

Statistical bulletin

Deaths registered in England and Wales: 2024

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.

Contact:
Population Health Monitoring
group
health.data@ons.gov.uk
+44 1329 444110

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1 . Main points

2024 death registrations

- There were 568,613 deaths registered in England and Wales in 2024, a decrease of 2.2% compared with 2023 (581,363 deaths).
- The age-standardised mortality rate (ASMR) in England and Wales was 930.5 deaths per 100,000 people, the lowest since our time series began in 1994.
- For the third consecutive year, the North East was the region of England with the highest ASMRs for both males (1,210.3) and females (908.4); among females, this rate has remained highest in the North East since 2015.
- In Wales, Merthyr Tydfil continued to have the highest ASMR for males (1,478.2); Blaenau Gwent continued to have the highest ASMR for females (1,111.3).
- Dementia and Alzheimer's disease continued to be the leading cause of death in England and Wales, with 68,273 deaths registered (12.1% of all deaths).

2023 death occurrences

In England and Wales, some deaths (for example, suicides) are certified by a coroner and cannot be registered until an inquest is completed. This results in a long delay between the date the death occurred and the date of registration. For example, only 92.3% of deaths registered in 2024 also occurred in 2024.

Currently, we at the Office for National Statistics (ONS) publish mortality statistics on a registration basis (the year in which the death was registered). Death registration records also include the actual date of death. We use this information to produce our deaths by year of occurrence table, which is currently published in our [Impact of registration delays on mortality statistics dataset](#).

We are still focusing the majority of our commentary on registration data, but in response to a recent [engagement exercise](#), we are presenting some commentary on occurrence-based statistics, with a view to broadening this in future.

- 570,845 deaths occurred in England and Wales in 2023 and were registered by the end of March 2025.
- In contrast, 589,293 deaths occurred in 2022 and were registered by the end of March 2024
- 587,072 deaths occurred in 2021 and were registered by the end of March 2023.

For comparison with previous years, we have used provisional death registration data for 2025 in our occurrence-based numbers for 2023.

For future releases in this series, we will use improved statistical methods to produce death occurrence estimates. This will account for the long registration times for some deaths, and allow for reliable comparisons between years.

Because of registration delays, 92.3% of deaths registered in 2024 had a date of death in the same year; 6.9% of deaths occurred in 2023, and the remaining deaths occurred in 2022 or earlier.

2 . Number of deaths registered in 2024

There were 568,613 deaths registered in England and Wales in 2024, a decrease of 2.2% compared with 2023 (581,363 deaths).

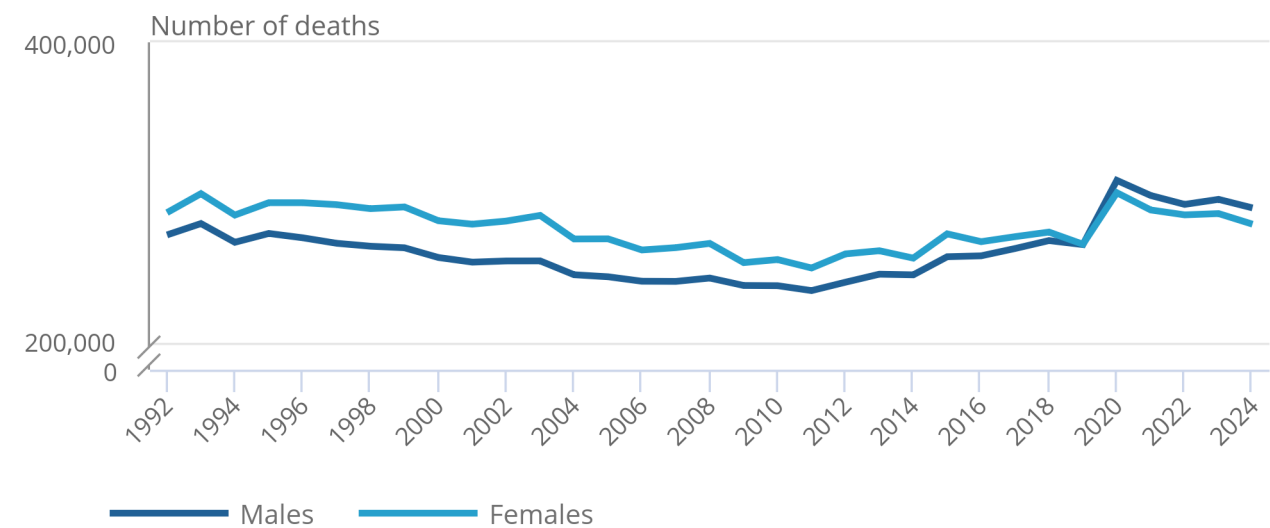
There was a 1.9% decrease in male deaths, and a 2.5% decrease in female deaths, compared with 2023 (Figure 1). Continuing the trend observed since 2020, there were more registered deaths among males than among females (Figure 1).

Figure 1: The number of deaths in England and Wales decreased by 2.2% in 2024, compared with 2023

Deaths registered in England and Wales by sex, 1992 to 2024

Figure 1: The number of deaths in England and Wales decreased by 2.2% in 2024, compared with 2023

Deaths registered in England and Wales by sex, 1992 to 2024



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.

Our analysis includes crude mortality rates, expressed per 100,000 persons, which provide fairer comparisons between years than numbers of deaths alone.

The crude mortality rate continued to decrease in 2024 (920.0 deaths per 100,000 people), compared with 2023 (951.5), returning almost to pre-coronavirus (COVID-19) pandemic levels (Figure 2). More information on mortality rates that account for changes in age structure is available in [Section 3: Age-standardised mortality rates by sex](#), and in [Section 4: Age-standardised mortality rates by area](#).

Figure 2: The crude mortality rate decreased in 2024, compared with 2023

Deaths registered and crude mortality rates, England and Wales, 1838 to 2024

Notes

1. Based on deaths registered in each calendar year.
2. The population estimates used to calculate crude death rates for 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) account for population size and age structure, allowing for more accurate comparison of mortality across time and location. They are expressed per 100,000 population.

As described in our [Changing trends in mortality in England and Wales: 1990 to 2018 article](#), improvements in mortality slowed from the early 2010s, with ASMRs decreasing at a slower rate (Figure 3). ASMRs then notably increased during the coronavirus (COVID-19) pandemic.

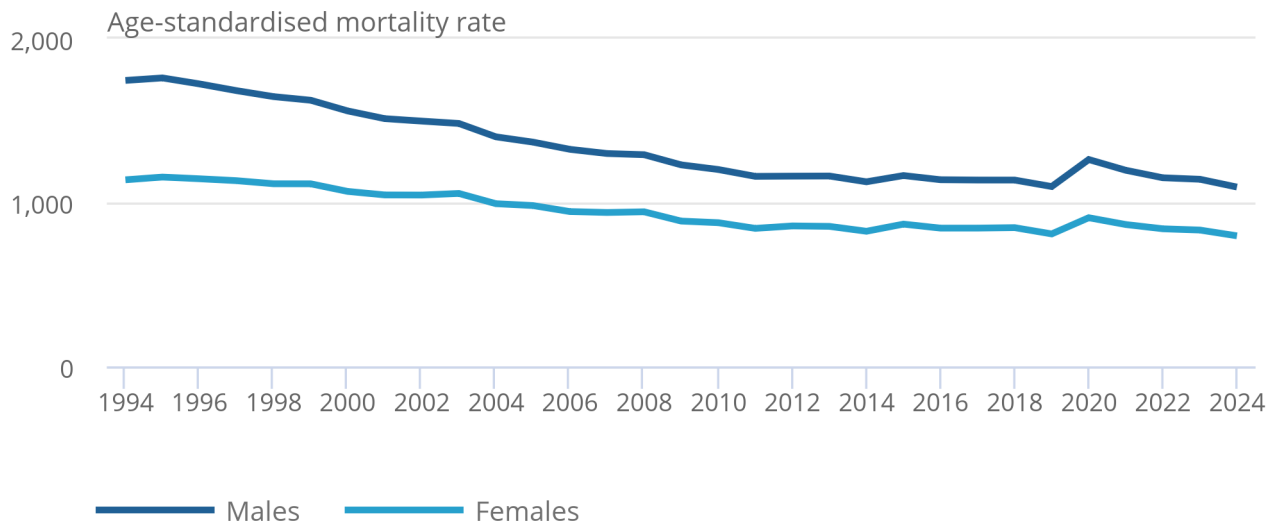
However, ASMRs decreased significantly in 2024 compared with 2023, by 4.2% for both males and females. The ASMRs were 1,094.3 and 796.6 deaths per 100,000 population for males and females, respectively, which were the lowest since our time series began in 1994 (Figure 3).

Figure 3: Age-standardised mortality rates decreased significantly for both males and females in 2024, compared with 2023

Age-standardised mortality rates by sex, England and Wales, 1994 to 2024

Figure 3: Age-standardised mortality rates decreased significantly for both males and females in 2024, compared with 2023

Age-standardised mortality rates by sex, England and Wales, 1994 to 2024



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

Notes:

1. Based on deaths registered in each calendar year.
2. Age-standardised mortality rates (ASMRs) are standardised to the 2013 European Standard Population, expressed per 100,000 population.
3. ASMRs allow comparisons between populations with different age structures, including between males and females, and over time. More information on these rates is available in our [User guide to mortality statistics](#).
4. Data for England and Wales include deaths of non-residents.

4 . Age-standardised mortality rates by area

There were 531,953 deaths registered in England in 2024, and 35,405 deaths registered in Wales.

Age-standardised mortality rates (ASMRs) in Wales continued to exceed those in England. In both countries, the ASMRs were substantially higher for males (1,085.9 deaths per 100,000 population in England and 1,190.0 in Wales) than for females (790.3 in England and 872.7 in Wales).

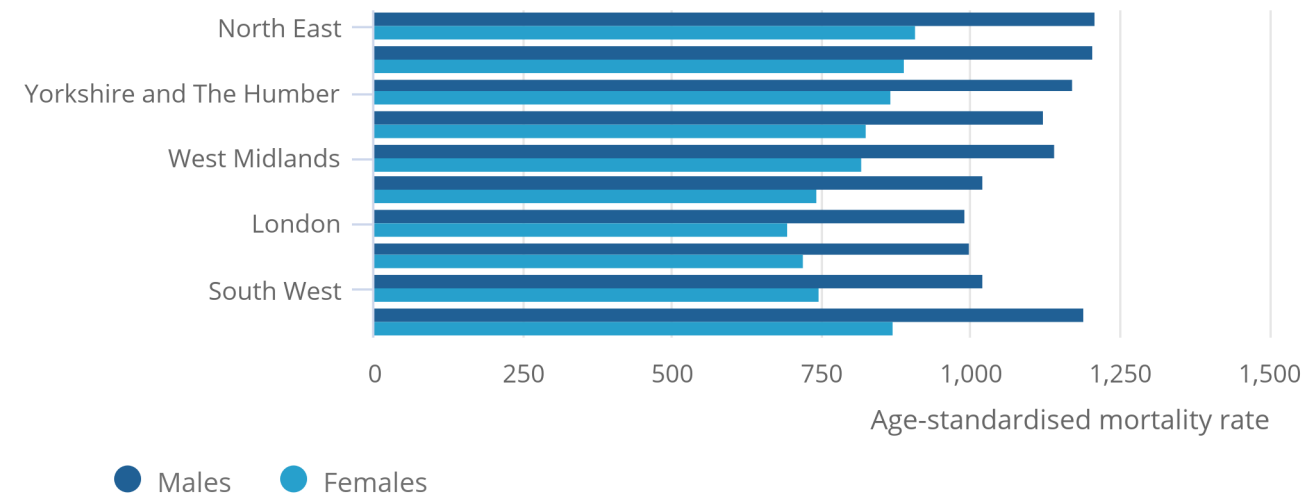
For both males and females, the ASMRs decreased in every English region compared with 2023. The North East remained the English region with the highest ASMRs for both males (1,210.3) and females (908.4). The region with the lowest ASMRs, for both males and females, was London at 993.7 for males and 696.5 for females (Figure 4).

Figure 4: The North East remained the English region with the highest age-standardised mortality rate for both males and females in 2024

Age-standardised mortality rates by sex in English regions and Wales, 2024

Figure 4: The North East remained the English region with the highest age-standardised mortality rate for both males and females in 2024

Age-standardised mortality rates by sex in English regions and Wales, 2024



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

Notes:

1. Based on deaths registered in each calendar year.
2. Age-standardised mortality rates (ASMRs) are standardised to the 2013 European Standard Population, expressed per 100,000 population.
3. ASMRs allow comparisons between populations with different age structures, including between males and females, and over time. More information on these rates is available in our [User guide to mortality statistics](#).
4. Geographical boundaries are based on the most up-to-date information available at the time of publication.

Figure 5: Age-standardised mortality rates by sex and local authority, England and Wales, 2024

Notes

1. Based on deaths registered in calendar year.
2. Figures exclude deaths of non-residents; geographical boundaries are based on the most up-to-date information available at the time of publication.
3. Age-standardised mortality rates (ASMRs) are standardised to the 2013 European Standard Population, expressed per 100,000 population.
4. ASMRs allow comparisons between populations with different age structures, including between males and females, and over time. For more information on these rates is available in our [User guide to mortality statistics](#).

Among English local authorities, Blackpool continued to have the highest ASMR for males (1,539.0), followed by Manchester (1,521.0) and Kingston upon Hull (1,469.8). Hyndburn had the highest ASMR for females (1,050.2), followed by Knowsley (1,048.6), and Blackburn with Darwen (1,047.8).

The City of London continued to have the lowest ASMRs for both males (730.7) and females (496.5), though estimates may be unreliable because of small populations and death counts. The next lowest ASMRs were in Hart for males (731.6) and Kensington and Chelsea for females (522.7), while Richmond upon Thames was third lowest for both sexes (769.3 for males and 581.9 for females).

In Wales, Merthyr Tydfil continued to have the highest male ASMR (1,478.2), followed by Rhondda Cynon Taf (1,428.7) and Blaenau Gwent (1,398.9). Among females, Blaenau Gwent had the highest ASMR (1,111.3), followed by Merthyr Tydfil (1,046.2) and Caerphilly (980.1).

Powys had the lowest male ASMR in Wales (954.5), followed by Monmouthshire (961.0), and Vale of Glamorgan (1,023.7). Among females, Monmouthshire had the lowest ASMR (720.1), followed by Powys (751.6), and Pembrokeshire (775.4).

5 . Cause of death

Our [Leading causes of death in England and Wales \(revised 2016\) 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 of providing policymakers with enough detail to generate appropriate health policies and interventions.

This bulletin analyses the underlying cause of death only, as described in Section 10: Cause of death coding of our [User guide to mortality statistics](#). It does not consider other contributory conditions or diseases mentioned on the death certificate.

Our [Deaths registered in England and Wales dataset](#) provides detailed breakdowns of the leading causes of death by sex and age group. For each group, we provide causes until at least 40% of the total deaths are covered.

Leading causes of death in 2024

Dementia and Alzheimer's disease continued to be the leading cause of death in 2024 with 68,273 deaths, accounting for 12.1% of all deaths registered.

The remaining leading causes of death in England and Wales were also consistent with those of 2023. They were:

- ischaemic heart diseases (54,097 deaths; 9.6% of all deaths and a 6.6% decrease in the number of deaths compared with 2023)
- chronic lower respiratory diseases (31,087 deaths; 5.5% of all deaths and a 3.2% decrease compared with 2023)
- cerebrovascular diseases (29,207 deaths; 5.2% of all deaths and a 0.9% decrease compared with 2023)
- malignant neoplasm of trachea, bronchus and lung (27,826 deaths; 4.9% of all deaths and a 0.3% decrease compared with 2023)
- influenza and pneumonia (23,061 deaths; 4.1% of all deaths and a 4.9% decrease compared with 2023)

These leading causes, and their ordering, were identical both in England and in Wales.

The leading causes of death varied when broken down by sex. In line with previous years, deaths due to dementia and Alzheimer's disease were more prevalent among females (43,347 deaths, 15.6% of all female deaths) than among males (24,926 deaths, 8.6% of all male deaths). Ischaemic heart diseases continued to be the leading cause of death among males, with 36,122 deaths (12.5%).

6 . Impact of registration delays

Of the 568,613 deaths registered in England and Wales, 92.3% were registered in the same year in which they occurred. The number of deaths registered more than a year after they occurred increased slightly, from 8,200 (1.4%) in 2023 to 8,539 (1.5%) in 2024.

The median time between a death occurring and being registered (registration delay) in England and Wales was seven days in 2024. Deaths certified by coroners had a median registration delay of 36 days, compared with seven days for deaths certified by doctors. The median delay for deaths certified by a coroner continues to increase year on year. More information is available in our [Impact of registration delays on mortality statistics dataset](#).

Registration delays for deaths registered in 2024 and beyond may be affected by death certification reform. More information is available in our [Death certification reform, England and Wales article](#).

7 . Deaths occurring in England and Wales

Because of the length of time it takes for some deaths (for example, suicides) to be officially registered, there is always a delay before we can publish data on death occurrences.

Data on death occurrences are therefore continually refreshed to account for late registrations. The number of death occurrences for previous years may therefore not match those previously published.

To capture as many deaths that occurred in 2023 as possible, we have used provisional registration data to include deaths registered by the end of March 2025. This gives us a minimum of 15 months of death registration data, up to a maximum of 27 months for death occurrences in 2023. The length of the registration period depends on when the death occurred within the year. Limiting each registration period to within 15 months of the end of the occurrence year enables greater comparability of death occurrences between years.

Based on death registration data up to the end of March 2025, we are aware of 570,845 deaths that occurred in 2023 in England and Wales (Table 1). Using the data in this way shows that the number of deaths occurring in England and Wales in 2023 was likely lower than in 2022. Death occurrences increased from 2010 to 2020, but have since fallen slightly.

Table 1: Deaths occurring in England and Wales, 2010 to 2023

Year of death	Number of deaths (finalised 2024 death registrations)	Number of deaths (registered within 15 months of the end of occurrence year)
2023	569,809	570,845
2022	591,344	589,293
2021	589,792	587,072
2020	609,538	607,218
2019	534,694	532,036
2018	538,966	537,386
2017	537,344	535,913
2016	530,470	529,023
2015	527,680	526,665
2014	502,693	501,769
2013	505,677	504,614
2012	503,103	501,720
2011	484,302	483,060
2010	494,514	493,401

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

8 . Data on deaths registered in England and Wales

[Deaths registered in England and Wales](#)

Dataset | Released 9 October 2025

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.

[Impact of registration delays on mortality statistics](#)

Dataset | Released 9 October 2025

Data for England and Wales on the time taken to register deaths by cause of death, age, sex, certification type and area of usual residence. Includes analysis on infant deaths.

9 . 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 our [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)

Coronavirus (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 [how we measure and communicate uncertainty for our surveys](#).

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 Section 7: Death rates, ratios and standardisation of our [User guide to mortality statistics](#).

10 . Data sources and quality

This bulletin provides information about mortality rates and causes of death registered in 2024.

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 bulletin 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 coronavirus (COVID-19) was the underlying cause have been included using the International Classification of Diseases, 10th edition (ICD-10) definition U07.1, U07.2 and U10.9
- summary figures published in our accompanying [Deaths registered in England and Wales dataset](#) include analysis of causes of death by broad disease groupings; a list of these is available in Annex A of our [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 our [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.

Our [Revisions policy for population and international migration statistics \(including mortality statistics\)](#) is also available.

Coding of deaths

Deaths are coded by cause using the WHO's [International Classification of Diseases, 10th edition \(ICD-10\)](#). Deaths are coded to ICD-10 using IRIS software (version 2013). Cause of death reported in this bulletin represents the final underlying cause of death for those aged 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 used to code cause of death, as detailed in our [Results of the ICD-10 v2010 bridge coding study](#). 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, as detailed in our [Impact of the Implementation of IRIS software for ICD-10 Cause of Death Coding on Mortality Statistics bulletin](#). These changes included that deaths that were coded to chest infection (J98) would now be coded to chest infection (J22), and 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).

For deaths registered from 1 January 2022, cause of death is coded to the ICD-10 classification using MUSE 5.8 software. Deaths registered between 1 January 2020 and 31 December 2021 were coded to the using MUSE 5.5 and previous years were coded to IRIS 4.2.3. More information is available in our [Cause of death coding in mortality statistics software changes: January 2022 article](#).

Populations

Rates in this publication have been calculated using our [mid-year population estimates](#), published on 30 July 2025.

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

Death figures reported in this bulletin are based on deaths registered in the data year. These include some deaths that occurred in the years prior to 2024 (43,677 out of 568,613 deaths). We also take an annual extract of death occurrences in the autumn following the data year, to allow for late registrations.

Figures in this bulletin only represent deaths that were registered in England and Wales. These include some deaths of individuals whose usual residence was outside England and Wales (1,255 of the 568,613 deaths registered in 2024). Any deaths of residents that happened abroad are not included.

Death certification reform

Changes to the process by which causes of deaths are scrutinised and certified, including a statutory medical examiner system, came into force in England and Wales on 9 September 2024. More information about this is available on GOV.UK's [Death certification reform web page](#).

The statutory medical examiner now provides independent scrutiny of the cause of death identified by the attending practitioner, before death registration, for all non-coronial deaths. Once the attending practitioner and the medical examiner have completed their certification and scrutiny, the medical certificate of cause of death (MCCD) is sent to the Register Office. The medical examiner then notifies the informant that they can register the death.

Death certification reform also introduces a new MCCD with new data fields, including:

- line 1d in the "cause of death" section, which brings the MCCD in line with international standards
- ethnicity of deceased, as self-declared by the patient on the medical record
- questions about whether the deceased was pregnant, and whether the pregnancy contributed to the death, which brings the MCCD in line with international standards

The medical examiner medical certificate of cause of death (ME MCCD) allows medical examiners to certify natural deaths in rare cases where no medical practitioner is available. It applies when the cause of death is known, deemed non-coronial by a senior coroner, and helps avoid unnecessary post-mortems or uncertified deaths.

More detailed information about death certification reform is provided in our [Death certification reform, England and Wales article](#) and our [User guide to mortality statistics](#). Our [Impact of registration delays on mortality statistics dataset](#) also now provides breakdowns of deaths certified by a medical examiner.

Accredited official statistics

These accredited official statistics were independently reviewed by the Office for Statistics Regulation in February 2013. They comply with the standards of trustworthiness, quality and value in the [Code of Practice for Statistics](#) and should be labelled "accredited official statistics".

11 . Related links

[Dashboard: Deaths registered weekly in England and Wales](#)

Dashboard | Updated weekly

Provisional number of deaths for the latest week for which data are available

[User guide to mortality statistics](#)

User guide | Updated 9 October 2025

Supporting information for mortality statistics, which present figures on deaths registered in England and Wales in a specific week, month, quarter or year.

[Death certification reform, England and Wales](#)

Article | Released 9 October 2025

Analysis on the time taken to register a death, cause of death, new ethnicity fields and new pregnancy fields since death certification reform (DCR) came into force on 9 September 2024.

[The top 10 causes of death](#)

Web page | Updated 7 August 2024

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

[Births in England and Wales: 2024](#)

Bulletin | Released 27 August 2025

Annual live births, stillbirths, maternities, and fertility rates in England and Wales by factors including parent age, parent country of birth, ethnicity, deprivation, gestational age and birthweight.

12 . Cite this statistical bulletin

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