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Cause of Death of Nuns in the United States During the Calendar Year 1963

(A Preliminary Report)

JAMES T. NIX, M.D.*

The Committee on Health Care of Clergy and Religious of the National Federation of Catholic Physicians' Guilds working with The Catholic Hospital Association is studying the causes of death of nuns in the United States during the calendar year 1963. Two hundred sixty-one communities with a total membership of 15,684 are cooperating in this survey. During the first four months of this year preliminary data has been obtained on 366 reported nun deaths. The average age of these nuns at the time of death was 75 years. Sixty percent of these nuns were teachers, 18% were in nursing and allied medical assignments, 10% were domestics, and 8% had miscellaneous assignments. Primary causes of death included:

- Cardiac: 23%
- Cancer: 23%
- Pneumonia: 14%
- Cerebro vascular accident: 7%
- Pulmonary embolism: 3%
- Trauma: 3%
- Tuberculosis: 1%
- Postoperative: 1%

Three-fourths of the deaths attributed to trauma were due to hip fracture.

Twenty-six percent of the cases collected were autopsied. Organ distribution of the cancer deaths included:

- Colon and rectum: 13 cases
- Breast: 6 cases
- Stomach: 5 cases
- Ovary: 3 cases
- Lung: 3 cases
- Uterine fundus: 1 case

The uterine fundus cancer was an incidental finding at autopsy.

*Dr. Nix is chairman of the Federation Health Care Committee engaged in this program.

HEALTH FINDINGS OF THE 1962 MORTALITY SURVEY

Religious Clergy in the United States

CON J. FECHER, PH.D.*

The Mortality Survey of Religious Clergy (Catholic) was completed in 1962 and considered 32,000 members of 45 religious communities including Jesuits, Benedictines, Franciscans, Dominicans and other major religious orders of men in the United States from 1900 to 1959. How long has been the life span of religious men since the turn of the century? It is to be noted when comparing the life table of 1905 with that of 1955 a young man of age 20 years beginning his life work in the cause of Christ at any time during the early period could expect to live an average life span of an additional 44.5 years, while one beginning his work at the same age in the last ten years might expect to devote an additional 52.5 years in his career. The gain of 8 years, no doubt, was mainly due to the control and almost complete elimination of tuberculosis and other communicable diseases at all ages.

Does the average life span of religious compare favorably with that of men in general? The nearest comparable group would be that of the white males of our country based on the 1901-1910 registration area. They had a life expectancy of an additional 42.4 years at age 20 in this period while a group of similar white males for the year 1957 indicated 49.9 additional years or approximately a gain of 7.5 years.

It is revealing to note that men in religious life have 2.6 years longer life span at age 20 than white men in other walks of life. At first glance it might appear that further improvement in health of men in religious life is not a serious problem or a need for further study. On the contrary, facts indicate that the age spread from 35 to 50 needs intensive exploration because of a higher mortality. In no small measure can we ask what is chiefly responsible for this odd and disturbing mortality rate in the middle and later life period.

*Other studies of Dr. Fecher have appeared in this journal. He is the statistician for the Health Care of Religious Program for our Federation.