

## The difference between healthy life expectancy and life expectancy at birth in men is smaller than that in women in populations with high life expectancy

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The World Health Organization (WHO) defines healthy life expectancy as the “average number of years that a person can expect to live in ‘full health’”. I read the paper by Van Oyen et al. (2013) with interest, because they elucidated gender differences in healthy life expectancy at birth (HLE<sub>b</sub>) in European Union (EU) countries by selecting mortality and disability as the contributing factors. They adopted meta-regression analysis as a statistical procedure, and clarified that there was an advantage in men’s HLE<sub>b</sub> as life expectancy at birth (LE<sub>b</sub>) increased. They relied on the procedure by Jagger et al. (2008), which was widely accepted in studies on health inequalities in EU countries (Lagiewka 2012; Robine et al. 2013).

HLE<sub>b</sub> in all over the countries has been reported (World Health Statistics 2007; Salomon et al. 2012), and Japan had the highest rank of HLE<sub>b</sub> in both the genders. Using World Health Statistics (2007), I could also present the advantage in men’s HLE<sub>b</sub> against women as life expectancy at birth (LE<sub>b</sub>) increased. Namely, the HLE<sub>b</sub> against the LE<sub>b</sub> in each country was estimated by simple regression analysis with LE<sub>b</sub> as an independent variable and HLE<sub>b</sub> as a dependent variable.

The regression equation became  $HLE_b = 0.925 \times LE_b - 4.5089$  in women, and  $HLE_b = 0.9687 \times LE_b - 6.2672$  in men (Fig. 1). Using these equations, the HLE<sub>b</sub> in women at 40, 60, and 80 years of LE<sub>b</sub> became 32.49, 50.99, and 69.49 years, respectively. In men, the HLE<sub>b</sub> at 40, 60, and 80 years of LE<sub>b</sub> became 32.12, 51.50, and 70.87 years, respectively. The difference between HLE<sub>b</sub> and LE<sub>b</sub> in men became smaller than that in women as LE<sub>b</sub>

is larger, which was in agreement with those by Van Oyen et al. (2013).

LE<sub>b</sub> has increased each year, and women live longer than men in most countries. Seifarth et al. (2012) over-viewed the past reports on biological mechanisms of gender difference in LE<sub>b</sub> and extracted factors such as X-chromosome inactivation, telomere attrition, mitochondrial inheritance, responses to stress, immune function, and metabolic substrate. In addition to these elements, Regan and Partridge (2013) speculated the gender gap on longevity from the view point of steroid hormone and nutrient-sensing signaling pathways.

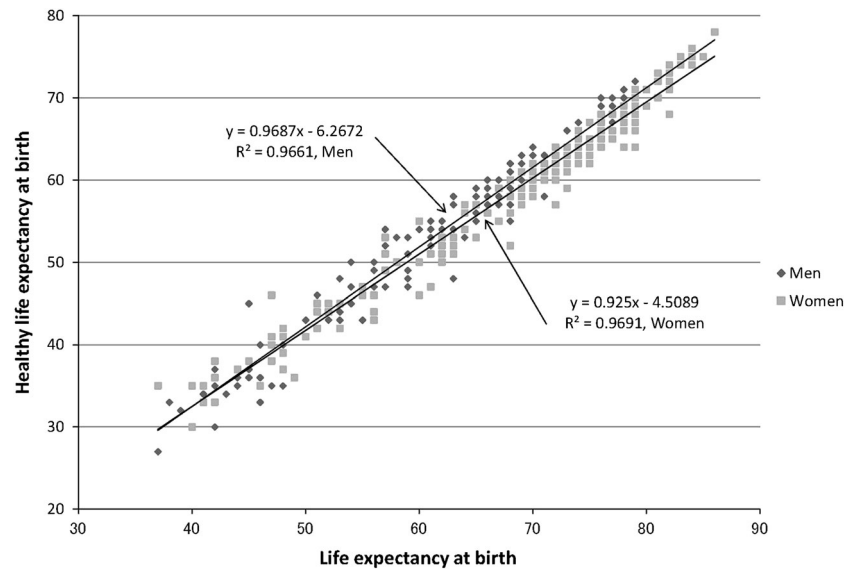
HLE<sub>b</sub> in women is also longer than in men in many countries (Baerlocher 2007), and HLE<sub>b</sub> reflects successful aging. But in countries with higher LE<sub>b</sub>, the difference between LE<sub>b</sub> and HLE<sub>b</sub> in men becomes smaller than that in women. Recently, Karcharnubarn et al. (2013) reported the change of HLE in Thailand using national surveys during 2002 and 2007. They calculated HLE/LE in each age and sex, and HLE/LE in men was higher than that in women in every generation. They used three types of HLE, and every indicator showed the same trend, which was in concordance with my study outcome. Furthermore, Harding et al. (2013) reported that employment in later life was associated with lower mortality, and Mackenbach and Looman (2013) presented evidence that economic and political conditions also significantly correlated with the changing patterns of mortality in Europe. These factors should be checked to clarify the difference between HLE<sub>b</sub> and LE<sub>b</sub>.

I speculate that for the same LE<sub>b</sub>, men live relatively shorter period with unhealthy state compared with women in population with high LE<sub>b</sub>. Further analysis is needed to find strategies to improve HLE<sub>b</sub> in countries with higher LE<sub>b</sub> in women.

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**Fig. 1** The relationship between life expectancy at birth and healthy life year at birth separated by gender



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