

Statistical bulletin

Deaths registered in England and Wales: 2022

Registered deaths by age, sex, selected underlying causes of death and the leading causes of death. Contains death rates and death registrations by area of residence and single year of age.



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1 . Main points

- In 2022, there were 577,160 deaths registered in England and Wales, which was a decrease of 1.6% compared with 2021 (586,334 deaths).
- There were more male deaths registered than female deaths (292,064 male and 285,096 female) for the third consecutive year; before 2020 this was last the case in 1981.
- Age-standardised mortality rates (ASMRs) in England and Wales decreased significantly compared with 2021, by 3.9% for males and 3.0% for females; ASMRs account for the population size and age structure.
- The North East was the region of England with the highest age-standardised mortality rates for both males and females; this is the fourth consecutive year the North East had the highest rate for females, for males this replaced the North West region in 2021.
- The lowest ASMR in England for males was in the South East, and for females, in London, whereas these were both lowest in the South West in 2021.
- In Wales, the highest ASMRs for both males and females were in Blaenau Gwent; the lowest ASMRs were in the Vale of Glamorgan.
- Dementia and Alzheimers disease was the leading cause of death in England and Wales in 2022, with 65,967 deaths (11.5% of all deaths), replacing coronavirus (COVID-19), which was the leading cause in 2020 and 2021; the second most common cause of death was ischaemic heart disease, accounting for 10.3% (59,356 deaths) of all deaths registered in 2022.
- The leading cause of death for males was ischaemic heart disease (38,730 deaths, accounting for 13.3% of all male deaths), while for females it was dementia and Alzheimers disease (42,635 deaths; 15.0% of all female deaths) in 2022; these were the same leading causes as in 2021.

2 . Number of deaths registered in 2022

There were 577,160 deaths registered in England and Wales in 2022, a decrease of 1.6% compared with 2021 (586,334 deaths).

There was a larger decrease in male (2.0% lower) than in female death (1.1% lower), compared with 2021 (Figure 1). In part, this may be explained by [higher numbers of coronavirus \(COVID-19\) deaths in males in 2020 and 2021](#). COVID-19 was the top leading cause of death in 2020 and 2021 but was no longer in the top five leading causes of death overall in 2022. The leading cause of death in 2022 was dementia and Alzheimers disease, which accounted for a higher proportion of deaths in females than in males.

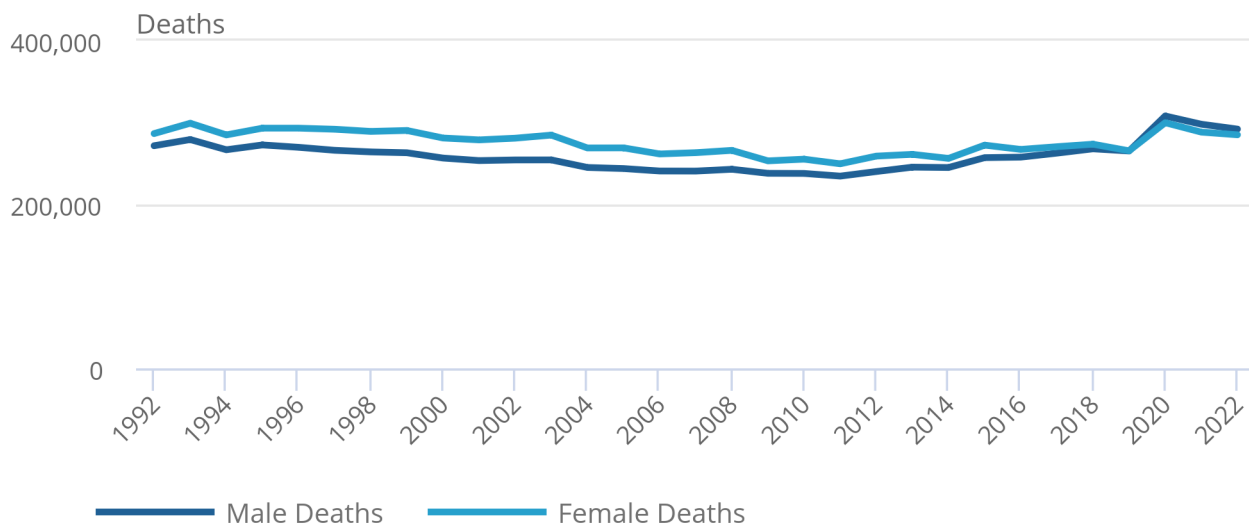
Figure 1 shows that the difference in the number of deaths between females and males had been decreasing for over a decade, with a difference of 241 deaths in 2019. In 2020, the pattern reversed, with 8,216 more deaths for males than females. This was the first time that more males than females died in England and Wales since 1981. In 2021 and 2022, this pattern continued, with the gap between male and female deaths widening to 9,644 in 2021, and then narrowing to 6,968 in 2022.

Figure 1: The number of deaths in England and Wales decreased by 1.6% in 2022 compared with 2021

Deaths registered in England and Wales, 1992 to 2022

Figure 1: The number of deaths in England and Wales decreased by 1.6% in 2022 compared with 2021

Deaths registered in England and Wales, 1992 to 2022



Source: Deaths registered in England and Wales from the Office for National Statistics

Notes:

1. Based on deaths registered in each calendar year.
2. Figures include deaths of non-residents.

The number of deaths registered in 2022 was the 23rd-highest since 1838 (Figure 2). However, it is important to recognise that the population of England and Wales has grown over this time period. For this reason, we have included crude mortality rates per 100,000 persons, which provide fairer comparisons between years than numbers of deaths alone.

The crude mortality rate in 2022 was similar to the rate of 2005, rendering it the third-highest since 2004 but lower than every year before 2005. The lowest crude mortality rate was recorded in 2011. For mortality rates taking into account changes in age structure, see [Section 4: Age-standardised mortality rates by area](#).

Figure 2: The number of deaths continued to decrease in 2022

Deaths registered and crude mortality rates, in England and Wales, 1838 to 2022

Notes:

1. Based on deaths registered in each calendar year.
2. The population estimates used to calculate crude death rates for England, Wales, and England and Wales from 1938 to 1980 are rounded to the nearest hundred for each single year of age. Figures based on these rounded population estimates are of a slightly lower level of accuracy than the figures for 1981 onwards.
3. Figures for England and Wales include deaths of non-residents.
4. Rates have been calculated using the most up-to-date population estimates when the statistics were published.

3 . Age-standardised mortality rates by sex

Age-standardised mortality rates (ASMRs) are a better measure of mortality than the number of deaths, as they account for the population size and age structure.

Since 2001, mortality rates had generally been decreasing. However, following the early 2010s, we have seen a significant [slowdown in mortality improvements](#), with ASMRs in recent years declining at a slower rate than before 2010 (Figure 3).

In 2020, mortality rates for both males and females significantly increased in comparison with the previous year. This increase was linked to the ongoing coronavirus (COVID-19) pandemic, with the first deaths due to COVID-19 registered in England and Wales in March 2020.

ASMRs for both males and females significantly decreased in 2021 and continued to decrease significantly in 2022. There were 1,150.5 deaths per 100,000 males (3.9% lower than in 2021) and 839.9 deaths per 100,000 females (3.0% lower than in 2021).

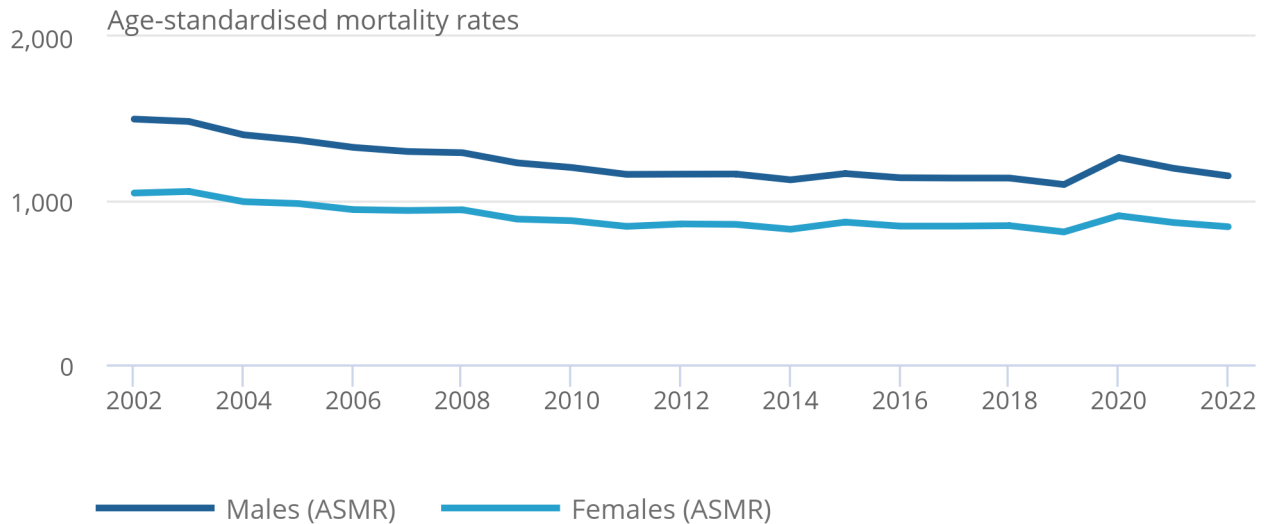
Despite this decrease from 2021, the ASMRs in 2022 were [statistically significantly](#) higher for females than in 2014 and 2019, and for males in 2014 and between 2016 and 2019.

Figure 3: Age-standardised mortality rates for males and females remained relatively high in 2022 but significantly decreased from 2021

Age-standardised mortality rates, England and Wales, 2002 to 2022

Figure 3: Age-standardised mortality rates for males and females remained relatively high in 2022 but significantly decreased from 2021

Age-standardised mortality rates, England and Wales, 2002 to 2022



Source: Deaths registered in England and Wales from the Office for National Statistics

Notes:

1. Based on deaths registered in each calendar year.
2. These rates are for all ages and are standardised to the 2013 European Standard Population; they allow comparisons between populations with different age structures, including between males and females and over time. For more information on these rates, please see our [User guide to mortality statistics](#).
3. Data for England and Wales include deaths of non-residents.

4 . Age-standardised mortality rates by area

In 2022, there were 540,333 deaths from all causes in England and 35,694 deaths in Wales. In both countries, the age-standardised mortality rates (ASMRs) were significantly higher for males (1,144.1 deaths per 100,000 males in England, and 1,217.0 deaths per 100,000 males in Wales) than for females (833.2 deaths per 100,000 females in England, and 924.0 deaths per 100,000 females in Wales).

In Wales, the ASMRs were higher than in England for both males and females in 2022, as seen in previous years.

In England in 2022, the North East remained the region with the highest ASMRs compared with 2021 for females (942.3 deaths per 100,000 females), and replaced the North West as the region with the highest ASMRs for males (1,285.9 deaths per 100,000 males). London replaced the South West as the region with the lowest ASMRs for females (746.3 deaths per 100,000 females), and the South East replaced the South West for males (1,045.8 deaths per 100,000 males).

Table 1: The North East was the English region with the highest age-standardised mortality rate for males and females

Age-standardised mortality rates by sex, in English regions and Wales, 2022

Region	Age-standardised mortality rate per 100,000 males	Age-standardised mortality rate per 100,000 females
North East	1285.9	942.3
North West	1281.0	939.3
Yorkshire and the Humber	1235.8	908.3
East Midlands	1175.5	872.5
West Midlands	1182.4	861.0
East	1079.8	790.3
London	1063.5	746.3
South East	1045.8	765.1
South West	1088.7	779.6
Wales	1217.0	924.0

Source: Deaths registered in England and Wales from the Office for National Statistics

Notes

1. Based on deaths registered in a calendar year.
2. These rates are for all ages and are standardised to the 2013 European Standard Population.
3. Geographical boundaries are based on the most up-to-date information available at the time of publication.

Figure 4: Age-standardised mortality rates, males and females, local authorities in England and Wales, 2022

Notes:

1. Points on the map are placed at the centre of the local area they represent and do not show the actual location of deaths. The size of the circle is proportional to the number of deaths.
2. Figures are for deaths registered rather than deaths occurring in each month.
3. Figures exclude deaths of non-residents; geographical boundaries are based on the most up-to-date information available at the time of publication.
4. Age-standardised mortality rates (ASMRs) are standardised to the 2013 European Standard Population, expressed per 100,000 population; they allow comparisons between populations with different age structures, including between males and females and over time. For more information on these rates, please see our [User guide to mortality statistics](#).

Among English local authorities, Blackpool had the highest overall mortality rate for males (1,569.3 deaths per 100,000 males). The City of London had the lowest mortality rate for males (614.3 deaths per 100,000 males). It is worth noting that the City of London population is small, therefore age-standardised rates for this local authority may be unreliable. So, for reference, the second-lowest ASMR in England for males was in Ribble Valley (829.8 deaths per 100,000 males).

The highest overall ASMR for females was in Manchester (1,104.3 deaths per 100,000 females). Kensington and Chelsea had the lowest ASMR for females, with 588.8 deaths per 100,000 females.

In Wales, Blaenau Gwent had the highest overall male ASMR (1,417.1 deaths per 100,000 males). The lowest male mortality rate in Wales was in the Vale of Glamorgan (1,045.8 deaths per 100,000 males).

The lowest overall female mortality was also in the Vale of Glamorgan (742.1 deaths per 100,000 females), while Blaenau Gwent had the highest rate for females (1,227.9 deaths per 100,000 females).

Information regarding deaths due to COVID-19, by local authority, is available in [Deaths due to COVID-19, registered in England and Wales: 2021](#).

5 . Leading causes of death

The Office for National Statistics' (ONS') [leading causes of death groupings](#) are based on a list developed by the World Health Organization (WHO). This categorises causes of death using the [International Classification of Diseases, 10th edition \(ICD-10\)](#) into groups that are epidemiologically more meaningful than single ICD-10 codes, for the purpose of comparing the most common causes of death in the population.

Causes such as cancer and circulatory diseases are split into different subtypes, with the aim to provide policymakers with enough detail to generate appropriate health policies and interventions. Deaths due to COVID-19 is included as a leading cause group (ICD-10 codes U.071, U.072, U10.9). For further information on definitions of COVID-19 deaths, see the glossary section of [Deaths due to COVID-19, registered in England and Wales: 2021](#).

This analysis presents the five leading cause groups with the highest numbers of deaths registered in 2022, for each age and sex group. Where these five most common causes do not cover at least 40% of the deaths in a given age and sex group, additional leading causes are included until at least 40% of the total deaths are covered by the analysis.

Overall leading causes of death

In England and Wales as a whole, the leading causes of death accounted for 41.0% of all deaths registered in 2022. This is the first year since the onset of the coronavirus (COVID-19) pandemic in 2020 that COVID-19 was not the top leading cause of death in England and Wales. Instead, this was dementia and Alzheimers disease, similar to the trend seen pre-pandemic. There were 65,967 deaths with an underlying cause of dementia and Alzheimers disease, accounting for 11.5% of all deaths registered in 2022.

Following dementia and Alzheimers disease, the remaining leading causes of death in England and Wales were:

- ischaemic heart diseases (59,356 deaths; 10.3% of all deaths, and a 4.2% increase in deaths from 2021)
- chronic lower respiratory diseases (29,815 deaths; 5.2% of all deaths, not a leading cause in 2021)
- cerebrovascular diseases (29,265 deaths; 5.1% of all deaths, and a 0.8% increase in deaths from 2021)
- malignant neoplasm of trachea, bronchus and lung (28,570 deaths; 5.0% of all deaths, and a 1.3% increase in deaths from 2021)
- COVID-19 (22,445 deaths; 3.9% of all deaths, and a 66.7% decrease in deaths from 2021)

COVID-19 dropped from the first leading cause of death in 2021 to the sixth in 2022. The other leading causes are in the same order, except the third leading cause: chronic lower respiratory diseases, which was not a leading cause in 2021. It is worth noting that this bulletin analyses the [underlying cause of death](#) only, so does not consider other contributory conditions or diseases mentioned on the death certificate.

When looking at England and Wales separately, the leading causes of death in England followed the same order as those for England and Wales as a whole. The leading cause of death in England was dementia and Alzheimers disease (62,118 deaths; 11.5% of all deaths registered).

The top five causes for England also featured in the leading causes of death in Wales, in a slightly different order. Ischaemic heart diseases was the leading cause of death (3,922 deaths; 11.0% of all deaths), and influenza and pneumonia was the sixth leading cause (1,388 deaths; 3.9% of all deaths). COVID-19 was not among the leading causes of death in Wales in 2022. For further information including age and sex breakdowns, see Tables 10a to 10c of the [accompanying dataset](#).

Leading causes of death in males and females

Ischaemic heart diseases was the leading cause of death in males in England and Wales, unchanged from 2021, accounting for 38,730 male deaths (13.3%). The second most common cause of death for males was dementia and Alzheimers disease, accounting for 8.0% (23,332 deaths) of all male deaths registered. This has changed from COVID-19 in 2021, which was the sixth leading cause (12,219; 4.2% of all male deaths) in 2022.

Dementia and Alzheimers disease remained the leading cause for females overall, with 42,635 deaths registered in 2022 (15.0% of all female deaths, compared with 14.0% in 2021). Ischaemic heart diseases was the second overall leading cause of death among females (20,626 deaths), accounting for 7.3% of all female deaths registered in 2022, replacing COVID-19 in 2021, which was no longer a leading cause of death for females in 2022.

Leading causes of death by age group

In England and Wales in 2022, ischaemic heart diseases remained the leading cause of death among males of all ages. When broken down by age group, the leading cause remained the same as in 2021 in most age groups, except for males aged 80 years and over, where dementia and Alzheimers disease replaced COVID-19.

For females, the leading causes in 2022 remained the same as in 2021 in most age groups, except those aged 50 to 64 and 65 to 79 years. In these age groups, malignant neoplasms of breast, and malignant neoplasms of trachea, bronchus and lung were the leading cause of death in 2022, respectively, replacing COVID-19 in 2021.

While in 2021, COVID-19 featured as a leading cause of death among males in five out of the seven age groupings, in 2022 COVID-19 only appeared as a leading cause among those aged 80 years and over. Among females, this was six out of seven age groupings in 2021, whereas in 2022 COVID-19 only featured as a leading cause of death among those aged 20 to 34 years. For more detailed information on leading causes of death by sex, age group, and country, see Tables 10a to 10c of the [accompanying dataset](#).

Table 2: Ischaemic heart diseases and dementia and Alzheimers disease were the leading causes of death for males and females, respectively, in 2022

Leading causes of death by age group and sex, England and Wales, 2022

Males

Age Group	Leading Cause	% of male deaths
All ages	Ischaemic heart diseases	13.3
1 to 4 years	Congenital malformations, deformations and chromosomal abnormalities	14.4
5 to 19 years	Intentional self-harm and event of undetermined intent	15.8
20 to 34 years	Intentional self-harm and event of undetermined intent	25.7
35 to 49 years	Accidental poisoning	12.8
50 to 64 years	Ischaemic heart diseases	18.3
65 to 79 years	Ischaemic heart diseases	15.4
80 years and over	Dementia and Alzheimers disease	13.5

Females

Age Group	Leading Cause	% of females deaths
All ages	Dementia and Alzheimers disease	15.0
1 to 4 years	Congenital malformations, deformations and chromosomal abnormalities	14.5
5 to 19 years	Intentional self-harm and event of undetermined intent	11.7
20 to 34 years	Intentional self-harm and event of undetermined intent	18.4
35 to 49 years	Malignant neoplasm of breast	10.8
50 to 64 years	Malignant neoplasm of breast	8.7
65 to 79 years	Malignant neoplasm of trachea, bronchus and lung	9.3
80 years and over	Dementia and Alzheimers disease	21.3

Source: Deaths registered in England and Wales from the Office for National Statistics

Notes

1. Based on deaths registered in the calendar year.
2. In England and Wales, a conclusion of suicide cannot be returned for children aged under 10 years. "Intentional self-harm; and event of undetermined intent" in this bulletin differs from the National Statistics definition of suicide.

6 . Effects of changing the population base

Following [Census 2021](#), the [mid-year population estimates have been revised](#) for the period up to the year after the last census ([Census 2011](#)). In this release, mortality rates from 2012 to 2021 have been revised accordingly. The number of death registrations for these years have not changed, however, the changes to the population estimates affected mortality rates for 2012 to 2021.

Overall, the revised mid-year population estimates used in this release tend to be lower than the mid-year population estimates used in our [previous Deaths registered in England and Wales release](#). Lower populations will result in higher mortality rates, and this is generally reflected in the data (Figure 5).

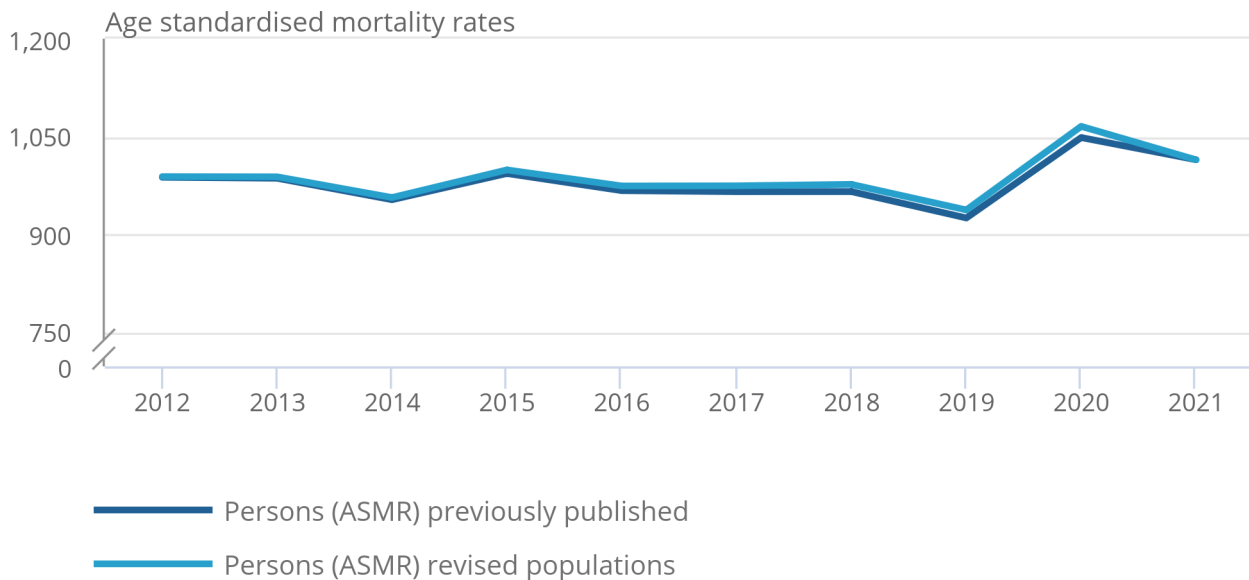
Between 2015 and 2020, age-standardised mortality rates (ASMRs) in each year were [statistically significantly](#) higher using the revised populations, compared with the ASMRs published previously. This difference was greatest in 2020, where the ASMR in England and Wales using the revised populations was 1,065.5 deaths per 100,000 people, compared with 1,048.3 deaths per 100,000 people when using the previously published population estimates.

Figure 5: Age-standardised mortality rates for England and Wales between 2015 and 2020 are significantly higher when using revised mid-year populations

Age-standardised mortality rates, using previously published and revised population estimates, England and Wales, deaths registered 2012 to 2021

Figure 5: Age-standardised mortality rates for England and Wales between 2015 and 2020 are significantly higher when using revised mid-year populations

Age-standardised mortality rates, using previously published and revised population estimates, England and Wales, deaths registered 2012 to 2021



Source: Deaths registered in England and Wales from the Office for National Statistics

Notes:

1. Based on deaths registered rather than deaths occurring in each calendar year.
2. Rates have been calculated using the most up-to-date population estimates when the statistics were published.
3. ASMRs are standardised to the 2013 European Standard Population, expressed per 100,000 population; they allow comparisons between populations with different age structures, including between males and females and over time. For more information on these rates, please see our [User guide to mortality statistics](#)

7 . Deaths registered in England and Wales data

[Deaths registered in England and Wales](#)

Dataset | Released 15 December 2023

Annual data on deaths registered by age, sex and selected underlying cause of death. Tables also provide both mortality rates and numbers of deaths over time.

[Deaths registered in England and Wales – 21st century mortality](#)

Dataset | Released 15 December 2023

Annual data on the number of deaths registered in England and Wales by age group, sex, year and underlying cause of death, as defined using the International Classification of Diseases, 10th Revision.

[Explorable dataset of deaths registered in England and Wales](#)

Dataset | Released 15 December 2023

Mortality statistics for deaths registered in 2013 to 2022. Numbers of deaths and age-standardised rates by age, sex, year, geography and cause of death (ICD-10 classification and leading causes of death). Deaths by deprivation indices in England and Wales, sex and single year of age, deaths registered in 2022.

[Deaths registered in England and Wales by deprivation](#)

Dataset | Released 15 December 2023

Number of deaths registered by deprivation decile, by sex and single year of age.

8 . Glossary

Age-standardised mortality rates

Age-standardised mortality rates (ASMRs) are used to allow comparisons between populations that may contain different proportions of people of different ages. The 2013 European Standard Population is used to standardise rates; more information is available in the [User guide to mortality statistics](#).

Coronaviruses

The World Health Organization (WHO) defines coronaviruses as “a large family of viruses that are known to cause illness ranging from the common cold to more severe diseases such as Middle East Respiratory Syndrome (MERS) and Severe Acute Respiratory Syndrome (SARS)”. Between 2001 and 2018, there were 12 deaths in England and Wales due to a coronavirus infection, with a further 13 deaths mentioning the virus as a contributory factor on the death certificate.

Coronavirus (COVID-19)

COVID-19 refers to the “coronavirus disease 2019” and is a disease that can affect the lungs and airways. It is caused by a type of coronavirus. Further information is available from the [World Health Organization \(WHO\)](#).

Registration delay

Mortality statistics are compiled from information supplied when deaths are certified and registered as part of civil registration, which is a legal requirement. According to the [Births and Deaths Registration Act 1953](#), a death should be registered within five days unless it is referred to a coroner for investigation. Mortality statistics for a given time period can be based on occurrence (death date) or registration (registration date); registration delay is the difference between date of occurrence and date of registration.

Statistical significance

The term “significant” refers to statistically significant changes or differences. Significance has been determined using the 95% confidence intervals, where instances of non-overlapping confidence intervals between estimates indicate the difference is unlikely to have arisen from random fluctuation. More information is available on our [uncertainty pages](#).

Crude mortality rates

Crude mortality rates are used to allow comparisons between populations of different sizes, so are a better measure to compare across time than numbers of deaths alone. However, crude rates do not take account of differences in the structure of populations such as the age and sex distribution (see “age-standardised mortality rates” in this Glossary). More information is available in the [User guide to mortality statistics](#).

9 . Measuring the data

This publication provides information concerning mortality rates and causes of death registered in 2022; this includes deaths where COVID-19 was the underlying cause of death.

When interpreting these mortality statistics, please note that:

- death statistics are compiled from information supplied when deaths are certified and registered as part of civil registration, which is a legal requirement
- this release provides both summary figures and more detail on both individual causes of death and [selected leading causes of death](#), where individual causes are aggregated using a list developed by the World Health Organization (WHO), modified for use in England and Wales – deaths where COVID-19 was the underlying cause have been included in this release using the ICD-10 definition U07.1, U07.2 and U10.9
- summary figures published in the [accompanying dataset](#) include analysis of causes of death by broad disease groupings (a list of these is available in [Section 10 of the User guide to mortality statistics](#))

Methodology guides

More quality and methodology information (QMI) on strengths, limitations, appropriate uses, and how the data were created is available in the [Mortality statistics in England and Wales QMI](#).

Our [User guide to mortality statistics](#) provides further information on data quality, legislation and procedures relating to mortality and includes a [glossary of terms](#). Information on how age-standardised mortality rates (ASMRs) are calculated is also included.

The [Revisions policy for population statistics \(including mortality statistics\)](#) is also available.

Coding of deaths

Deaths are cause coded using the World Health Organization's (WHO) [International Classification of Diseases, 10th edition \(ICD-10\)](#). Deaths are coded to ICD-10 using IRIS software (version 2013). Cause of death reported here represents the final underlying cause of death for ages 28 days and over. This takes account of additional information received from medical practitioners or coroners after the death has been registered.

In 2011, there was an update to the coding framework (detailed in the [bridge coding study](#)) used to code cause of death. This meant that deaths from vascular dementia that were previously coded to cerebrovascular disease (I60 to I69) would be coded to vascular dementia (F01). There were further changes to the framework in 2014 (detailed in the [dual coding study](#)) where deaths that were coded to chest infection (J98) would now be coded to chest infection (J22), but those with a mention of dementia (F01 or F03) would now be coded to dementia (F01 or F03). Additionally, deaths that were previously coded to aspiration pneumonia (I69) where dementia was mentioned on the death certificate would now be coded to dementia (F01 or F03).

On 1 January 2020, we updated the software used to code causes of death and derive a single underlying cause. This is known as Multicausal and Unicausal Selection Engine (MUSE) (IRIS version 5.5). More information is available on the [differences caused by the change of software](#).

Populations

Rates in this publication have been calculated using the [mid-year population estimates](#) published by the Office for National Statistics (ONS) on 23 November 2023.

10 . Strengths and limitations

There is a large degree of comparability in death statistics between countries within the UK. There are some differences, although these are believed to have a negligible impact on the comparability of the statistics. These differences are outlined in the [Mortality statistics in England and Wales Quality and Methodology Information](#).

Death figures reported here are based on deaths registered in the data year. These include some deaths that occurred in the years prior to 2022 (35,389 out of 577,160 deaths). The Office for National Statistics (ONS) also takes an annual extract of death occurrences in the autumn following the data year to allow for late registrations. Further information on the [impact of registration delays for a range of causes](#) is available.

Figures in this release only represent deaths that were registered in England and Wales; these include some deaths of individuals whose usual residence was outside England and Wales (1,158 of the 577,160 deaths registered) in 2022, while any deaths of residents that happened abroad are not included.

11 . Related links

[Monthly mortality analysis, England and Wales: July 2023](#)

Bulletin | Released 23 August 2023

Provisional death registration data for England and Wales, broken down by sex, age and country. Includes deaths due to coronavirus (COVID-19) and leading causes of death.

[Where to find statistics on UK deaths involving the coronavirus \(COVID-19\) and infection rates by country](#)

Article | Released 19 May 2020

Links to statistics on coronavirus (COVID-19) deaths and infection rates published by the different constituent countries of the UK.

[The top 10 causes of death](#)

Web page | Released 9 December 2020

The World Health Organization (WHO) provides data on the leading causes of death in the world.

[Births in England and Wales: 2022](#)

Bulletin | Released 17 August 2023

Live births, stillbirths and the intensity of childbearing, measured by the total fertility rate.

12 . Cite this statistical bulletin

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