

INTRODUCTION

The International Statistical Classification of Diseases, Injuries, and Causes of Death, adopted by the First Assembly of the World Health Organization in 1948 as the Sixth Revision of the International List, was published in two volumes.¹ The English edition of Volume 1 became available for use early in 1949, and several countries began to apply it during that year to the coding of deaths, simultaneously with the Fifth Revision, in order to obtain a statistical "bridge" and to gain experience of the new classification and rules for selection of the underlying cause of death before commencing to base national statistics upon it. The Alphabetical Index, which formed the second volume, was published in English later in 1949, and some of the early coding had to be done without the aid of an index. This was advantageous in compelling those engaged in coding to master the structure of the classification, and in bringing to light more effectively defects, inconsistencies, and lack of clarity in the instructions and rules laid down in Volume 1. In a revision of such magnitude it was impossible to foresee all the difficulties of interpretation which would arise and to provide unequivocally for every combination of causes which would have to be dealt with in practice.

Towards the end of 1949, the national offices of vital statistics in Canada, England and Wales, and the United States of America conferred together on the difficulties which were being experienced, and at a meeting in Washington agreement was reached on a number of interpretations and supplementary rules to be applied tentatively in the three offices until the time when an international centre would be established to deal with such problems. The decisions resulting from this meeting have also been taken into account by several other countries where the same problems began to be encountered in 1950. In that year also, the French and Spanish editions of Volume 1 were published and were ready for use by those French- and Spanish-speaking countries intending to apply the Classification in 1951.

The Expert Committee on Health Statistics at its first session in 1949² foresaw the need for the creation of a centre within the Secretariat of the World Health Organization to deal with problems which must inevitably arise when the Classification began to be used in many countries and to

¹ World Health Organization (1948, 1949) *Manual of the International Statistical Classification of Diseases, Injuries, and Causes of Death*, Geneva, Vol. 1 and 2

² *World Hlth Org. techn. Rep. Ser.* 1950, 5, 5

help statistical offices to solve them in a satisfactory and, as far as possible, uniform manner. This need was stressed again by the expert committee at its second session in 1950,³ with the result that provision was made for such a centre by the Third World Health Assembly.⁴ It was essential that the centre should be located at some national office of vital statistics where research on problems of international importance could be carried out on actual records of causes of death and morbidity, such study being combined when possible with parallel tests on records in other statistical offices. Accordingly, arrangements were made with the General Register Office for England and Wales to establish in the statistical branch of that office a WHO centre to deal with problems arising in the application of the International Statistical Classification of Diseases, Injuries, and Causes of Death. This centre started operating on 1 January 1951 under the name of "WHO Centre for the Classification of Diseases".

The most urgent help from the Centre, required by national offices concerned with statistics of causes of death, was the issue of additional interpretations and instructions for use by those engaged in coding. After conferences and correspondence with the countries which had been using the English edition of the Classification since 1949 or 1950, provisional "Supplementary Interpretations and Coding Instructions for Causes of Death" were prepared to meet the difficulties which had been experienced up to May 1951, particularly in Canada, England and Wales, the United States of America, Australia, Japan, and the Netherlands. A draft of the document was discussed at the Training Course for Coders in the European Region of WHO, held at Geneva in June 1951, and was studied as to the soundness of the solutions proposed. An amended version was then submitted to national offices for immediate application in coding causes of death, requesting opinions and suggestions on any points which seemed to offer difficulties. The present publication incorporates a number of minor changes and additions which have resulted from the experience with the preliminary document. It deals with matters covered in Volume 1, together with corrections in the Alphabetical Index (Vol. 2) arising from them. It also provides for adjustments in the Index deemed to be important, but it does not attempt to deal with the Index exhaustively.

The aim has been to interpret and clarify rather than to amend the Classification, and to adhere to what is believed to have been the intent of the Classification, avoiding changes in meaning or assignment, except where they were necessitated by inconsistencies between notes or instructions or between the Tabular List and the Index. Amendments in intent or substance which may now seem desirable are not included, but have

³ *World Hlth Org. techn. Rep. Ser.* 1950, 25, 6

⁴ Resolution WHA3.71.2, *Off. Rec. World Hlth Org.* 28, 42

been noted for action when revision is contemplated. For convenience, a list of typographical errors discovered in Volume 1 has been appended.

Where an obscure or unsatisfactory arrangement of causes on a certificate makes it necessary to resort to one of the exceptions to the General Rules for Classification, the intention is to get as near as possible to what the certifier meant to say. Statistics based upon the new International Form of Medical Certificate of Cause of Death purport to represent the opinions of certifiers as to what was the underlying cause; and when that cannot be inferred with confidence from the medical statements on the certificate the ideal procedure is to inquire from the physician what his opinion really was. If this is not possible, one of the exceptions to the General Rules has to be put into operation. For instance, if a certificate states that a condition "X" was "due to" a condition "Y" and the two could not have been related in any conceivable way, there are two possibilities: that X was the underlying cause while Y should have been in Part II as merely contributory, or vice versa. Exception 2(c) to the General Rule B assumes the first of these to have been the intention of the certifier.

No system of rules, however ingenious it may be, can do more than lead to the answer which was intended in a majority of such certificates while failing in the remaining cases. The proportion of death certificates where exceptions would have to be employed is of a size which cannot be disregarded. In one country, where the new form of certificate of cause of death has been in use for many years, it was found by sampling in 1950 that exception 2(c) to the General Rule B had to be applied for 6 out of every 1,000 death certificates. The proportion will be much larger in countries where the new certificate has only recently been introduced. The long-term aim must therefore be to deal with such certificates by inquiry rather than by coding devices, and some national offices are making, or are arranging to make, inquiries before resorting to Exception 2(c); but since that is at present only partially attainable, supplementary rules to deal with nearly every kind of anomalous entry have to be made. Much discussion has taken place around this problem, and the additional guiding instructions on pages 43-49 of the present booklet attempt to standardize the procedure so as to give the best answer in as many situations as possible. Such elaboration of rules and precedences should not be regarded as a means by which statistical offices can arrive at the desired statistics notwithstanding bad certification. It is merely the best possible temporary device for dealing with faulty and deficient certificates while every effort is being made to reduce their proportion to small and unimportant dimensions by inquiries to physicians and by instructing them how to express their opinions correctly.

TABULAR LIST AND ALPHABETICAL INDEX

Adjustments

List numbers

- 001-008 In the note under the heading *Tuberculosis of respiratory system* on p. 45, INSERT “ For morbidity classification ” before *Numbers 001-008 exclude*
- 002 To the note beneath list of inclusion terms ADD : “ For primary death classification it includes combinations of a condition in 007, 010-018 with a condition in 002, except when the former is said to be the underlying cause with a specified duration exceeding that of the condition in 002 (code 007, 010-018 as the case may be). ”
- 003.0 ADD note : “ This title includes pleurisy with mention of tuberculosis. ”
In the **Index**, on p. 214 after *Hydropneumothorax - tuberculous*, AMEND 002 to “ 003.0 ”
- 007 To the note ADD : “ For primary death classification it excludes the above conditions if a condition in 002 is also mentioned (001-002), except when the condition in 007 is stated as underlying cause with a specified duration exceeding that of the lung affection. ”
- 010-019 Under the heading *Tuberculosis, other forms* on p. 47, ADD note : “ Numbers 010-018 exclude the conditions listed if a condition in 002 is mentioned except when they are stated as underlying cause with a specified duration exceeding that of the lung affection. ”
- 012.3 DELETE *frontal sinus* beneath *Tuberculous* :—*abscess of* :
- 019 To the note ADD : “ For primary death classification ‘ predominant ’ signifies ‘ underlying ’ ; but when a condition in 007, 010-018 is said to be the underlying cause with a specified duration exceeding that of a condition in 002, the assignment is to the former condition. ”

List numbers

- 020 ADD note : “ This title includes the undermentioned conditions with or without mention of immaturity or other condition listed under 774.”
- 022 In the note, AMEND *nonsyphilitic (451)* to “ nonsyphilitic, arteriosclerotic, or due to arteriosclerosis (451), and congenital (754.6) ”
- 130.3 In the **Index**, INSERT an indent “ intestinal 130.3 ” on p. 125 under *Disease - parasitic*, on p. 233 under *Infection - parasitic* and on p. 235 under *Infestation - parasite*
- 140-199 On p. 76, column 2, lines 12-13, AMEND *except of eye* to “ except of cornea ”
In the **Index**, on p. 383 under *Rodent ulcer*, AMEND *eye* to “ cornea ”
- 191 In column 2 AMEND *skin of any site except of genital organs* by insertion of “ breast and ” before *genital*
- 199 In the **Index**, on p. 289 for *Neoplasm - heart*, AMEND the code numbers 197, 227, 238 to “ 199 ”, “ 229 ”, “ 239 ”, respectively
- 200 In the note on line 2 after *glands* and after *nodes*, INSERT “ and spleen ”
- 200.1 ADD note : “ This title excludes reticulum cell lymphosarcoma (200.0) and Hodgkin’s lymphosarcoma (201).”
- 210 In the **Index**, on p. 91 after *Cyst - nasopharynx*, AMEND 212 to “ 210 ”
- 219 In the **Index**, on p. 91 after *Cyst - kidney (multiple)*, AMEND 757.1 to “ 219 ” and INSERT an indent “ congenital 757.1 ”
- 306 DELETE inclusion term *Organic brain disease with psychosis*
- 308.2 ADD inclusion term “ Organic brain disease with psychosis ”
In the **Index** AMEND 306 * to “ 308.2 * ” on p. 119 under *Disease - brain* after *organic, with psychosis* and on p. 364 under *Psychosis - due to - brain* after *disease; organic*
- 315.0 After *Cardiac asthenia* INSERT “ specified as psychogenic ”
In the **Index**, on p. 38 after *Asthenia - cardiac*, AMEND 315.0 to “ 434.3 ” and INSERT an indent “ psychogenic 315.0 ”
- 325.2 In column 2 AMEND *8-12 years* to “ 8-11 years ”
In the **Index**, on p. 274 under *Mental - age*, AMEND *8-12 yr.* to “ 8-11 yr.”

List numbers

30-334

In the note under the heading *Vascular lesions affecting central nervous system* on p. 116, AMEND fourth line to read: "due to trauma (N850-N853). For morbidity classification they also exclude intracranial lesions specified as late effect, sequela or present"

30

ADD note: "This title includes ruptured (congenital) cerebral aneurysm."

In the Index:

(1) INSERT an indent "ruptured 330" with a further indent "late effects 352" on p. 28 under *Aneurysm - brain - arteriovenous*, *Aneurysm - brain - congenital*, *Aneurysm - cavernous sinus - arteriovenous*, and *Aneurysm - circle of Willis - congenital*

(2) INSERT an indent "ruptured of brain 330" with a further indent "late effects 352" on p. 26 under *Anastomosis - arteriovenous*; on p. 28 under *Aneurysm - arteriovenous* and *Aneurysm - congenital*; and on p. 76 under *Congenital - aneurysm* and *Congenital - arteriovenous anastomosis*

(3) AMEND number 754.6 to "330" on p. 384 after *Rupture - brain - aneurysm - congenital* and insert indent "late effects 352"

34

To the note ADD: "It includes hemiplegia due to hypertension and hemiplegia due to arteriosclerosis. For primary death classification it also includes psychosis (or dementia) due to arteriosclerosis when specified as cerebral (see 306 for secondary classification)."

40.1

ADD note: "This title includes meningitis stated to be due to pneumonia."

43

To the note, on line 2 after *is known*, ADD "(otitic encephalitis 391.2; postchickenpox encephalitis 087; postmeasles encephalitis 085; influenzal encephalitis 483)"

44

ADD note: "For primary death classification this title excludes: otitic encephalitis (391.2); postchickenpox encephalitis (087); postmeasles encephalitis (085); and influenzal encephalitis (483)."

43, 344

In the Index, on p. 147 under *Encephalitis*, ADD an asterisk "*" to numbers 343 and 344 for indents: *influenzal*; *otitic*; *postchickenpox*; and *postmeasles*

List numbers

- 351 In the note, on line 1 after *birth*, INSERT: “ specified as late effect, sequela, or present one year or more after birth, ”
In the **Index**, on p. 117 under *Diplegia - spastic* and on p. 322 under *Paralysis - spastic*, INSERT an indent “ traumatic or due to injury not at birth 352 ”
- 352 To the note ADD: “ It also excludes hemiplegia due to hypertension and hemiplegia due to arteriosclerosis (334). ”
- 353 To the note ADD: “ Epilepsy due to a fall or other specified external cause without statement of the kind of injury is assigned to N856 with the appropriate E category. Traumatic epilepsy NOS is assigned to E936, N856, except when the interval between onset and death was 1 year or more (E962, N856). ”
- 391.2 ADD note: “ For primary death classification this title includes otitic encephalitis NOS. ”
- 420.0 ADD note: “ This title includes arteriosclerotic heart disease with any diseases classifiable under 420.1, 420.2, 422, 440-447. ”
In the **Index**:
(1) INSERT as an indent under each term assigned to 444, 445, 446, 447 the following arrangement:
“ with
 angina (cardiac) (pectoris) (vasomotor) 420.2
 arteriosclerotic heart disease (with angina) (with coronary condition(s)) 420.0
 coronary condition(s) (with angina) 420.1 ”
under: *Arteriosclerosis* on p. 34; *Degeneration - vascular* on pp. 105, 106; *Hypertension* on pp. 217-219
(2) INSERT above *coronary* ... whenever the following arrangement occurs:
 with
 angina ... 420.2
 coronary ... (with angina) 420.1
the term (in alignment with *coronary*): “ arteriosclerotic heart disease (with angina) (with coronary condition(s)) 420.0 ” under: *Arteriosclerosis* on p. 34; *Degeneration - vascular* on pp. 105, 106; *Disease - cardiorenal* on p. 119; *Disease - cardiovascular* on pp. 119, 120; *Disease - heart*

List numbers

- 420.0 on p. 122 ; *Hypertension* on pp. 217-219 ; *Myocarditis* on p. 280
(continued)
- (3) INSERT an indent : “ arteriosclerotic heart disease (with coronary condition(s)) 420.0 ” under : *Angina - with* on p. 28 ; *Myocarditis - with - angina* and *Myocarditis - fatty - with - angina* on p. 280
- (4) INSERT under each term assigned to 420.1 (except for the terms in the arrangement mentioned under (2)) an indent : “ with arteriosclerotic heart disease 420.0 ” under : *Aneurysm* on p. 28 ; *Angina* on pp. 28, 29 ; *Arteriosclerosis - aneurysm* and *Arteriosclerosis - coronary* on p. 34 and *Arteriosclerosis - occlusive* on p. 35 ; *Arteritis* on p. 35 ; *Disease - heart - coronary* on p. 122 ; *Embolism* (except as under (5)) on pp. 144, 145 ; *Failure* on p. 159 ; *Infarct* on p. 229 ; *Myocarditis - with* and *Myocarditis - fatty - with* on p. 280 ; *Occlusion* on p. 308 ; *Rupture* on pp. 384. 385 ; *Sclerosis* on p. 390 ; *Stricture* on p. 405 ; *Thrombosis* on pp. 421, 422
- (5) INSERT an indent : “ arteriosclerotic heart disease 420.0 ” under *Embolism - cardiac - with* and *Embolism - heart - with* on p. 144
- 420.1 In the note AMEND 443 to “ 447 ”, and ADD “ 450 ”
In the **Index**, on p. 39 under *Atheroma*, INSERT an indent “ coronary 420.1 ” with a further indent “ with arteriosclerotic heart disease 420.0 ”
- 420.2 In the note : AMEND 443 to “ 447 ” and ADD “ 450 ” ;
INSERT “ or arteriosclerotic heart disease (420.0) ” after *disease (420.1)*
- 421.0 In the note INSERT “ and when specified as arteriosclerotic or due to arteriosclerosis,” after *disease*
In the **Index**, on p. 34, AMEND *Arteriosclerosis - heart - valve - see Endocarditis* to “ Arteriosclerosis - heart - valve 421.4 ” with an indent “ mitral 421.0 ” ; and on p. 150 under *Endocarditis - mitral* INSERT an indent “ arteriosclerotic or due to arteriosclerosis 421.0 ”
- 421.1 DELETE *atheroma* under *Aortic (valve)* and INSERT “ Atheroma of aortic valve ” after *stenosis* (within the bracket)
- 421.2 ADD note : “ This title includes the listed conditions when specified as arteriosclerotic or due to arteriosclerosis.”

List numbers

- 421.2 In the **Index**, on p. 34 under *Arteriosclerosis - heart - valve*,
(continued) INSERT an indent “tricuspid 421.2”; and on p. 151 under
Endocarditis - tricuspid, INSERT an indent “arteriosclerotic
or due to arteriosclerosis 421.2”
- 422 In the note AMEND lines 2 and 3 to read: “(440-443);
arteriosclerotic heart disease (420.0); coronary disease
(420.1); and angina pectoris (420.2).”
- 422.0 ADD note: “This title excludes the listed conditions with
arteriosclerosis (422.1).”
- 422.1 ADD note: “This title includes cardiovascular arterio-
sclerosis.”
In the **Index**, on p. 34 under *Arteriosclerosis*, INSERT an
indent “cardiovascular 422.1”; and on p. 119 after
Disease - cardiovascular INSERT “(arteriosclerotic)”
- 422.2 ADD note: “This title excludes the listed conditions with
arteriosclerosis (422.1).”
- 430.0 DELETE the words , *not specified as rheumatic* on the right
of the bracket. In the note, after *excludes*, INSERT ” the
above-mentioned conditions with ”
In the **Index**, on pp. 148-151 under *Endocarditis*, INSERT
an indent “with active rheumatic endocarditis 401.1”
under the following terms: *atypical, bacterial, infectious,
lenta, malignant, mycotic, pneumococcic, purulent, septic,
streptococcal, suppurative, ulcerative, vegetative, verrucous*
- 434 ADD note: “This title excludes the listed conditions with
hypertension (440-443).”
- 434.2 AMEND *specified as due to heart disease or failure* to “with
mention of heart disease NOS or failure”
- 440-447 To the note under the heading *Hypertensive disease* on
p. 138, ADD: “They exclude the conditions if arterioscle-
rotic heart disease is mentioned (420.0); if coronary
disease is mentioned (420.1); and if angina pectoris
is mentioned (420.2). See also note on p. 116 concerning
330-334.”
DELETE the notes under 440, 441, 442, 443
- 441 ADD note: “This title excludes the listed conditions with
any condition in 442 (442).”

List numbers

- 442 ADD note : " This title includes the listed conditions with mention of hypertension (malignant)."
- 444-447 In the **Index**, on p. 218 under *Hypertension*, DELETE (*failure*) after *heart (disease)*
- 444 In the **Index**, on p. 159 under *Failure*, AMEND : — see *Disease*, etc. to " 782.4 " after *cardiorenal* and *cardiovascular* ; INSERT an indent " arteriosclerotic 450.0 " under *heart* ; DELETE : , *heart* in — see *Hypertension*, *heart* after *heart - hypertensive* ; INSERT an indent " hypertensive — see *Hypertension* " under *myocardium*
- 445 ADD note : " This title excludes the listed conditions with any condition in 446 (446)."
- 446 ADD note : " This title includes the listed conditions with mention of hypertension (malignant). It includes intercapillary glomerulosclerosis and Kimmelstiel's disease unless diabetes is mentioned (260)."
- In the **Index** :
- (1) On p. 126 under *Disease - renal*, INSERT an indent " hypertensive — see *Hypertension*, *kidney* " ; on p. 218 under *Hypertension - malignant*, INSERT an indent " with kidney involvement — see *Hypertension*, *kidney* " and DELETE (*with kidney involvement*) and *vascular renal* — see *Hypertension*, *kidney* ; on p. 123 after *Disease - Kimmelstiel's*, on p. 187 after *Glomerulosclerosis*, *intercapillary*, and on p. 256 after *Kimmelstiel's disease*, AMEND 260 to " — see *Hypertension*, *kidney* " and INSERT indents " with diabetes 260 "
 - (2) On p. 218 ADD " (malignant) " to *Hypertension - kidney* and DELETE *malignant* — see *Hypertension*, *malignant* underneath
 - (3) ADD " (with hypertension) " and " (malignant) " to the following lead terms : *Arteriosclerosis - kidney* on p. 34 ; *Nephritis - arteriolar* and *Nephritis - arteriosclerotic* on p. 297 ; *Nephrosclerosis* on p. 300 ; and DELETE *malignant* — see *Hypertension*, *malignant* under those terms.
 - (4) On p. 119 ADD " (with hypertension) (benign) (malignant) " to *Disease - cardiorenal* and DELETE *malignant hypertension 441* underneath

List numbers

- 446 (continued) (5) On p. 300 INSERT “ (with hypertension) (benign) (malignant) ” after *Nephrosis - arteriosclerotic* and DELETE *with malignant hypertension* — see *Hypertension, malignant* underneath
- 450 In the note, in second sentence after *excludes*, INSERT “ conditions specified as due to arteriosclerosis (421.0, 421.2, 451) and ”
- 450.0 ADD note: “ This title includes arteriosclerotic vascular disease.”
- In the **Index**, on p. 118 after *Disease - arteriosclerotic - vascular*, AMEND — see *Disease, hypertensive* to “ — see *Arteriosclerosis* ”; and on p. 35 under *Arteriosclerosis* INSERT an indent “ vascular 450.0 ”
- 451 To the note ADD: “ It includes aortic aneurysm specified as arteriosclerotic or due to arteriosclerosis.”
- 452 To the exclusions in the note ADD: “ ruptured cerebral aneurysm (330); arteriosclerotic cerebral aneurysm (334); ”
- 470, 475 To the notes ADD: “ For primary death classification it also excludes the above-mentioned conditions with otitis media, mastoiditis (390-393), influenza (480-483), pneumonia (490-493), bronchitis (500-502), and acute nephritis (590) as complications.”
- 480 In the **Index**, on p. 241 after *Influenza - with - bronchiolitis*, AMEND 481 to “ 480 ”
- 523.1 In the **Index**, on p. 72 after *Colliers' - asthma* and *Colliers' - lung*, AMEND 523.0 to “ 523.1 ”
- 527.1 In the note INSERT “ chronic or unqualified ” after *bronchitis*
- 527.2 AMEND *without mention of heart failure*, on the right of the bracket, to “ not specified as due to heart disease NOS or to heart failure ”
- 532.0 In the note INSERT “ (070) ” after *infection* and DELETE (070) after *gingivitis*
- 553 In the **Index**, on p. 33 after *Appendectomy*, AMEND 553 to “ 551 ”
- 578 In column 2, line 2, DELETE *1 yr.* (and MOVE *h* to line below)

List numbers

- 587.2 In the **Index**, on p.125 under *Disease - pancreas*, AMEND *cystic, congenital 756.2* to “cystic 587.2” with an indent “congenital 756.2”
- 591 To the note ADD : “It includes any condition in 593 with oedema.”
In the **Index**, on p. 300 after *Nephrosis*, AMEND 519 to “591”
- 593 In the note, after *conditions*, INSERT “if specified with oedema (591),”
- 612 In the **Index**, on p. 362 after *Prostatectomy*, AMEND 612 to “610”
- 617 In column on the right of the bracket, INSERT “(except abscess)” after *testis*
- 642 In the note AMEND second sentence to read : “It excludes them if there is indication that onset followed delivery (685, 686).”
- 642.1 ADD note : “This title excludes pre-eclampsia and eclampsia with mention of nephritis of pregnancy (642.2, 642.3).”
- 650.1, 651.1, 652.1 ADD notes : “For primary death classification this title includes abortion therapeutically induced on account of any complication of pregnancy or other disease.”
- 660 In the note AMEND 689 to “678”
- 675 In the **Index**, on p. 108 under *Delivery*, INSERT an indent “difficult 675”
- 685 AMEND the note to read : “This title excludes these conditions if associated with abortion (652), or if noted before delivery (642.1, 642.2, 642.3), or if there is no indication as to time of onset (642.1, 642.3).”
In the **Index** :
(1) AMEND every term
puerperal, postpartum, childbirth 685
to read
“*puerperal, postpartum, childbirth 642.1*
with onset during or after delivery 685”
under each of the following conditions : *Albuminuria* on p. 21 (any indent except *pre-eclamptic*) ; *Bright's disease* on p. 51 (any indent) ; *Coma - uraemic* on p. 73 ; *Delirium - uraemic* on p. 106 ; *Dementia - uraemic* on p. 109 ; *Disease - Bright's* on p. 119 (any indent) ; *Disease - renal* on p. 126

List numbers

685

(continued)

(any indent); *Dropsy - renal* on p. 135; *Edema - with - nephritis* on p. 142; *Ellis nephritis* on pp. 143-144 (any indent); *Intoxication - uraemic* on p. 250; *Nephritis* on pp. 296-300 (any indent); *Nephrosis* on p. 300; *Oedema - with - nephritis* on p. 309; *Poisoning - uraemic* and *Poisoning - uremic* on p. 354; *Toxaemia - uraemic* on p. 424; *Uraemia* on pp. 444-445 (any indent except *convulsions* and *eclampsia*)

(2) AMEND every term

puerperal, postpartum, childbirth 685

to read

“*puerperal, postpartum, childbirth 642.3*

with onset during or after delivery 685”

under each of the following conditions: *Coma - eclamptic* on p. 72; *Convulsions* on pp. 86-87 (any indent); *Delirium - eclamptic* on p. 106; *Eclampsia* on p. 139 (any indent); *Uraemia - convulsions* and *Uraemia - eclampsia* on p. 444

(3) INSERT an indent “with onset during or after delivery 685” under each of the conditions listed below and AMEND their code number 685 as indicated:

(a) AMEND 685 to “642.1”: on pp. 366-370 under *Puerperal* after: *albuminuria, Bright's disease, coma uraemic, dementia - uraemic, intoxication - uraemic, nephritic - toxæmia, nephritis, nephrosis, poisoning uraemic, renal - disease, renal - dropsy, toxæmia - nephritic, uraemia*; and on p. 424 under *Toxaemia - puerperal* after *nephritic* and *uraemic*

(b) AMEND 685 to “642.3”: on pp. 366-370 under *Puerperal* after: *convulsions, convulsions - eclamptic, convulsions - uraemic, eclampsia*; and on p. 424 under *Toxaemia - puerperal* after *eclamptic*

686

AMEND the note to read: “This title excludes these conditions if associated with abortion (652), or if noted before delivery or if there is no indication as to time of onset (642.5).”

In the Index:

(1) AMEND every term

puerperal, postpartum, childbirth 686

to read

“*puerperal, postpartum, childbirth 642.5*

with onset during or after delivery 686”

List numbers

686

(continued)

under each of the following conditions : *Atrophy - liver* on p. 41 (any indent); *Degeneration - liver - parenchymatous* on p. 104; *Hepatitis* on pp. 208-209 (any indent); *Icterus* on p. 224 (any indent); *Jaundice - malignant* on p. 253; *Necrosis - liver* on p. 283; *Toxaemia* on p. 424; *Yellow - atrophy* on p. 460 (any indent)

(2) On pp. 366-370 under *Puerperal*, INSERT an indent “with onset during or after delivery 686” under each term coded to 686 and AMEND that code number from 686 to “642.5”

705.3

AMEND *Keratosis rosacea* to “Rosacea”

In the **Index**, on p. 256 under *Keratosis*, DELETE *rosacea* 705.3, and on p. 383 under *Rosacea*, AMEND *keratosis* 705.3 to “keratitis 381”

716

In the **Index**, on p. 67 after *Chloasma - eyelid*, ADD “716”

720

DELETE *NOS* beneath *Arthritis*

754.4

In the last inclusion term INSERT after *malformations* “of heart” and after *heart* “specified as congenital and”

759.2

In the **Index**, on p. 25 after *Amyotrophia - congenita*, AMEND 744.1 to “759.2”

760.0

In the note, after *birth*, INSERT: “specified as late effect, sequela, or present one year or more after birth”

762

In the **Index**, on p. 31 under *Anoxaemia* and *Anoxia*, INSERT indents “— 1 yr. 762.0” with a further indent “with immaturity 762.5”; and on p. 249 after *Inspiration - mucus — 2 days*, AMEND 762.5 to “762.0”

769

ADD note: “This title does not include deaths attributed to some other maternal complication arising from maternal toxaemia unless there is evidence that the infant was affected by the toxaemia.”

773.0

DELETE the last inclusion term

In the **Index**, on p. 159 under *Failure - heart* and on p. 452 under *Weakness - myocardium*, INSERT an indent “— 1 yr. 773.0” with a further indent “with immaturity 773.5”

773.5

ADD note: “This title excludes immaturity with mention of a condition classifiable to 760-772 or a defined condition classifiable to 774 (760.5-772.5, 774).”

List numbers

- E819 ADD note: "This title excludes injuries from collisions with an object which would normally be off the roadway and is not stated to have been on it (E823)."
- E870-E936 Under *.8 Other specified places* on p. 253, ADD inclusion: "Public place NOS"
- E902, E903, To the notes ADD: "It also excludes falls from machinery
E904 (E912) unless the machine is stated to have been not in operation."
- E921 In the note and inclusion term *Obstruction by food . . .*, after *respiratory passages*, INSERT "and digestive tract"
- E923 TRANSFER *Lung* from column 2 to column 1
- E925 In the arrangement of inclusions DELETE (*mechanical*) after *suffocation* and *NOS* beneath *Asphyxia*, and INSERT "mechanical" as an indent above *pressure*
In the **Index**, on p. 37 after *Asphyxia - 1 yr. +*, AMEND *N991* to "795.0", and on p. 465 after *Asphyxia*, DELETE *E925*
- E933 To the note ADD: "It includes 'exposure' without an explicit statement that heat or cold was a factor causing death."
- E953 ADD: "It excludes an accidental overdose and a wrong drug given by error, which will usually be assigned to the appropriate category for accidental poisoning."
- N856 To the note ADD: "It includes crushing of 'head' without mention of fracture, and open wound of 'head' NOS."
In the **Index**, on p. 246 after *Injury - skull*, AMEND *N803* to "N856"; and on p. 454 after *Wound (open) - head*, AMEND *N850* to "N856"
- N860-N869 In the note under the heading *Internal injury of chest, abdomen, and pelvis* on p. 292, after *fractures in the same region*, INSERT "(except fracture of pelvis; see note under N808)"
- (N90X) A new category is needed for "Multiple open wounds of head, trunk and limbs", since such combinations at present are excluded from other multiple groups (N904, N905, N906) by the word *only* or *both*. Pending revision DESIGNATE this category "N90X".

List numbers

N940-N949

In the note under the heading *Burns* on p. 305, INSERT “of skin” after *chemical burn*; and to the exclusions ADD “burns due to swallowing a corrosive substance (N964)”

N964

ADD note: “This title includes all effects, such as chemical burns, from swallowing the substances here classified. It excludes chemical burns of the skin produced by them (N940-N949)”

N996.0

In the note DELETE *un* in *unspecified* and INSERT “N910” and “N940” to the numbers in brackets

Y39.5

DELETE *Stillborn* in the inclusion terms

In the **Index**, on page 521, AMEND Y39.5 to “Y39.6” after *Stillborn*

Interpretations

List numbers

- 052, 053, 061 In the notes to these titles, *slight injury* comprises any condition in N910-N918, prick, splinter, minor cut, puncture (except of trunk), bruise of superficial tissues, contusion of superficial tissues, burn of first degree.
- 040.3 This title should be interpreted to mean “with no organism specified as cause”.
- 052 The last inclusion term, *Any condition . . . after onset*, is not applicable to primary death classification.
- 0401.3 In the last inclusion term, *other* and *unspecified* comprise all terms in 434.1-434.3 except those relating to the pericardium.
- 0410, 412 In the notes, *of nonrheumatic origin* means “due to a cause other than rheumatic disease”.
- 0434.0 *Heart disease or cardiac failure* in the inclusion term means only heart disease NOS and conditions in 434.1, 434.2 and 782.4.
- 0444-447 In the titles of 444, 445, 446, 447, the word *heart* in the phrase *without mention of heart* refers only to conditions classifiable under 422, 434 or 440-443.
Hypertension with heart conditions not in these categories nor in 420 is subject to the ordinary rules, using 444-447 if hypertension is stated as underlying cause.
In the **Index**, on pp. 34, 105, 106, 217-219, 297, 300, the phrase *other heart involvement* comprises only conditions in 422, 434, 440-443.
- 0446 The inclusion term *Arteriosclerotic nephritis* embraces also the following when specified as due to arteriosclerosis :
Nephritis NOS, chronic nephritis, Bright’s disease NOS, chronic Bright’s disease, interstitial nephritis NOS, chronic interstitial nephritis.
- 0450 The number 306 in the note does not apply to primary death classification.
- 0450.1 In the title and inclusion term, *with gangrene* should be interpreted as “with mention of gangrene as a consequence”.

List numbers

- 523, 524 In the note, *tuberculosis* means any condition in 002-008.
- 643, 644 For purposes of primary death classification these titles include only deaths before onset of labour ; and if there is no information as to delivery before death, it may be assumed that delivery occurred and that the condition complicated delivery. The words *noted before delivery* mean “noted before onset of labour” and here apply only to morbidity classification.
- 650-652 If there is no indication whether live- or dead-born, *foetus* may be assumed to mean dead foetus ; and an “infant” of 6 months or more gestation should be regarded as having been live-born.
- 660 In the title, *without* means “without mention of”.
- 750-757 The following conditions may be considered to have been congenital when death occurred at the ages stated and there is no indication that the condition was acquired after birth :
- Under 1 year : aneurysm, aortic stenosis, atresia, atrophy of brain, cyst of brain, deformity, displacement of organ, ectopia, hypoplasia of organ, malformation, pulmonary stenosis, syphilis, valvular heart disease.
- Under 4 weeks : endocarditis, heart disease NOS, hydrocephalus NOS, myocarditis.
- 758.3 *Foetal rickets* means only the condition when described in those words.
- 774 When a condition in 760-773 is mentioned and also a condition assignable to 774, the ordinary rules apply. When a condition in 020 is mentioned as subsidiary or contributory to immaturity, etc., Exception 2(b) or 1(d) to the General Rules applies as the case may be.
- E970-979 In all titles and **Index** references to *self-inflicted injury*, the qualification “non-accidental” is implied. Suicide said to be “due to” any disease is to be classified as suicide.
- E983 *Manslaughter* here includes only cases where there was intent to injure or to kill.
- N879 *Multiple sites involving only face, neck and trunk* means any two or all three of the sites mentioned.
-

Instructions

List numbers

199

When secondary cancer of multiple sites appears on a death certificate without any primary site, liver (156), thoracic organs (165) and lymph nodes (198) are to be selected in preference to other sites regardless of the order of statement, and if more than one of these is present, select the one first mentioned on the certificate. If none of them is mentioned the assignment is to 199.

340.0

Request the certifying physician for additional information on "meningitis due to influenza" as to whether the illness is a primary meningitis due to *Haemophilus influenzae* (340.0) or whether the illness had not started with influenza, an associated *Haemophilus* infection then having produced the meningitis (481). In the absence of supplementary information assign for primary death classification "meningitis due to influenza" to 481.

401, 414-416

In the absence of any statement as to rheumatic activity at time of death, the following procedure should be used to decide whether to assign to 401 or to 414-416 the terms *carditis*, *endocarditis*, *heart disease*, *myocarditis*, and *pancarditis*, if described as rheumatic without further qualification (except that interval since onset may be stated), or if with mention of "rheumatic fever" without qualification.

Assume activity at time of death if the interval since onset of rheumatic fever or of the "rheumatic" condition was less than 1 year; otherwise make enquiry if possible (at any rate at ages under 45), or in absence of information regarding activity assume, for the purposes of this classification, the rheumatic process to be inactive at ages 15 and over, but active at ages under 15. For *pericarditis*, *acute* and *pericarditis*, *rheumatic*, without further specification at any age, assume activity of the rheumatic process.

N Code

Supplement the instructions on page 282 by the following: "For primary death classification, where more than one kind of injury in N800-N959 is mentioned, and there

List numbers

N Code
(continued)

is no clear indication as to which caused death, the principal injury is to be selected according to the following order of preference if there is no contrary instruction in the classification :

Fracture of skull (N800, N801, N803, N804) and broken neck in N805.

Internal injury of chest, abdomen, pelvis (N860-N869).

Fracture of spine, trunk (N802, rest of N805, N806-N809).

Other head injury (N850-N856) and open wounds of neck, chest, multiple sites, etc. (N874, N875, N879, N888, N898, N904-N908, N958).

Fractures of limbs (N810-N849).

Burns (N940-N949).

Others in N800-N959.”

RULES FOR CLASSIFICATION

Supplementary Rules for Selection of Cause of Death for Primary Tabulations

Exceptions to Rule A

- 1 (b) If the last-stated cause in Part I of the certificate is linked with a condition in Part II by a rule in the Tabular List which applies to the one condition *with* (mention of) the other (or by the *Nephritis - hypertension* note on p. 296 of the **Index**), but is not linked with any condition in Part I, the underlying condition is to be modified by taking the cause in Part II into account. Linkage by a special rule with another cause in Part I takes precedence over a linkage with a cause in Part II if the two conflict.
- 1 (d) This should be applied only when the sequence is unmistakable; it should be applied when hypostatic pneumonia or any condition in 522 is the only cause entered in Part I of the certificate.

Exceptions to Rule B

- 2 (a) Where the last-stated condition in Part I is classifiable elsewhere than to categories 773, 780-795, and a condition above it and not related to it is classifiable to one of those categories, the latter is to be ignored.
- 2 (b) If either the condition in I (b) of the certificate or that in I (c) could have been etiologically antecedent to the direct cause in I (a), but the one in I (c) could not have been antecedent to the one in I b, the conditions in I (b) and I (c) are to be dealt with as though entered on the same line and the appropriate supplementary rule 3 (a) to 3 (f) applied. This does not apply if the condition in I (a) is an ill-defined condition.
- 2 (b) and 2 (c) As a guide to the interpretation of *highly improbable* for purpose of these exceptions, the following are to be so regarded :
- (a) an infective or parasitic disease (001-138) other than erysipelas (052), gas gangrene (063), septicaemia (053), and tetanus (061) reported as "due to" any disease outside the group ;

Exceptions to Rule B

- 2 (b) and 2 (c)** (b) a malignant neoplasm reported as “ due to ” any other disease ;
(continued)
(c) a congenital malformation (750-759) reported as “ due to ” any other disease of the individual, including immaturity ;
(d) diabetes (260), haemophilia (295), or influenza (480-483) reported as “ due to ” any other disease ;
(e) rheumatic fever (400-401), or heart disease specified as rheumatic (411, 413-416) reported as “ due to ” any disease other than scarlet fever (050), streptococcal sore throat (051), and streptococcal septicaemia (053.0) ;
(f) a non-inflammatory disease of the central nervous system (330-334, 350-357), except cerebral embolism in 332, reported as “ due to ” endocarditis (410-414, 421, 430) or to a disease of the digestive system (530-587) ;
(g) a condition of stated date of onset “ X ” reported as due to a condition of stated date of onset “ Y ”, when X predates Y (but this does not apply to circulatory disease or an intracranial vascular lesion reported as due to malignant neoplasm).

The above list does not cover all “ highly improbable ” sequences ; but in other cases the general rule B should be applied unless there are strong indications to the contrary. Wherever possible, before applying Exception 2 (c) inquiry should be made of the certifier as to the order of arrangement which was intended. The following should be accepted as possible sequences in Part I of the certificate :
Circulatory diseases in 420-450 or intracranial vascular lesions in 330-334 when reported as due to malignant neoplasm, diabetes or asthma.

If two unrelated conditions are entered in I (a) and I (b) of the certificate, and the condition in I (b) is a surgical emergency or other grave condition and the one in I (a) is a condition rarely causing death, the latter is to be ignored.

- 2 (d)** If the last-stated cause in Part I of the certificate is linked with the one immediately above it by a special coding rule in the Tabular List (or by the *Nephritis - hypertension* note on p. 296 of the **Index**), the combined condition is to be considered as underlying cause (subject to a possible modi-

Exceptions to Rule B

(d)
(continued)

fication by a third condition in Part II or above it in Part I). If the last-stated cause in Part I is not specially linked with the one just above it, but is linked by a rule in the Tabular List (or by the *Nephritis - hypertension* note on p. 296 of the **Index**) with the one above that, the intervening condition may be ignored.

A term reported under “ due to ” is to be considered equivalent to an adjective qualifying the term just above it if that composite term appears in the Tabular List or **Index**. (An exception is “ heart disease due to arteriosclerosis ” which is coded to 450.0 by Rule B and not to arteriosclerotic heart disease (420.0).) This does not apply when an intervening condition is reported on line I (b) of the certificate. Where a note in the Tabular List provides for assignment of cause A “ specified as due to ” cause B, this combination is to be used only if both A and B appear in Part I of the certificate.

When the last-stated or underlying cause is assignable to an undefined disease in an “ unqualified ” or “ unspecified ” category or to a poorly defined disease in a residual category, and the condition stated above it is assignable to a more specific category in the same section or system, the assignment is to the latter.

The assumption of an intervening cause in Part I is permissible for purpose of determining the correct statement of a sequence, but it must not be used to modify the assignment.

When the last-stated condition in Part I is an early form of a disease and a condition above it is a later manifestation or late effect of the same disease which must have been preceded at some time by the early form, and if the Classification provides separate categories for the two, the later manifestation is to be selected for primary death classification. Examples are syphilis (022-027) and late effects of gonorrhoea (035), acute poliomyelitis (081), acute infectious encephalitis (083), rickets (284), and intracranial abscess (344). This does not apply to a “ chronic ” disease stated to be due to an acute form (e.g., bronchitis, laryngitis, pharyngitis, salpingitis) unless the Tabular List gives special instructions to that effect (e.g., rheumatic endocarditis, and chronic nephritis due to acute).

Supplementary Rules

3 (c), 3 (d),
and 3 (f)

The words *significant difference* in Rule 3 (c) mean that one of the conditions is a surgical emergency or other very grave condition whilst the others are not.

If multiple congenital malformations are reported on different lines of Part I, they are considered as being on one line and dealt with by Supplementary Rule 3 (c) or 3 (f).

The words *infective or parasitic disease* in Rule 3 (d) are to be interpreted as any disease in 001-138, 480-483.

If application of Rule 3 (f) would lead to selection of a general term which includes a later-mentioned specific term, the latter is to be preferred.

SPECIAL TABULATION LISTS

Adjustments in Intermediate List

List numbers

- A120** ADD " 660 " to Detailed List numbers
- AE147** AMEND Detailed List numbers *E930-E965* to " E930-E962 "
- AE148** ADD " E963 " to Detailed List numbers
- AE149** ADD " E964 " to Detailed List numbers
- AE150** ADD " E965 " to Detailed List numbers

Adjustments in Abbreviated List

List numbers

- B40** ADD " 660 " to Detailed List numbers
- BE48** AMEND Detailed List numbers *E840-E965* to " E840-E962 "
- BE49** ADD " E963 " to Detailed List numbers
- BE50** ADD " E964, E965 " to Detailed List numbers
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