List of causes of death for Japan

1 History

Japan has a long history of the list of deaths. The first classification in the country was set forth in 1875 with 11 items categorized anatomically. At the global level, the international list of death was adopted at a conference of the International Statistical Institute in 1893 and the first International congress for revisions in the international list was held in 1900, where the first ICD was adopted and it was agreed that it must be revised every 10 years. In the same year, Japan adopted the first revision of the ICD. Since then, we have been appropriately applying it to Japan's death statistics, with due consideration to the international classification.

The trends in death classification from 1899, when adjustments were made in Vital Statistics due to the establishment of the Family Registration Act, are shown in the table below.

(Reference)　　　　　　　　　　Trends in International Classification of Diseases and Death Causes

Conference for the Revision of the International Lists of Diseases and Causes of Death		Competent authority		Year of application in Japan
		International	Japan	
First	1900	International Statistical Institute	Cabinet Bureau of Statistics	（ 1899 年 ～ 1908 年 ）
Second	1909	International Statistical Institute	Cabinet Bureau of Statistics	（ 1909 年 ～ 1922 年 ）
Third	1920	International Statistical Institute	Cabinet Bureau of Statistics	（ 1923 年 ～ 1932 年 ）
Fourth	1929	International Statistical Institute and the League of Nations	Cabinet Bureau of Statistics	（ 1933 年 ～ 1943 年 ）
Fifth	1938	International Statistical Institute, and the League of Nations	Health Statistics Department, Prevention Bureau, Ministry of Health and Welfare	（ 1946 年 ～ 1949 年 ）
Sixth	1948	World Health Organization (WHO)	Statistical Survey Department, Ministry of Health and Welfare	（ 1950 年 ～ 1957 年 ）
Seventh	1955	World Health Organization (WHO)	Statistical Survey Department, Ministry of Health and Welfare	（ 1958 年 ～ 1967 年 ）
Eighth	1965	World Health Organization (WHO)	Statistical Survey Department, Ministry of Health and Welfare	（ 1968 年 ～ 1978 年 ）
Ninth	1975	World Health Organization (WHO)	Statistical Survey Department, Ministry of Health and Welfare	（ 1979 年 ～ 1994 年 ）
Tenth	1989	World Health Organization (WHO)	Statistical Survey Department, Ministry of Health and Welfare	（ 1995 年 ～ 2005 年 ）
Tenth	2003	World Health Organization (WHO)	Statistics and Information Department, Ministry of Health, Labour and Welfare	（ 2006 年 ～ 2016 年 ）
Tenth	2013	World Health Organization (WHO)	Director-General for Statistics, Information Policy and Policy Evaluation, Ministry of Health, Labour and Welfare	（ 2017 年 ～

The list of deaths adopted by Japan from 1995, was adopted in the 43rd World Health Assembly of the World Health Organization (WHO) in 1990. WHO recommended the use of ICD-10 to its member countries from 1993. Based on its International Statistical Classification of Diseases, Injuries and Causes of Death, Japan was using the detailed list of statisitical classification of diseases by adding Japan-specific subdivisions to ICD-10 and a List of causes of death aggregating the Japanese classification (General

Affairs Agency Notification No. 75 of October 12, 1994). Japanese classification and list of causes of death based on Japan ICD-10 (Version: 2003) (Ministry of Internal Affairs and Communications Notification No. 1147 of October 7, 2005) was used from 2006 and Japanese classification and list of causes of death based on Japan ICD-10 (Version: 2013) (Ministry of Internal Affairs and Communications Notification No. 35 of February 13, 2015) is being used from 2017.

2 Underlying cause of death and rules for selection of cause of death

Mortality tabulation is based on the Death Certificate. Therefore, to include in the Death Certificate all factors that lead to the death, the 20th World Health Assembly defined the cause of death to be mentioned in the Death Certificate as "The disease or injury which initiated the train of morbid events leading directly to a person's death or the circumstances of the accident or violence which produced the fatal injury" in 1967. Before this, it was agreed in the Sixth Conference for Revision in 1948 that death causes for primary tabulation must be underlying causes of death.

WHO stated that from the perspective of death prevention, it is important to either break the train of pathological events or cure the disease at some point. The most effective purpose of public health is to prevent the causes through its initiatives. For this purpose, it defined underlying causes of death as follows

① The disease or injury which initiated the train of morbid events leading directly to a person's death

② The circumstances of the accident or violence which produced the fatal injury

Furthermore, to select the underlying cause of death, WHO has established and recommends an international format of Death Certificates and a specified procedure for selection of death cause to its member countries. Japan follows these recommendations.

The procedure for selection of underlying death cause sets forth complicated rules for selecting the underlying cause of death. However, Japan applies these procedures in accordance to the circumstances noted in each death certificate prepared by the doctors and finally selects and decides the underlying cause of death for tabulation.

The format of the death certificate divides the column for noting the cause of death into columns I and II. Column I is meant for noting the train of pathological events that led to death, including the direct cause. Column II is meant for noting other major pathological events that gave rise to death.

If only one disease name is mentioned as the death cause in the death certificate, then the category which that disease belongs to may be considered the underlying cause of death. However, even if the disease name is same, the category may change depending on many conditions, such as age, gender, congenital or non-congenital conditions and details written in the surgery and anatomy column.

Therefore, the underlying cause of death is determined after grasping all the information noted in the death certificate.

If two or more disease names are mentioned in the death certificate, then only one underlying death cause must be selected for tabulation. If the name of the disease that directly caused death is noted at the top in column I of the death certificate and other diseases are noted correctly in the order of the causal relationship, then the category of the disease or injury mentioned at the bottom of column I is considered the underlying cause of death. However, details stated in the death certificates vary widely because the circumstances of death are different for each deceased person. Therefore, the final decision on the underlying cause of death is taken after confirming all information on a combination of disease names, place and column in which it is mentioned, complications, surgery or anatomy as well as place and circumstances of death, and judging or applying the procedure for selection of underlying death cause suited to the circumstances of each.

Apart from defining terminologies, format of death certificate and standards for selecting death cause for perinatal deaths, WHO also recommends preparing cross-tables for analyzing major diseases or conditions affecting children and mothers. Although Japan has not adopted the death certificate format recommended by WHO, we have added many of the items in the format into our death certificate and stillbirth certificate to create a cross-table as recommended.

For determining the cause for stillbirth, we decided to select the underlying cause by considering the child's and month's conditions as one from the time of the adoption of ICD-10. We also have prepared cross-tables for both child and mother by selecting the underlying death cause from their respective conditions.

Please refer to Japan ICD-10 (Version: 2013) Volume 1, 2 and 3 for detailed information on selection of underlying death cause and list of deaths.

3 Lists

Based on the detailed list of statistical classification of diseases, injuries and causes of death for Vital Statistics (the detailed list of statistical classification of diseases, injuries and causes of death), the following lists are available for various purposes. These lists have been revised to incorporate Japan ICD-10 (Version: 2013) (January 2017). There are changes in classification codes and methods of selecting death cause in these revisions and it is important to note that a simple comparison with the lists used before 2016 is not possible.

（1）The detailed list of statistical classification of diseases, injuries and causes of death

The detailed list of statistical classification of diseases, injuries and causes of death used for Vital Statistics is based on further subdivisions added to the Japanese classification for the purpose of the Vital Statistics.

The subdivisions added to the international classification as Japanese

classification are represented by a small letter in the 5th digit place. The subdivisions added for Vital Statistics have a numerical in the 4th digit place and capital letter in the 5th digit place.

Detailed information about the classification is available on e-Stat "Classification table" (Volume 3 of the Reports until 2016).

（2）List of death causes（Condensed list of causes of death） for Japan

To gain an overview of the composition of death causes in Japan, we have created lists based on the detailed list of statistical classification of diseases, injuries and causes of death while referring to WHO's list for death tabulation.

The classification of the causes of death includes causes that have led to deaths over a certain number or causes that interest the people of the country and researchers even though the number of deaths is small, while also paying due consideration to continuity and other factors. A 5-digit classification code has been set for the items. The first 2 digits follow the chapter structure of ICD-10, the third digit represents an intermediate classification integrating some items and the last 2 digits represent reference numbers. Detailed information about the classification is available on e-Stat "Classification table," ("Reference Table" in Volume 1, and Volume 3 of the Reports until 2016).

（3）Selected list of selected causes of death for Japan

For death causes in which there is high social interest, selections were made from the condensed list of causes of death and continuity with ICD-9 was also considered.

The selection of classification items is based on the top 15 diseases by number of deaths in the condensed list of causes of death. Moreover, malignant neoplasm, heart diseases, cerebrovascular diseases and accidents by external causes are further classified into subdivisions because of their social significance. The subdivisions for malignant neoplasm are based on the top 10 reasons of death by site and the sites for which cancer screening is conducted under Health Promotion Services. The subdivisions for heart diseases, cerebrovascular diseases and accidents by external causes were selected by considering causes that led to deaths more than a certain number.

Tuberculosis was added because of high social interest.

Detailed information about the classification is available on e-Stat "Classification table" ("Reference Table" in Volume 1, and Volume 3 of the Reports until 2016).

（4）Table of yearly trends in causes of death

The main purpose of this table is to observe the yearly trends in death cause. It was partially revised to include major causes of death in ICD-9, based on the trends

in major death causes since 1899.

Detailed information about the classification is available on e-Stat "Classification table" (Reference Table in Volume 1 of the Reports until 2016).

(5) List of causes of infant deaths (Condensed list of causes of infant death)

WHO recommends creating a list of death cause for infant death up to 5 years of age. The proportion of infant mortality up to 5 years of age is high in Japan and importance is being placed on medical and administrative measures to reduce infant deaths. Therefore, the list has been made for infant deaths only.

The selection of classification items is based on the same view as the condensed list of causes of death, but characteristics of infant deaths were also considered. Items such as "Malignant neoplasm" were simplified and "Diseases arising in perinatal period" and "Congenital malformation, deformation and chromosomal abnormality" were classified in detail. Asthma and sudden infant death syndrome were also added.

Detailed information about the classification is available on e-Stat "Classification table" ("Reference Table" in Volume 1, and Volume 3 of the Reports until 2016).

(6) List of infectious diseases

Because the proportion of deaths due to infectious diseases kept decreasing, part of the infectious diseases were omitted from WHO's list for death tabulation in ICD-10 (Version: 1990), which was applied in 1995, to adapt to the times and were similarly omitted from Japan's condensed list of causes of death as well. However, the category was added again in the same year because there was a need to grasp the conditions related to infectious diseases.

For selecting the classification items, legal notification was made obligatory, and consideration was also given to grasping the trends in diseases requiring health measures and easy comparison with international data.

Moreover, the name of the category was changed to "Act on the Prevention of Infectious Diseases and Medical Care for Patients with Infectious Diseases" (Act No. 114 of 1998) (the Infectious Diseases Control Law) from 1999. The names are based on Enforcement Order for Infectious Diseases Act (Cabinet Order No. 420 of 1998), Regulation for Enforcement of the Infectious Diseases Act (Ordinance No. 99 of 1998 of the Ministry of Health and Welfare) and the Tuberculosis Prevention Act (Act No. 96 of 1951) and do not necessarily correspond with ICD-10. with Infectious Diseases Act and.

Moreover, the categories were changed in 1999, 2003, 2007, 2008, 2012, 2013, 2015, 2016, 2017 and 2018 due to revisions in the Infectious Diseases Control Law and further revised due to the application of Japan ICD-10 (Version: 2003) in 2006 and Japan ICD-10 (Version: 2013) in 2017.

Detailed information about the classification is available on e-Stat "Classification table," ("Reference Table" in Volume 1, and Volume 3, of the Reports until 2016).

(7) Classification items used in leading causes of death and leading causes of infant death

Major death causes were selected from the condensed list of causes of death and condensed list of causes of infant death.

Detailed information about the classification is available on e-Stat "Classification table," ("Reference Table" in Volume 1 of the Reports until 2016).

(8) Classification of perinatal deaths and foetal deaths

ICD-10 takes cause of both perinatal deaths and foetal deaths as the result of integrated child's condition and mother's one and choose one condition out of two for the decision of cause of deaths. In addition, the most serious condition for causing death is chosen from each side.

It also would be possible to analyse the causal relation between two sides and product the cross table of mother-child condition.

Since ICD-9 we have been using the detailed list of statistical classification of diseases to determine cause of death because we do not establish original classification list for that.

Mother's condition: refer to P00-P04 and P99, P99 means nothing has wrong with mother's condition, of the detailed list of statistical classification of diseases, injuries and causes of death.

Child's condition: refer to the detailed list of statistical classification of diseases, injuries and causes of death except the above, though most are included in "Chapter XVI certain conditions originating in the perinatal period", "Chapter XVII congenital malformations, deformations and chromosomal abnormalities".

疾病、傷害及び死因統計分類の分類体系

全身症

Ⅰ　感染症及び寄生虫症（A00－B99）
- 腸管感染症（A00－A09）
- 細菌性感染症（A15－A49）
- 主として性的伝播様式をとる感染症（A50－A64）
- スピロヘータ，クラミジア，リケッチア症，性的伝播様式をとるものを除く（A65－A79）
- ウイルス感染症（A80－B34）
- 真菌症（B35－B49）
- 原虫疾患，ぜん＜蠕＞虫症，その他の動物寄生症（B50－B89）
- 感染症及び寄生虫症の続発・後遺症（B90－B94）
- 細菌・ウイルス及びその他の病原体（B95－B98）
- その他の感染症（B99）

Ⅱ　新生物＜腫瘍＞（C00－D48）
- 悪性新生物＜腫瘍＞（C00－C97）
    - 原発性（C00－C75）
    - 続発性及び部位不明（C76－C80）
    - リンパ・造血組織（原発性）（C81－C96）
    - 多部位（C97）
- 上皮内新生物＜腫瘍＞（D00－D09）
- 良性新生物＜腫瘍＞（D10－D36）
- 性状不詳又は不明の新生物＜腫瘍＞（D37－D48）

Ⅲ　血液及び造血器の疾患並びに免疫機構の障害（D50－D89）
- 貧血（D50－D64）
- 凝固障害，紫斑病及びその他の出血性病態（D65－D69）
- 血液及び造血器のその他の疾患（D70－D77）
- 免疫機構の障害（D80－D89）

Ⅳ　内分泌，栄養及び代謝疾患（E00－E90）
- 甲状腺障害，糖尿病その他の内分泌腺障害（E00－E35）
- 栄養失調症，その他の栄養欠乏症，肥満（症）その他の過栄養（E40－E68）
- 代謝障害（E70－E90）

解剖学的系統別の疾患

- Ⅴ　精神及び行動の障害（F00－F99）
- Ⅵ　神経系の疾患（G00－G99）
- Ⅶ　眼及び付属器の疾患（H00－H59）
- Ⅷ　耳及び乳様突起の疾患（H60－H95）
- Ⅸ　循環器系の疾患（I00－I99）
- Ⅹ　呼吸器系の疾患（J00－J99）
- Ⅺ　消化器系の疾患（K00－K93）
- Ⅻ　皮膚及び皮下組織の疾患（L00－L99）
- ⅩⅢ　筋骨格系及び結合組織の疾患（M00－M99）
- ⅩⅣ　腎尿路生殖器系の疾患（N00－N99）

分娩・奇形・新生児疾患

ⅩⅤ　妊娠，分娩及び産じょく＜褥＞（O00－O99）
- 流産（O00－O08）
- 高血圧性障害及び主として妊娠に関連するその他の母体障害（O10－O48）
- 分娩，分娩の合併症及び主として産褥に関連する合併症（O60－O92）
- その他の産科的病態，他に分類されないもの（O94－O99）

- ⅩⅥ　周産期に発生した病態（P00－P96）
- ⅩⅦ　先天奇形，変形及び染色体異常（Q00－Q99）

ⅩⅧ　症状，徴候及び異常臨床所見・異常検査所見で他に分類されないもの（R00－R99）
- 症状及び徴候（R00－R69）
- 検査の異常所見（R70－R94）
- 診断名不明確及び原因不明の死亡（R95－R99）

ⅩⅨ　損傷，中毒及びその他の外因の影響（S00－T98）
- 部位別の損傷（S00－S99）
- 多部位又は部位不明の損傷（T00－T14）
- 自然開口部からの異物侵入の作用（T15－T19）
- 熱傷及び腐食（T20－T32）
- 凍傷（T33－T35）
- 薬物による中毒及び薬用を主としない物質の毒作用（T36－T65）
- 外因のその他及び詳細不明の作用（T66－T78）
- 外傷の早期合併症（T79）
- 外科的及び内科的ケアの合併症，他に分類されないもの（T80－T88）
- 損傷，中毒及びその他の外因による影響の続発・後遺症（T90－T98）

ⅩⅩ　傷病及び死亡の外因（V01－Y98）
- 交通事故（V01－V99）
- 不慮の損傷のその他の外因（W00－X59）
- 故意の自傷及び自殺（X60－X84）
- 加害にもとづく傷害及び死亡（X85－Y09）
- 不慮か故意か決定されない事件（Y10－Y34）
- 法的介入及び戦争行為（Y35－Y36）
- 内科的及び外科的ケアの合併症（Y40－Y84）
- 傷病及び死亡の外因の続発・後遺症（Y85－Y89）
- 他に分類される傷病及び死亡の原因に関係する補助的因子（Y90－Y98）

- ⅩⅪ　健康状態に影響を及ぼす要因及び保健サービスの利用（Z00－Z99）
- ⅩⅫ　特殊目的用コード（U00－U99）

注：　第ⅩⅪ章は人口動態統計には用いない。