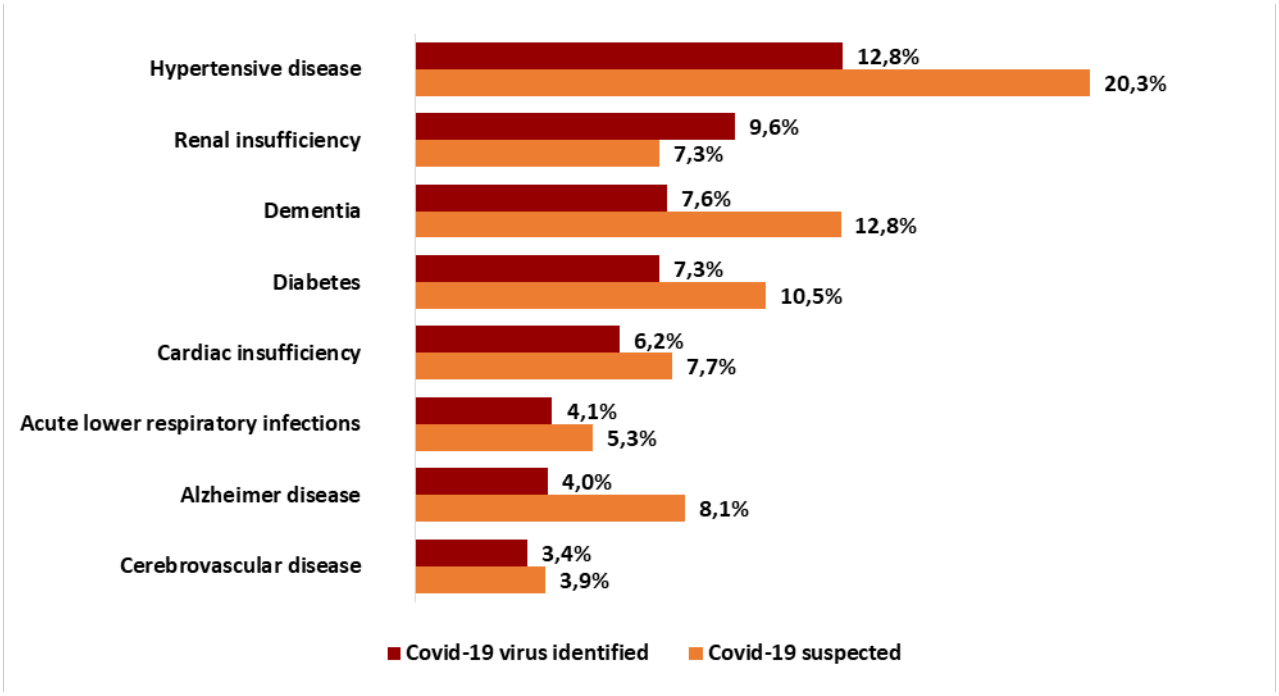
In deaths in 2020, an average of 3.7 illnesses were reported in each certificate. This information allows us to know, in addition to the cause triggering the death, the complications derived from it, as well as the comorbidities of the person who died.

In those who died from *COVID-19, respiratory failure* and *pneumonia* were the most frequent complications reported on death certificates. Specifically, in 57.5% and 32.7% of the total, respectively, of the deaths due to *COVID-19 virus identified,* and in 53.4% and 21.1% due to *COVID-19, non-identified (suspected) virus*.

The main comorbidity of persons who died from *COVID-19*, and which was included in the medical death certificate by doctors, was *hypertensive disease* (12.8% in deaths from *COVID-19, virus identified* and 20.3% in deaths from *COVID-19, virus suspected*).

For its part, *kidney failure* was the second comorbidity in deaths from *COVID-19, virus identified* (9.6% of the total). And *dementia* in deaths from *COVID-19 non-identified (suspected) virus,* with the 12.8% of the total.

Most frequent comorbidities in deaths from COVID-19
Percentages



Most frequent causes of death with *COVID-19* as comorbidity

Information from death certificates also allows us to analyse the most frequent causes of death in which *COVID-19* was not the trigger for death, but was a contributing factor (listed among the comorbidities of the person who died).

In addition to the 60,358 deaths from *COVID-19, virus identified*, this disease was present as a comorbidity in another 3,770 deaths. The main causes of direct death in these deaths were *ischemic heart diseases* (278 deaths), bronchial and lung cancer (263) and *cerebrovascular diseases* (216).

On the other hand, apart from the 14,481 deaths from *COVID-19, non-identified (suspected) virus,* the disease indirectly contributed to 4,505 more deaths as a comorbidity. Among the leading causes of death in deaths from *COVID-19 suspected* as comorbidity were *dementia* (308), *lower respiratory diseases* (259) and *cerebrovascular diseases (238).*

Deaths due to *COVID-19* by Autonomous Communities and Cities

The highest gross rates of deaths from *COVID-19 virus identified* per 100,000 inhabitants during 2020 corresponded to Castilla y León (243.5), Castilla-La Mancha (235.8) and Comunidad de Madrid (215.2) .

For their part, the lowest rates were in the Canarias (18.0), Illes Balears (45.8) and Región de Murcia (48.9).

Castilla-La Mancha (82.4), Castilla y León (79.0) and Comunidad de Madrid (71.3) also registered the highest gross death rates from *COVID-19, non-identified (suspected) virus.*

The lowest gross rates related to this cause were recorded in Región de Murcia (2.1 deaths per 100,000 inhabitants), Galicia (3.1) and Illes Balears (3.5).

Gross mortality rates due to *COVID-19* by Autonomous Communities and Cities
Absolute data and rates per 100,000 inhabitants

		Covid-19 virus identified		Covid-19 suspected	
	Total deaths	Deaths	Crude rate	Deaths	Crude rate
TOTAL	493.776	60.358	127,5	14.481	30,6
Andalucía	78.909	5.821	68,6	696	8,2
Aragón	16.680	2.653	199,3	289	21,7
Asturias, Principado de	14.578	1.513	149,0	260	25,6
Balears, Illes	8.608	557	45,8	43	3,5
Canarias	16.725	403	18,0	98	4,4
Cantabria	6.561	427	73,3	68	11,7
Castilla y León	36.522	5.823	243,5	1.889	79,0
Castilla-La Mancha	26.240	4.817	235,8	1.683	82,4
Cataluña	79.780	12.871	168,1	3.013	39,4
Comunitat Valenciana	49.033	3.161	62,8	651	12,9
Extremadura	12.994	1.099	103,7	290	27,4
Galicia	32.879	1.499	55,5	83	3,1
Madrid, Comunidad de	66.206	14.540	215,2	4.817	71,3
Murcia, Región de	12.362	738	48,9	32	2,1
Navarra, Comunidad Foral de	6.738	1.004	152,8	179	27,2
País Vasco	24.041	2.753	125,7	311	14,2
Rioja, La	3.727	577	182,5	71	22,5
Ceuta	633	59	70,3	4	4,8
Melilla	560	43	51,0	4	4,7

(*) Deaths by Community and Autonomous City where the death occurred

External causes

In 2020 there were 16,078 deaths due to *external causes*, 63 less than in the previous year (0.4%). By sex, 10,257 men died from these causes (0.2% more than in 2019) and 5,821 women (1.4% less).

Suicide remained as the leading cause of external death, with 3,941 deaths, 7.4% more than in 2019.

It was followed by *accidental falls* (with 3,605 deaths and an increase of 9.3%) and *drowning, submersion and suffocation* (with 2,913 and an decrease of 10.3%).

By sex, the main causes of death in men were *suicide* (2,930 deaths and an increase of 5.7% compared to 2019), *accidental falls* (1,898, 7.1% more) and *drowning, submersion and suffocation* (1,467, 12.2% less).

On the other hand, *accidental falls* (1,707 deaths), *drowning, submersion and suffocation* (1,446) and *suicides* (1,011) were the main causes of external death among women. Deaths from *accidental falls and suicides* increased 12.0% and 12.3% respectively, while those due to *drowning, submersion and suffocation* decreased by 8.4%.

A total of 1,463 people (1,168 men and 295 women) died due to *traffic accidents*, which is 20.6% less than in 2019.

As with deaths due to natural causes, deaths due to external causes reflected different trends and variations throughout the year.

Thus, the largest increases in the number of *suicides* occurred during the months of August (34.0% more) and February (28.2%). In April, the number of deaths from this cause fell by 18.2%.

November and October saw the largest increases in the number of deaths due to *accidental falls* (24.1% and 22.5%, respectively).

On the other hand, April and May reflected the greatest decreases in deaths *from traffic accidents*, with 55.6% and 51.0% less, respectively.

Main causes of external death by months
Percentage change 2020/2019

	Suicide	Accidental falls	Drowning, submersion and suffocation	Traffic accidents
Total	7,4%	9,3%	-10,3%	-20,6%
January	12,5%	12,1%	9,5%	0,0%
February	28,2%	6,9%	-5,6%	-7,7%
March	3,1%	16,3%	-7,7%	-44,6%
April	-18,2%	-5,6%	-21,3%	-55,6%
May	6,5%	0,8%	-32,2%	-51,0%
June	8,5%	-8,2%	-6,2%	-27,9%
July	8,2%	1,6%	-0,7%	-18,2%
August	34,0%	10,1%	0,3%	0,7%
September	8,9%	16,1%	-12,1%	-0,6%
October	1,0%	22,5%	-12,7%	-15,1%
November	-5,2%	24,1%	-16,2%	-33,8%
December	2,8%	16,2%	-28,2%	-1,3%

Mortality rates of the main causes by Autonomous Communities and Cities

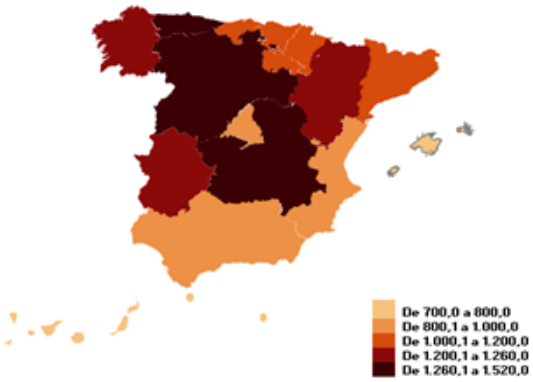
The highest gross death rates per 100,000 inhabitants in 2020 corresponded to Castilla y León (1,513.6), Principado de Asturias (1,432.9) and Castilla-La Mancha (1,264.5). On the other hand, the lowest rates occurred in the Illes Balears (704.4), the Autonomous City of Melilla (714.3) and the Canarias (734.5).

Crude death rates were higher in the territories with a greater elderly population, since there are usually more deaths due to the effect of the age structure of the population. To correct this, the standardised mortality rates[3] are calculated which represent mortality in the Autonomous Community if all of them had the same age composition.

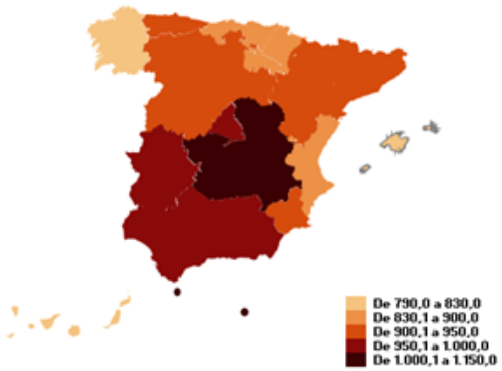
In this case, the regions with the highest standardized rates were in the autonomous cities of Melilla and Ceuta (1,135.6 and 1,102.7, respectively) and in Castilla-La Mancha (1,067.4). For their part, the lowest rates were in Galicia (798.4), Illes Balears (803.9) and Canarias (824.0).

[3] As of 2015, the European standard population is considered as the standard population.

Raw death rates
Deaths per 100,000 inhabitants



Standardized death rates
Deaths per 100,000 inhabitants



In terms of the main causes of death, the highest raw mortality rates from *diseases of the circulatory system* were recorded in Principado de Asturias (370.4 deaths per 100,000 inhabitants), Galicia (352.3) and Castilla y León (345.6).

If the standardized ones are considered, the autonomous cities of Ceuta and Melilla registered the highest mortality rates from *diseases of the circulatory system* (321.6 and 298.5, respectively), followed by Andalusia (282.3).

The highest death rates from *tumours* were recorded in Principado de Asturias (350.8), Castilla y León (317.3) and Galicia (314.4).

On the other hand, the highest standardised mortality rates due to *tumours* were registered in Principado de Asturias (251.9), Extremadura (247.1) and Cantabria (235.6).

Crude death rates and standardised rates of the main causes of death, by Autonomous Community and city of residence. Year 2020
Rates per 100,000 inhabitants

	Diseases of circulatory system		Neoplasm		Infectious and parasitic diseases	
	Crude Rate	Standardised Rate	Crude Rate	Standardised Rate	Crude Rate	Standardised Rate
TOTAL	253,1	219,4	238,1	223,1	170,6	149,8
Andalucía	265,3	282,3	216,0	226,4	90,2	95,5
Aragón	310,6	218,1	275,5	230,4	235,5	168,8
Asturias, Principado de	370,4	229,1	350,8	251,9	193,4	121,1
Balears, Illes	185,3	212,7	189,4	215,7	61,0	70,4
Canarias	201,2	228,9	205,6	224,9	32,7	37,0
Cantabria	278,0	202,6	285,4	235,6	101,3	74,4
Castilla y León	345,6	196,1	317,3	225,3	333,8	192,9
Castilla-La Mancha	269,5	219,9	230,2	214,1	320,5	271,2
Cataluña	223,0	196,6	225,3	216,1	219,6	196,5
Comunitat Valenciana	253,2	233,3	244,4	231,6	88,0	81,5
Extremadura	314,8	245,4	284,7	247,1	150,0	117,7
Galicia	352,3	218,5	314,4	231,4	73,2	46,4
Madrid, Comunidad de	184,1	173,2	193,1	196,0	297,6	287,9
Murcia, Región de	230,3	260,9	204,3	231,0	61,8	70,2
Navarra, Comunidad Foral de	216,8	172,8	241,8	221,6	187,8	152,9
País Vasco	256,2	186,3	284,2	230,9	154,8	113,6
Rioja, La	279,3	204,8	270,5	231,5	218,3	164,5
Ceuta	219,2	321,6	162,0	222,0	101,2	141,4
Melilla	185,1	298,5	156,6	230,0	78,3	128,6

Data Review and Update

The data published today are final. All results are available on INEBase.

Methodological note

The methodology used by the INE in the statistics of deaths by cause of death is based on a detailed analysis of the medical death certificates filled out by doctors at the time of death, as well as the implementation of two international standards; firstly, the current international classification of diseases (ICD, currently version 10, ICD-10) agreed upon under the framework of the United Nations and within the World Health Organization (WHO); and secondly, the standards adopted by the WHO itself, which determine the different causes of death, their comorbidities, complications, etc.

More precisely, the Death Statistics by cause of death is based on the 10th Revision of the International Classification of Diseases (ICD-10) of the World Health Organization (WHO). The determination of the disease that causes death among those reported in the CMD is governed by the rules established by the WHO in volume 2 of the ICD-10. This cause is called the root cause.

In the case of those who died in the first 24 hours of life, the information from the CMD is complemented by that of the Statistical Birth Bulletin (SBB). The source of information for deaths with legal intervention is the Statistical Legal Death Bulletin completed by the courts or the information directly provided by the Institutes of Legal Medicine and Forensic Sciences (IMLCF). In both cases, the information is provided through a web application designed by the INE.

Furthermore, within the European Union, this Statistic is mandatory for the Member States. It is regulated by Regulation (EC) no. 1338/2008 of the European Parliament and of the Council, of December 16, 2008, on community statistics on public health and health and safety at work, and it is subsequently developed by Regulation (EU) no. 328/2011 of the Commission, of April 5, 2011 with regard to statistics on causes of death.

To interpret the information on deaths related to *COVID-19* in this Statistic, it is important to understand that the section of the medical death certificate in which the doctor reports the causes of death consists of two parts.

- Part 1 contains the chain of events (diseases or complications) leading to death, starting from the initial or fundamental cause: that is, the cause that initiates said chain of events and is therefore the direct trigger for death.
- Part 2 includes other diseases that, while not being a direct cause of death, did contribute to it. These are generally the comorbidities of the deceased person.

When a new disease arises, the WHO assigns it an ICD-10 emergency code. In the case of *COVID-19,* the WHO established the ICD-10 emergency code “U07.1 COVID-19, virus identified” and “U07.2 COVID-19, virus suspected”.

Both codes have been used to code *COVID-19* as a cause of death. The WHO guideline is to code *COVID-19* as U07.1, except in cases where doctors have indicated the terms “probable” or “possible” in the certificate, in which case it should be coded with U07.2.

Type of operation: annual continuous statistics.

Population scope: deaths occurring in the national territory.

Geographical scope: the entire national territory.

Reference period for the results: the calendar year.

Reference period for the information: date on which death occurs.

Collection method: statistical form based on an administrative act.

For more information the methodology can be accessed at:

https://www.ine.es/en/daco/daco42/sanitarias/metodologia_00_en.pdf

The standardized methodological report is at:

https://www.ine.es/dynt3/metadatos/en/RespuestaDatos.html?oe=30417

INE statistics are produced in accordance with the Code of Good Practice for European Statistics, which is the basis for the institution's quality policy and strategy. For more information see the section on Quality at INE and the Code of Best Practices on the INE website.