

Hot Spot spatial analysis. A Quality of Life Index (QLI, continuous score) for Argentina 2010 was used. Poisson mixed models with a random intercept were performed to estimate IRRs (relative risk) as measures of association.

Results: Breast, lung, and colon cancers show the most clear ASMR geographical patterns, which locate an extensive cold spot (lower and correlated rates) in the northwestern region of Argentina and a hot spot (higher and correlated rates) in the Pampeana (center-east) region. Particularly, breast and cervix cancers showed confronting mortality geographic patterns and opposite relationships with the departmental QLI (IRR 1.23 and 0.78, respectively). A direct association was found for lung (IRR 1.46/1.15 for women/men) and colon cancer (IRR 1.57/1.49 for women/men).

Conclusions: Results evidence geographic disparities in cancer mortality burden linked to the quality of life of populations at departmental scale in Argentina.

Key messages: Geographic disparities in cancer mortality are linked to the quality of life in Argentina.

Mortality-QLI relationship varies according the cancer type.

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Cancer mortality burden and quality of life in Argentina: geographical pattern and measures of association

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Background: Health outcomes are often related to the conditions in which people live. Previous studies indicated that cancer mortality is non-randomly distributed between social groups and regions in Argentina. We aimed to analyze geographical pattern of mortality due to the most prevalent cancers in Argentina (2013-2015), from a quality of life approach.

Methods: Age-standardized mortality rates (ASMR) for specific cancer types (breast, lung, prostate, colon, cervix, stomach) was estimated by direct method (2013-2015 period). Mortality maps at a departmental scale (n = 511) were constructed by using a Getis-Ord