



## **Health Protection Surveillance Centre**

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Deputy Emer Higgins Dáil Éireann, Kildare Street, Dublin 2

Re: PQ 55580 To ask the Minister for Health the plans in place to address Ireland's excess mortality rate of 16.8% as of August 2022; if his attention has been drawn to the actions that are being taken by the EU countries that recorded excess mortality rates below 5.5% in August 2022 (Bulgaria, Czechia, Hungary and Slovakia); and if he will make a statement on the matter.

## **Dear Deputy Higgins**

I refer to the above Parliamentary Question which has been referred by the Minister for Health to the Health Service Executive for direct response.

The Health Protection Surveillance Centre (HPSC) has monitored excess all-cause mortality in Ireland, since 2009 as part of a wider European Mortality Monitoring Project known as EuroMOMO. The EuroMOMO project is hosted by <a href="Statens Serum Institute">Statens Serum Institute</a>, Denmark. <a href="http://www.euromomo.eu/">http://www.euromomo.eu/</a>

Official national mortality statistics/registered deaths data are provided weekly to the EuroMoMo hub from the 29 European countries or subnational regions in the EuroMOMO collaborative network. The EuroMoMo project is supported by the European Centre for Disease Prevention and Control (ECDC) and the World Health Organization (WHO). Excess mortality is a term used in epidemiology and public health that refers to the number of deaths from all causes during a period of time above and beyond what we would have normally expected to see. Excess deaths are typically defined as the difference between the observed number of deaths in a specific time period and the expected number of deaths in the same time period.

HPSC receives daily registered deaths data from the General Register Office (GRO) on all deaths from all causes registered in Ireland. These data have been used since 2009 to calculate and monitor excess all-cause mortality in Ireland, as part of the EuroMOMO network. Excess mortality estimates are calculated using the standardised European EuroMOMO algorithm. Further information on the EuroMOMO algorithm and the latest European data are included on the EuroMOMO website. A delay adjustment is built into the EuroMOMO models, correcting registered deaths data for reporting delays. At present, deaths in Ireland can be registered up to 3 months following death, as per the Civil Registration Act, 2004.

During the month of August 2022 and the last week of September 2022, low level excess all-cause mortality was observed in the 75-84 age group which coincides with the circulation of the COVID-19 virus and is attributed to the COVID-19 pandemic. The latest available excess all-cause mortality data, which include all registered deaths up to 13<sup>th</sup> November 2022, have shown that there were no indications of excess all-cause deaths occurring in Ireland in the last

six weeks. These data are provisional due to the time delay with death registration in Ireland. A country-specific adjustment function was applied to correct for the typical delay in registrations of deaths in Ireland. Nonetheless, estimates of excess mortality for the most recent weeks/months are reported with some uncertainty and should be interpreted with caution.

HPSC has extensive ongoing surveillance in place to monitor morbidity and mortality associated with COVID-19, influenza, RSV and other respiratory viruses and liaises closely with both ECDC and WHO. Considerable public health measures have been implemented since the beginning of the pandemic, including COVID-19 vaccination, antivirals and various non-pharmacological interventions in order to reduce associated morbidity and mortality. Additional measures in respect of COVID-19 vaccine boosters which will further impact on the reduction of morbidity and mortality from COVID-19 have been implemented. These measures include a programme for the administration of COVID-19 booster vaccines for vulnerable populations most at risk from the virus has been implemented. The second and third COVID-19 boosters are currently available for all of those aged over 50 years, those aged over 12 years with weakened immune systems

If you require any further information or clarification please do contact us.

Yours sincerely,

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