

WORLD HEALTH
ORGANIZATIONORGANISATION MONDIALE
DE LA SANTÉFIRST WORLD HEALTH ASSEMBLY

A/4

19 May 1948

REPORT OF THE
INTERNATIONAL CONFERENCE FOR THE SIXTH DECENNIAL
REVISION OF THE INTERNATIONAL LISTS OF DISEASES AND
CAUSES OF DEATH**I. THE INTERNATIONAL CONFERENCE FOR THE SIXTH DECENNIAL REVISION OF THE INTERNATIONAL LISTS OF DISEASES AND CAUSES OF DEATH**

convened by the French Government in Paris under the terms of the International Convention of 7 October 1938;

composed of Delegates from the following countries:

Belgium, Bulgaria, Canada, Chile, Cuba, Czechoslovakia, Denmark, Ecuador, Ethiopia, France, Greece, Guatemala, Hungary, Iceland, India, Ireland, Italy, Luxemburg, Mexico, Netherlands, Norway, Poland, Portugal, Siam, Sweden, Switzerland, United Kingdom, United States of America, USSR, Venezuela,

met at the Palais d'Orsay from 26 - 30 April 1948.

Its Session was opened by His Excellency, M. Georges BIDAULT, French Minister of Foreign Affairs.

Its Secretariat was entrusted jointly to the competent French Administrations and to the World Health Organization which had carried out the preparatory work under the terms of the Arrangement, concluded by the Governments represented at the International Health Conference, signed at New York on 22 July 1946.

At the close of its Session the following Convention was signed by the Delegates attending the Conference:

II. CONVENTION OF 30 APRIL 1948

The Delegates, considering Article 2 (s) of the Constitution of the World Health Organization, entrusting the Organization, as one of its functions, with the task of establishing and revising the necessary international nomenclatures of diseases and causes of death, and

Article 21 (b) of that Constitution, giving the World Health Assembly authority to adopt regulations in respect of such nomenclatures

submit to the World Health Assembly, for consideration and action, the International Statistical Classification of

Diseases, Injuries and Causes of Death and accompanying recommendations, destined to improve international uniformity and comparability of statistics of morbidity and mortality.

The Delegates undertake to recommend to their respective Governments the adoption of the above Classification and recommendations.

The countries which have not participated in the Conference nor signed the present Convention may adhere to the latter at their request.

IN FAITH WHEREOF the undersigned Delegates sign this Convention.

Done in the City of Paris this 30th day of April, 1948.

For:

Belgium: Van de Calseyde
Landrain

Bulgaria: Tacheff
Janeff

Canada : Burke
Marshall
Melanson
O'Brien
Wyllie

Chile :

Cuba : de Ayala
Martinez-Fortun

Czechoslovakia: Bresky

Denmark : Gram
Nielsen

Ecuador Moreno

Ethiopia :

France : Baudouin
Aubenque
Bernard
Bourgeois-Pichat
Caussain
Choffe
Denoix
Fonsagrive
Gasc
Moynier
Rivet

Greece :

Guatemala Pellecer
Mollinedo Herrera

Hungary:	Szel
Iceland:	
India:	Dhayagude
Ireland:	
Italy:	Tizzano
Luxemburg:	Van de Calseyde (authorized)
Mexico:	
Netherlands:	Banning Salomonson
Norway:	Backer
Poland:	Kacprzak Domanska
Portugal:	Carvalho Dias
Siam:	Danegsvang
Sweden:	
Switzerland:	Zurukzoglu Ott
United Kingdom:	North [*] Carling Cook Feery Kyd McKinlay Stocks
United States of America:	Dunn Baehr Densen Dorn Fales Hamilton Moriyama Ware
USSR:	
Venezuela:	Guriel

* See reservation, page 7

World Health Organization: Biraud
Pascua
Cakrtova

International Labour Organization: Zelenka

Secretary-General: Biraud

Assistant Secretaries-General: Cakrtova
Denoix

III. RECOMMENDATIONS TO THE WORLD HEALTH ASSEMBLY

The Conference recommends to the World Health Assembly:

- A. Adoption of the International Statistical Classification of Diseases, Injuries and Causes of Death (Document WHO.IC/MS/1, Rev. 2) produced by the Expert Committee for the Preparation of the Sixth Decennial Revision of the International Lists of Diseases and Causes of Death, set up by the Interim Commission of the World Health Organization.

N.B. This Classification is the obligatory list to be used for actual coding of medical records and death certificates. At least one tabulation should be prepared on the basis of this Classification (Detailed List); It consists of 610 categories of diseases and morbid conditions, plus 153 categories for the classification of the external cause of injury and 189 categories for characterization of injuries according to the nature of the lesion.

- B. Adoption of an "Intermediate List" of 150 causes for tabulation of morbidity and mortality by age groups and other demographic characteristics (Document WHO.IC/MS/24, Rev. 1).
- C. Adoption of an "Abbreviated List" of 50 causes for tabulation of mortality for administrative subdivisions (Document WHO.IC/MS/25, Rev. 1).

N.B. The Conference emphasizes that it has recommended the "Intermediate and Abbreviated Lists" for use in tabulations for specific purposes and not as substitutes for the Detailed List in coding.

- D. The employment of the recommended lists in the preparation and publication of the following tabulations of mortality statistics by sex and age groups, for:

(a) the country as a whole:

- (i) Detailed List by sex
(ii) Intermediate List of 150 causes by sex and the following age groups:

under one year
by single years from one to 4 years (1, 2,
3, 4 years)
Quinquennial groups from 5 to 84 years
85 years and over

- (b) Each town of 1,000,000 population and over (otherwise the largest town with population of at least 100,000); national aggregates of urban areas of 100,000 population and over (with official definition of urban area); national aggregates of urban areas of less than 100,000 population; national aggregate of rural areas (with official definition of rural area)

Intermediate List of 150 causes by sex and the following age groups:

under one year
 1 - 4 years
 5 - 14 years
 15 - 24 years
 25 - 44 years
 45 - 64 years
 65 - 74 years
 75 years and over

- (c) Administrative subdivisions, without necessity for publication

Abbreviated List of 50 causes by sex and the following age groups:

under one year
 1 - 4 years
 5 - 14 years
 15 - 24 years
 25 - 44 years
 45 - 64 years
 65 - 74 years
 75 years and over

- (d) Tabulation of statistics of infant mortality according to the following subdivisions of age under one year:

single days for the first week of life (under one day, 1, 2, 3, 4, 5, 6 days)
 7 - 13 days
 14 - 20 days
 21 - 27 days
 28 days to 2 months
 single month of life from 2 months to one year (2, 3, 4 11 months).

E. With regard to the preparation of morbidity statistics

- (a) Use of the Detailed List for coding causes of illness and disability
- (b) Adoption of a Special list of 50 causes for tabulation of morbidity for Social Security purposes (Document WHO.IC/MS/26. Rev.1)

- (c) Use of the Detailed List or any convenient shorter list, such as Lists A and C given in Volume I of the Classification for tabulation of morbidity statistics for other purposes.
- F. Adoption of the form of Medical Certificate of Cause of Death proposed by the Expert Committee of the World Health Organization (Document WHO.IC/MS/28.Rev.1)
- G. Adoption of Rules for selecting the Underlying Cause of Death as given in Volume I of the Classification (Document WHO.IC/MS/34. Rev.1) and adoption of the form of Multiple Cause Tabulation proposed by the Expert Committee of the World Health Organization (Document WHO.IC/MS/29.Rev.1)
- H. Publication of the International Statistical Classification of Diseases, Injuries and Causes of Death should be effected:
- (a) in two volumes, namely:
- Vol. I: 1. Introduction and List of three-digit Categories (Detailed List)
2. Tabular List of Inclusions and four-digit Sub-Categories;
3. Medical Certification and Rules of Classification;
4. Special Lists for tabulation:
- List A. Intermediate List of 150 causes for tabulation of morbidity and mortality;
- List B. Abbreviated List of 50 causes for tabulation of mortality;
- List C. Special List of 50 causes for tabulation of morbidity for Social Security purposes.
- Vol.II: Alphabetical Index.
- (b) in the three languages: English, French and Spanish, as soon as possible, with Latin synonyms for diseases appearing in the Tabular List of Inclusions and the Alphabetical Index.
- I. That the lists should be brought into use from the 1st January 1950. (However, in countries where it is possible, parallel tabulations of deaths should be published for year 1949 or 1950 according to the old and new lists).
- J. The following methods of international co-operation in the fields of health statistics and vital statistics:
- (a) the establishment by the World Health Assembly of an

Expert Committee on Health Statistics entrusted with the study of problems in the field of health statistics including recording of births, diseases and deaths.

N.B. The Conference wishes to mention the following problems for study and appropriate action:

- (I) systematic study of multiple causes;
 - (II) residence allocation of vital data (with definition of what constitutes residence);
 - (III) methods of standardization of rates;
 - (IV) statistical problems connected with foetal and infant mortality, including
 - (1) definitions of stillbirth and of immaturity;
 - (2) methods of reporting and classifying causes of foetal and infant death;
 - (3) age groups for publication of these statistics.
- (b) the establishment by the different Governments of national committees for the purpose of co-ordinating statistical activities within the country*, and to serve as links between the national medical-statistical institutions and the Expert Committee on Health Statistics of the World Health Organization;
- (c) decentralization of studies of certain statistical problems of public health importance to interested national committees, health statistics and other national agencies with a view to transmission of the results of such studies to the Expert Committee of the World Health Organization for international discussion and utilization;
- (d) development of the statistical service of the World Health Organization to such technical competence as to enable it not only to carry out the statistical functions within the Organization and to implement the recommendations of the

* The ensuing phrase was the object of the following reservation from the principal delegate of the United Kingdom:

"I sign this present Convention subject to a reservation in respect of sub-paragraph (b) of paragraph J of the Recommendations to the World Health Assembly, namely, I am unable to subscribe to the words 'and to serve as links between the national medical-statistical institutions and the Expert Committee on Health Statistics of the World Health Organization'. In my view this passage, which came before the Conference for the first time during the course of its concluding session, raises somewhat difficult questions of relationships which might well be discussed by the World Health Organization."

(signed) George North.

Expert Committee on Health Statistics but also to furnish consulting services to national health administrations and statistical agencies;

- (e) convening, when occasion requires it, of international technical conferences on problems of vital and health statistics;
 - (f) co-operation, in the execution of the work above-mentioned, with the interested sections of the United Nations and its Specialized Agencies.
- K. That for application of the above principles, particularly those in paragraph J (c), special studies should be undertaken by national committees and interested administrations of countries indicated below, subject to approval by their governments:
- (a) Influence of the confidential character of medical certification on the accuracy of resulting statistics; (Belgium, France, Switzerland);
 - (b) Adaptation of the International Statistical Classification of Diseases, Injuries and Causes of Death to the special needs of the Armed Forces (Canada, United States of America);
 - (c) Methods of linking together health statistics with other types of related statistics (Canada, United States of America);
 - (d) Methods of presentation of statistics of multiple causes of death (Switzerland, United Kingdom, United States of America);
 - (e) Cancer registers and statistics (Denmark, France, Norway, Switzerland, United Kingdom);
 - (f) Methods for obtaining reliable statistics on the frequency and causes of foetal death (classification of periods of gestation under 28 weeks, classification of multiple causes and methods of certification). (United Kingdom, United States of America);
 - (g) Morbidity and mortality from tropical diseases (France, India);
 - (h) Problems concerning statistics of malaria morbidity (Ecuador, India, Italy, Venezuela).
- N.B. Competent and interested administrations of any country may, if they so desire, participate in the studies recommended above and report to the Expert Committee on Health Statistics of the World Health Organization.

L. Elaboration and adoption, in conformity with Articles 20 to 22 of the Constitution of the World Health Organization of Regulations incorporating as far as possible the recommendations III A - III G presented above.

IV. RECOMMENDATIONS to the Expert Committee (of the World Health Organization, Interim Commission) for the Preparation of the Sixth Decennial Revision of the International Lists of Diseases and Causes of Death.

THE CONFERENCE EMPOWERS the above-mentioned Expert Committee to establish the final forms of (the):

- (a) International Statistical Classification of Diseases, Injuries and Causes of Death, and of the Intermediate, Abbreviated and Special Lists, incorporating in them as far as possible, but without changing their basic structure, amendments proposed in the discussions of the Conference;
- (b) Medical Certificate of Cause of Death;
- (c) Rules for selecting the Underlying Cause of Death, when multiple causes are mentioned on the certificate;
- (d) Tabulations for presenting multiple causes of death.

RESOLUTIONS ADOPTED BY THE CONFERENCERESOLUTION No. 1REGARDING ADOPTION OF THE INTERNATIONAL STATISTICAL CLASSIFICATION OF DISEASES, INJURIES AND CAUSES OF DEATH.

WHEREAS in recognition of the general trend of thought at the time, the United States Committee on Joint Causes of Death considered that it would be expedient to profit by the occasion of its meeting to study also the possibility of framing a single classification for the purposes of both mortality and morbidity statistics;

WHEREAS, having drawn up a tentative classification in co-operation with experts from the United Kingdom and Canada who were already engaged in mortality and morbidity classification, the United States Committee handed over this classification to the Expert Committee for the Preparation of the Sixth Decennial Revision of the International Lists of Diseases and Causes of Death appointed by the Interim Commission of the World Health Organization;

WHEREAS, having considered the results of practical tests made in some countries, the said Committee recommended that the proposed International Statistical Classification of Diseases, Injuries and Causes of Death be sent to all countries for comment and has since developed it in response to the interest and suggestions of many countries; and

WHEREAS in view of its comprehensive character the new proposed classification constitutes a remarkable achievement reflecting the growing needs of governments and organizations concerned with the analysis of causes of sickness and death, through the common understanding of which the benefits of health and the bonds of peace and of friendship among the nations may be more strongly secured.

THIS CONFERENCE approves the Detailed List of Categories of the International Statistical Classification of Diseases, Injuries and Causes of Death set out in Document WHO.IC/MS/LRev.2.

RESOLUTION No.2REGARDING THE USE OF THE
INTERNATIONAL STATISTICAL CLASSIFICATION
OF DISEASES, INJURIES AND CAUSES OF DEATH

WHEREAS it is essential that the International Statistical Classification adopted by this Conference be employed for coding of causes of illness and death by all nations in order to achieve comparability in the health statistics of the various countries, therefore

THE CONFERENCE RESOLVES to urge the World Health Organization to advise all nations to employ the International Statistical Classification for coding purposes and

FURTHER RESOLVES that the World Health Organization emphasize that the special tabulation lists recommended by this Conference are to be used only for tabulations, and not as substitutes in coding for the International Statistical Classification.

RESOLUTION No. 3
REGARDING THE USE OF LISTS
OF SELECTED CAUSES FOR SPECIAL PURPOSES.

WHEREAS this Conference has adopted for the Sixth Revision of the International Lists of Diseases and Causes of Death the Detailed List of three-digit categories of the International Statistical Classification of Diseases, Injuries and Causes of Death for the preparation of morbidity and mortality statistics;

WHEREAS it is desirable that every country use the full detail of the list for the classification of causes of illness and death;

WHEREAS it is desirable to prepare tabulations for specific purposes using selected causes or group of causes; and

WHEREAS it is essential for international comparisons that such special tabulations contain the same causes or groups of causes:

THE CONFERENCE RESOLVES:

1. that the complete International Statistical Classification of Diseases, Injuries and Causes of Death be used as the necessary basis of the classification (coding) of causes of illness and death from 1 January 1950;
2. that each country as far as possible prepare annually at least one comprehensive tabulation showing as a minimum the number of deaths from each cause by sex according to the Detailed List of three-digit Categories;
3. that the supplementary Intermediate Lists of 150 causes be recommended for a minimum tabulation of mortality by age groups and other demographic characteristics for the country as a whole, for large cities and for aggregations of the urban and rural populations;
4. that the supplementary Abbreviated List of 50 causes be recommended for a minimum tabulation of mortality for small administrative areas;
5. that the supplementary Special List of 50 causes be recommended for a minimum tabulation of morbidity for social security purposes;
6. that if possible the Detailed Lists of both the Fifth and Sixth Revisions be used for coding causes of death for the country as a whole for the year 1949 or 1950 and tabulation based on each list be published as a bridge to indicate the adjustments necessary for comparison of mortality data classified according to the two successive lists;

7. that the Expert Committee on Health Statistics of the World Health Organization be invited to consider the desirability of preparing other supplementary lists of selected causes to be used in the tabulation and publication of causes of infant mortality, special causes of morbidity and for such other purposes as may be desirable.

RESOLUTION No. 4
REGARDING THE PREPARATION OF A LIST ADAPTED TO THE PROBLEMS
OF FOETO-INFANTILE MORBIDITY AND MORTALITY

WHEREAS the Intermediate List of 150 Causes does not properly cover the diseases affecting the foetal and infantile stages of life, since it is too detailed on some points and too limited with regard to diseases of infancy.

THE CONFERENCE RESOLVES to ask the World Health Organization to consider the desirability of a selective list, suitable for study of foetal and infantile morbidity and mortality.

RESOLUTION No. 5
REGARDING AGE GROUPING TO BE USED IN THE TABULATION
OF HEALTH STATISTICS

WHEREAS general mortality and mortality from individual diseases vary considerably with age;

WHEREAS general mortality and mortality from individual diseases vary according to the specific characters of the area (urban, rural, etc.);

WHEREAS international study of such mortality statistics by regional areas requires reasonable uniformity as to the characteristics and size of the geographic subdivisions;

WHEREAS an international study of mortality requires uniform, or at least comparable, age grouping of the statistics; and

WHEREAS age grouping must be adapted to the size of the populations in the administrative areas covered by the statistics, to ensure significance of the figures relating to each group,

THE CONFERENCE RECOMMENDS THE USE OF THE FOLLOWING SEX AND AGE GROUPING in the tabulation of mortality statistics

I. In conjunction with the Intermediate List of 150 Causes:

(a) for each country as a whole:

by sex and the following age groups:

under one year

by single years from one to 4 years (1, 2, 3, 4 years)

five-year groups from 5 to 84 years

85 years and over

- (b) for each town of 1,000,000 population and over (otherwise the largest town with a population of at least 100,000):
national aggregate of urban areas of 100,000 population and over (with official definition of urban area)
national aggregate of urban areas of less than 100,000 population (with official definition of urban area)
national aggregate of rural areas (with official definition of rural area)

by sex and the following age groups:

under one year
1- years
5-14 years
15-24 years
25-44 years
45-64 years
65-74 years
75 years and over.

- II. In conjunction with the abbreviated list of 50 Causes for administrative subdivisions (without obligation to publish):

by sex and the following age groups:

under one year
1-4 years
5-14 years
15-24 years
25-44 years
45-64 years
65-74 years
75 years and over.

- III. In conjunction with any list of causes, for special tables on infant mortality, by the following age groups:

single days for the first week of life (under one day, 1, 2, 3, 4, 5, 6 days)
7-13 days
14-20 days
21-27 days
28 days to 2 months
single month of life from 2 months to one year (2, 3, 4 ... 11 months).

RESOLUTION No. 6
REGARDING THE PROBLEM OF MULTIPLE
CAUSES OF DEATH

WHEREAS a great many countries are at present using diverse methods to select the main cause of death to be tabulated;

WHEREAS international comparability of mortality statistics depends in considerable part upon the use of a uniform method for selecting the main cause of death to be tabulated;

WHEREAS the selection of the main cause of death for tabulation depends in part upon the form of the medical certification;

WHEREAS many countries have adopted the principles of medical certification recommended by the Health Organization of the League of Nations in 1925;

WHEREAS the selection of the main cause of death, where two or more causes are jointly reported, is an integral part of the process of classification; and

WHEREAS the Sixth Revision of the International Lists provides an opportune time for the simultaneous adoption of a uniform method for the selection of the main cause of death to be tabulated

THE CONFERENCE RECOMMENDS:

1. that as far as possible countries adopt a standard form of medical certification of death in order to secure information on the underlying cause of death;
2. that this medical certificate should be the one adopted by this Conference and as far as possible it should be completed by the attending physician;
3. that each country make continuous effort to promote a better understanding of the medical certification form in order to secure more accurate medical information;
4. that all countries adopt for statistical purposes the principle of selecting the underlying cause as the main cause;
5. that all countries use the rules for selecting the main cause of death as adopted by this Conference;
6. that problems arising in application of the coding rules be referred to the Expert Committee on Health Statistics of the World Health Organization;
7. that each country tabulate and publish if possible one comprehensive table for the census year showing the number of times each cause was tabulated as the main cause and as secondary or contributory cause of death.

RESOLUTION No. 7

REGARDING THE SPANISH VERSION OF THE INTERNATIONAL STATISTICAL CLASSIFICATION OF DISEASES, INJURIES AND CAUSES OF DEATH

WHEREAS a great majority of the Spanish-speaking countries are at present, and have been for several decades, using the International Lists of Causes of Death for compiling and publishing their mortality statistics;

WHEREAS it is vitally important for these countries to maintain without interruption their mortality and morbidity statistics in conformity with the International List during the next decade;

WHEREAS it is equally important to foster the adoption of the International List among those Spanish-speaking countries that until now have not used the list in their vital statistics;

WHEREAS the number of these countries, the size of their total population and their growing interest in achieving uniform mortality and morbidity statistics, cannot be overlooked; and

WHEREAS it is indispensable for these countries to have the basic documents for using the present list translated into Spanish as soon as possible, so that their statistical needs may be met in time,

THE CONFERENCE RESOLVES to urge the World Health Organization:

1. to make provisions to translate and publish in Spanish as soon as possible a document containing the Introduction and List of Categories, and to prepare and publish in Spanish the Tabular List and Alphabetical Index;
2. to request the co-operation for this purpose of the international organizations connected with the statistical problems of these countries.

RESOLUTION No. 8
REGARDING METHODS OF INTERNATIONAL CO-OPERATION
IN THE FIELD OF VITAL AND HEALTH STATISTICS

WHEREAS, under its Constitution, the World Health Organization has responsibility and authority to work toward "the attainment by all peoples of the highest level of health";

WHEREAS in recognition of the fact that current and adequate knowledge of the statistical facts in relation to the health of all peoples is requisite to the attainment of this objective, the World Health Organization must collect and tabulate international health statistics and have available vital statistics from the various countries; and

WHEREAS the sources of these statistics exist for the most part in national statistical organizations and health organizations which may have divergent types of records and statistical procedures and which frequently serve under different administrative jurisdictions within the same nation;

THIS CONFERENCE RECOMMENDS the following procedures to the World Health Assembly and to the nations here represented:

1. that an Expert Committee on Health Statistics be created by the World Health Assembly with broad authority to study the statistical problems in the fields of health, including those connected with the registration of births, diseases and deaths;
2. that the Expert Committee decentralize the study of some of these problems to interested and appropriate national health and statistical Agencies which are willing to undertake such work and that the Expert Committee undertake periodic review and international clearance of viewpoints concerning such projects;
3. that the World Health Organization develop its statistical service to such technical competence as to enable it not only to carry out statistical functions within the Organization and to implement the recommendations of the Expert Committee on Health Statistics, but also to furnish consulting service to national Health Administrations and Statistical Agencies;
4. that the World Health Organization convene, as occasion indicates, international technical conferences on problems in the field of vital and health statistics;
5. that in carrying out this work effective co-operation be established and maintained with the interested services of the United Nations and Specialized Agencies.

RESOLUTION No. 9
REGARDING NATIONAL COMMITTEES
ON VITAL AND HEALTH STATISTICS

WHEREAS the needs by Health Organizations for current, reliable and comparable data;

WHEREAS the relatively primitive character of the National Statistical Mechanisms for producing such data;

WHEREAS the intimate relationship between Vital Records, Vital Statistics, Morbidity Statistics and Population Statistics; and

WHEREAS the advantages of developing a degree of international uniformity in certain of these methods and procedures,

THE CONFERENCE RECOMMENDS

1. that all governments establish, either singly or jointly, national committees on Vital and Health Statistics, composed of representatives of administrations entrusted with the compilation of such statistics;
2. that such national committees study broadly the problems of producing satisfactory national and international statistics in the field of Health;

3. that these national committees also study the problems of producing Health Statistics which are related to the family structure and to the Social-Economic, and occupational background of the individual;
4. that these national committees in tropical regions pay particular attention to the statistics needed for tropical diseases;
5. that these national committees in countries facing the problems of population pressure and malnutrition pay particular attention to the statistics needed for these problems;
6. that all national committees co-operate with schools of Medicine and Public Health so as to come to grips with the problems of Statistical Education and Training in the field of Vital and Health Statistics;
7. that in view of the interest signified by delegates from various countries at the Conference:
 - (a) the competent authorities of Belgium, France, Switzerland study the question of completeness and accuracy of Medical Certification of Causes of Death in relation to the confidential character of the certificate;
 - (b) the competent authorities of Canada, and the United States of America prepare an adaptation of the International Statistical Classification of Diseases, Injuries and Causes of Death, to the needs of Armed Services;
 - (c) the Canadian and United States National Committees individually or jointly pay particular attention to the methods by which Health Statistics might be interlinked with other types of related statistics and in such a manner that they will be based on a knowledge of the characteristics and distribution of the population;
 - (d) the Vital Statistics Administration of Switzerland, the United Kingdom and the United States of America study methods of presentation of Statistics of Multiple Causes of Death;
 - (e) the competent authorities of Denmark, France, Norway, Switzerland and the United Kingdom pay particular attention to the problem of Cancer Registers and Statistics;
 - (f) the competent authorities of the United Kingdom and of the United States of America pay particular attention to the methods for obtaining reliable statistics on the frequency and causes of foetal death (classification of periods of gestation under 28 weeks, classification of multiple causes, methods of certification);
 - (g) the competent authorities of France and India pay particular attention to the problems of Morbidity and Mortality from tropical diseases;

(h) the competent authorities of Ecuador, India, Italy and Venezuela study the problems involved in the Statistics of Malaria morbidity;

8. that these national committees shall report their findings and recommendations, from time to time, to an Expert Committee of the World Health Organization for international consideration, clearance of national viewpoints and co-ordination with the interested statistical services of other inter-governmental organizations.

RESOLUTION No. 10
REGARDING THE INSTRUCTION IN STATISTICS
IN MEDICAL SCHOOLS

WHEREAS satisfactory health statistics are difficult to obtain if the doctors have not received proper instruction in this field,

THE CONFERENCE RESOLVES:

That the World Health Organization be invited to survey the instruction given in the medical schools of various countries in the field of health statistics with special emphasis on the methods of collection and interpretation of statistical data and to take any desirable action in this connexion.

I. LIST OF OFFICIAL DELEGATES (+)

BELGIUM

Dr. P. J. J. van de Galseyde, Directeur général de la Santé publique
et de la Famille, Brussels

J. Landrain, Statisticien principal, Statistiques nosologiques,
Ministère de la Santé publique, Brussels

BULGARIA

Dr. T. Tacheff, Professor of the Faculty of Medicine, Sofia

Dr. B. Janeff, Chief of School Hygiene at the Ministry of Public
Health, Sofia

CANADA

Dr. F. S. Burke, Medical Director, Department of National Health
and Welfare, Ottawa

J. T. Marshall, Assistant Dominion Statistician; Acting Director,
Social Welfare Statistics Division, Dominion
Bureau of Statistics, Ottawa

Dr. J. A. Melanson, Chief Medical Officer, New Brunswick Provincial
Department of Health, Fredericton, New Brunswick

Winifred O'Brien, Supervisor of Nosology, Dominion Bureau of
Statistics, Ottawa

Dr. J. Wyllie, Professor of Public Health, Queen's University,
Kingston, Ont.

CHILE

Dr. L. Herve, Professor of Medicine, University of Chile, Santiago

CZECHOSLOVAKIA

Dr. E. Bresky, Medical Superintendent of Social Insurance;
Professor at the Charles University, Prague

CUBA

H. de Ayala, Minister Plenipotentiary of Cuba, Paris

Dr. O. Martinez-Fortun, Chief, Department of National Demography,
Havana

(+) The Delegates whose names are followed by an asterisk are those
who were unable to attend.

DENMARK

Dr. H.C. Gram, Professor at the University of Copenhagen;
Councillor, Public Health Service, Copenhagen

Inger Alsing, Deputy Chief of Section, Statistical Department,
Copenhagen

J. Nielsen, Statistician, Public Health Service, Copenhagen

ECUADOR

Dr. M. Moreno, Paris

ETHIOPIA

S. Ynneseou, First Secretary, Imperial Ethiopian Legation, Paris

J. Ouannou, Attaché, Imperial Ethiopian Legation, Paris

FRANCE

Professeur A.M. Baudouin, Professeur à la Faculté de Médecine
et Doyen; Secrétaire général de l'Académie
de Médecine, Paris

Dr. M. Aubenque, Administrateur à l'Institut National de la
Statistique et des Etudes économiques, Paris

Dr. L. Bernard, Chef du Bureau d'Epidémiologie, Ministère de la
Santé publique, Paris

J. Bourgeois-Pichat, Chef de Service Adjoint à l'Institut
National d'Etudes démographiques, Paris

Professeur L.C. Bugnard, Professeur à la Faculté de Médecine;
Directeur de l'Institut National
d'Hygiène, Paris

H. Bunle⁽⁺⁾, Directeur Honoraire de la Statistique générale
de la France, Paris

Médecin-Commandant J. Caussain, Bureau technique de la
Direction des Services de Santé au
Ministère de la France d'Outre-Mer, Paris

Dr. F. Choffé, Sous-Directeur de l'Action sanitaire et sociale,
Ministère du Travail et de la Sécurité
sociale, Paris

Dr. P.F. Denoix, Chef des Services techniques et de la Section
du Cancer, Institut National d'Hygiène,
Paris

Professeur L. Dérobert, Professeur Agrégé de Médecine Légale;
Chef de Service à l'Institut National
d'Hygiène, Paris

V. Fonsagrive, Administrateur à l'Institut National de la
Statistique et des Etudes économiques, Paris

P. Gasc, Chef de la Division de Démographie, Institut National
de la Statistique et des Etudes économiques,
Paris

J.V.M. Leproux, Consul général, Ministère des Affaires étrangères,
Paris

Médecin-Colonel R. Moynier, Sous-Directeur des Services
médico-sociaux à la Direction Centrale
du Service de Santé, Ministère des Armées,
Paris

R.G. Rivet, Directeur de la Statistique générale, Institut
National de la Statistique, Paris

GREECE

A. Matsas, First Secretary, Greek Embassy, Paris

GUATEMALA

Professor C.M. Pellecer, Minister of Guatemala, Paris

Dr. R. Mollinedo Herrera, Attaché, Guatemalan Legation, Paris

HUNGARY

Dr. T. Szal, Ministerial Councillor, Central Statistical
Office, Budapest

ICELAND

Kr. Albertson, First Secretary, Icelandic Legation, Paris

INDIA

Dr. R.G. Dhayagude, Dean, Seth G.S. Medical College and
King Edward Memorial Hospital, Bombay

IRELAND

T.J. Horan, First Secretary at the Legation of Ireland, Paris

ITALY

Dr. G. Giannelli, Chief, Health Statistics Section of the
Central Statistical Institute, Rome

Dr. P. Didonna, Chief, Medical Inspection of Labour, Ministry
of Labour and Social Security, Rome

Dr. A. Tizzano, Assistant, Institute of Hygiene at the
University, Rome

LUXEMBURG

Dr. P. Schmol, Director, State Practical Laboratory of
Radiology, Luxemburg

MEXICO

Dr. I. Gonzales-Guzman, Director, Institute of Medical and
Biological Studies; Professor, National
University of Mexico, Mexico, D.F.

NETHERLANDS

Dr. C. Banning, Chief Medical Officer of Public Health,
The Hague

Dr. S.T. Bok, Professor in Medicine, University of Leiden;
Chief, Section for Statistics, Institute
for Preventive Medicine, Leiden

Dr. B.J. Salomonson, Medical Officer, Central Bureau of
Statistics, The Hague

NORWAY

Julia E. Backer, Chief, Demographic Section, Central Bureau
of Statistics, Oslo

POLAND

Dr. M. Kacprzak, Professor of Hygiene; Director, State School
of Hygiene; President, National Health
Council, Warsaw

Dr. Irene Domanska, Chief of Section, Ministry of Public
Health, Warsaw

PORTUGAL

Dr. A.A. de Carvalho Dias, Director of Technical Services,
Directorate-General of Health, Lisbon

SIAM

Dr. S. Danegsvang, Chief Officer of Health, Ministry of Public
Health, Bangkok

Dr. B. Boon-Itt, Director of Buddhachinaraj Hospital of the
Department of Medical Service, Ministry
of Public Health, Bangkok

SWEDEN

Dr. J.T. Byttner, Medical Councillor, Central State Organ-
ization for Medicine, Stockholm

SWITZERLAND

Dr. St. Zurukzoglu, Chef de Statistique médicale, Bureau
Fédéral de Statistique, Berne

W. Ott, Chef de la Statistique démographique, Berne

UNITED KINGDOM

Dr. G. North, Registrar General of England and Wales, London

Sir E. Rock Carling, Chairman of the Registrar-General's
Medical Advisory Committee, Ministry
of Health, London

P.J. Cook, General Register Office, London

L.M. Feery, Principal, General Register Office, London

J.G. Kyd, Registrar General for Scotland, Edinburgh

Dr. P.L. McKinlay, Medical Superintendent of Statistics,
General Register Office, Edinburgh

Dr. P. Stocks, Chief Statistician (Medical), General Register
Office, London

UNITED STATES OF AMERICA

Dr. H.L. Dunn, Chief, National Office of Vital Statistics,
United States Public Health Service,
Washington, D.C.

Dr. G. Baehr, President, New-York Academy of Medicine, Mount
Sinai Hospital, New York

Dr. J. Berkson (+), Chief Statistician, Division of Biometry
and Medical Statistics, Mayo Clinic,
Rochester, Minn.

Dr. E.F. Daily, Director, Division of Health Services,
Children's Bureau, Social Security,
Washington, D.C.

E.W. Densen, Chief, Division of Medical Research Statistics,
Veterans Administration, Washington, D.C.

H.F. Dorn, Chairman, Statistical Section, National Cancer
Institute, United States Public Health
Service, Washington, D.C.

W. T. Fales, Director, Statistical Section, City Health
Department, Baltimore; Research Associate,
School of Hygiene, Johns Hopkins University,
Baltimore, Md.

Dr. E.L. Hamilton, Chief, Medical Statistics Division,
Office of the Surgeon General, U.S. Army,
Washington, D.C.

I.M. Moriyama, Chief, Mortality Analysis Section, National
Office of Vital Statistics, United States
Public Health Service, Washington, D.C.

Dr. E. Rogers, Dean, School of Public Health, University of
California, Berkeley, Cal.

Captain R.L. Ware, Chief, Division of Medical Statistics,
Bureau of Medicine and Surgery, Navy
Department, Washington, D.C.

USSR

Professor P. Kouvchinikoff (+), Moscow

VENEZUELA

Dr. D. Curiel, Medical Chief, Division of Epidemiology and
Vital Statistics, Ministry of Health
and Social Welfare, Caracas

Secretary-General: Dr. Y.M. Biraud

Assistant Secretaries-General: Dr. Marie Cakrtova
Dr. P.F. Denoix

Secretaries: Dr. M. Aubenque
J. Bourgeois-Pichat
Dr. F. Choffé
Professeur L. Dérobert
V. Fonsagrive
P. Gasc

Drafting Committee: Professeur L.C. Bugnard
W.T. Fales

Representatives of the Expert Committee (of the World Health Organization) for the Preparation of the Sixth Decennial Revision of the International Lists of Diseases and Causes of Death:

Dr. P. Stocks (Chairman of the Expert Committee), Chief Statistician (Medical), General Register Office, London

W.T. Fales (Vice-Chairman of the Expert Committee), Director, Statistical Section, City Health Department, Baltimore; Research Associate, School of Hygiene, Johns Hopkins University, Baltimore, Md.

Dr. A.H.T. Robb-Smith (Rapporteur of the Expert Committee), Nuffield Reader in Pathology, University of Oxford

WORLD HEALTH
ORGANIZATIONORGANISATION MONDIALE
DE LA SANTÉFIRST WORLD HEALTH ASSEMBLY

A/4

ANNEX II. Rev.1

5 August 1948

REPORT OF THE
INTERNATIONAL CONFERENCE FOR THE SIXTH DECENNIAL
REVISION OF THE INTERNATIONAL LISTS OF DISEASES AND
CAUSES OF DEATH

ANNEXE II. REVISEDI. LIST OF OFFICIAL DELEGATES (*)

BELGIUM

Dr. P.J.J. van de Calseyde, Directeur général de l'Hygiène,
Ministère de la Santé publique et de la
Famille, Brussels

J. Landrain, Statisticien principal, Statistiques nosolo-
giques, Ministère de la Santé publique
et de la Famille, Brussels

BULGARIA

Dr. T. Tacheff, Professor of Clinical Medicine, University
of Sofia

Dr. B. Janeff, Chief, Section of School Hygiene, Ministry
of Public Health, Sofia

CANADA

Dr. F. S. Burke, Medical Director, Department of National
Health and Welfare, Ottawa

J.T. Marshall, Assistant Dominion Statistician; Acting Director,
Social Welfare Statistics Division,
Dominion Bureau of Statistics, Ottawa

Dr. J.A. Melanson, Chief Medical Officer, New Brunswick
Provincial Department of Health,
Fredericton, New Brunswick

Winifred O'Brien, Supervisor of Nosology, Dominion Bureau of
Statistics, Ottawa

Dr. J. Wyllie, Professor of Public Health, Queen's University
Kingston, Ont.

(*) The Delegates whose names are followed by an asterisk
are those who were unable to attend.

CHILE

Dr. L. Herve, Associate Professor of Medicine, University of Chile, Santiago

CZECHOSLOVAKIA

Dr. E. Bresky, Medical Chief, Central Institute of Social Insurance; Associate Professor at the Charles University, Prague

CUBA

H. de Ayala, Minister Plenipotentiary of Cuba, Paris

Dr. O. Martinez-Fortun, Chief, Department of National Demography, Havana

DENMARK

Dr. H.C. Gram, Professor of Internal Medicine, University of Copenhagen

Inger Alsing, Deputy Chief of Section, Statistical Department, Copenhagen

J. Nielsen, Statistician, Public Health Service, Copenhagen

ECUADOR

Dr. M. Moreno, Paris

ETHIOPIA

S. Ynnessou, First Secretary, Imperial Ethiopian Legation, Paris

J. Ouannou, Attaché, Imperial Ethiopian Legation, Paris

FRANCE

Professeur A.M. Baudouin, Professeur à la Faculté de Médecine et Doyen; Secrétaire général de l'Académie de Médecine, Paris

Dr. M. Aubenque, Administrateur à l'Institut National de la Statistique et des Etudes économiques, Paris

Dr. L. Hernard, Chef du Bureau d'Epidémiologie, Ministère de la Santé publique, Paris

J. Bourgeois-Pichat, Chef de Service Adjoint à l'Institut National d'Etudes démographiques, Paris

Professeur L.C. Bugnard, Professeur à la Faculté de Médecine; Directeur de l'Institut National d'Hygiène, Paris

H. Bunle⁽⁺⁾, Directeur Honoraire de la Statistique générale de la France, Paris

Médecin-Commandant J. Caussain, Service de Santé colonial, Bureau technique de la Direction des Services de Santé au Ministère de la France d'Outre-Mer, Paris

Dr. F. Choffé, Sous-Directeur de l'Action sanitaire et sociale, Ministère du Travail et de la Sécurité sociale, Paris

Dr. P.F. Dencix, Chef des Services techniques et de la Section du Cancer, Institut National d'Hygiène, Paris

Professeur L. Dérobert, Professeur Agrégé de Médecine légale à la Faculté de Médecine de Paris; Chef de Service à l'Institut National d'Hygiène, Paris

V. Fonsagrive, Administrateur à l'Institut National de la Statistique et des Etudes économiques, Paris

P. Gasc, Chef de la Division de Démographie, Institut National de la Statistique et des Etudes économiques, Paris

J.V.M. Leproux, Consul général, Ministère des Affaires étrangères, Paris

Médecin-Colonel R. Moynier, Sous-Directeur des Services médico-sociaux à la Direction Centrale du Service de Santé, Ministère des Armées, Paris

R.G. Rivet, Directeur de la Statistique générale, Institut National de la Statistique, Paris

GREECE

A. Matsas, First Secretary, Greek Embassy, Paris

GUATEMALA

Professor C.M. Pellecer, Minister of Guatemala, Paris

Dr. R. Mollinedo Herrera, Attaché, Guatemalan Legation, Paris

HUNGARY

Dr. T. Szel, Ministerial Councillor, Central Statistical Office,
Budapest

ICELAND

Kr. Albertson, First Secretary, Icelandic Legation, Paris

INDIA

Dr. R.G. Dhayagude, Dean, Seth G.S. Medical College and King
Edward Memorial Hospital, Bombay

IRELAND

T.J. Horan, First Secretary at the Legation of Ireland, Paris

ITALY

Dr. G. Giannelli, Chief, Health Statistics Section of the
Central Statistical Institute, Rome

Dr. P. Didonna, Chief, Medical Inspection of Labour, Ministry of
Labour and Social Security, Rome

Dr. A. Tizzano, Assistant, Institute of Hygiene, University of
Rome

LUXEMBURG

Dr. P. Schmol, Directeur du Laboratoire sérologique de l'Etat,
Luxemburg

MEXICO

Dr. I. Gonzales-Guzman, Director, Institute of Medical and
Biological Studies, Professor, National
University of Mexico, Mexico, D.F.

NETHERLANDS

Dr. C. Banning, Chief Medical Officer of Public Health, The Hague

Dr. S.T. Bok, Professor in Medicine, University of Leiden;
Chief, Section for Statistics, Institute
for Preventive Medicine, Leiden

Dr. B.J. Salomonson, Medical Officer, Central Bureau of
Statistics, The Hague

NORWAY

Julia E. Backer, Ph.D., Chief, Demographic Section, Central Bureau of Statistics, Oslo

POLAND

Dr. M. Kacprzak, Professor of Hygiene; Director, State School of Hygiene; President, National Health Council; Warsaw

Dr. Irene Domanska, Chief of Section, Ministry of Public Health, Warsaw

PORTUGAL

Dr. A.A. de Carvalho Dias, Director of Technical Services, Directorate-General of Health, Lisbon

SIAM

Dr. S. Daensvang, Chief Officer of Health, Ministry of Public Health, Bangkok

Dr. B. Boon-Itt, Director of Buddhachinaraj Hospital of the Department of Medical Service, Ministry of Public Health Bangkok

SWEDEN

Dr. J.T. Byttner, Medical Councillor, Central State Organization for Medicine, Stockholm

SWITZERLAND

Dr. St. Zurukzoglu, Expert de Statistique médicale, Bureau Fédéral de Statistique, Berne

W. Ott, Ph.D., Chef de la Statistique démographique, Berne

UNITED KINGDOM

G. North, LL.D., Registrar-General of England and Wales, London

Sir Ernest Rock Carling, Chairman of the Registrar-General's Medical Advisory Committee, London

P.J. Cook, General Register Office, London

L.M. Feery, Principal, General Register Office, London

J.G. Kyd, Registrar General for Scotland, Edinburgh

Dr. P.L. McKinlay, Medical Superintendent of Statistics,
General Register Office, Edinburgh

Dr. P. Stocks, Chief Statistician (Medical), General Register
Office, London

UNITED STATES OF AMERICA

Dr. H.L. Dunn, Chief, National Office of Vital Statistics,
United States Public Health Service,
Washington, D.C.

Dr. G. Baehr, President, New York Academy of Medicine, Mount
Sinai Hospital, New York

Dr. J. Berkson⁽⁺⁾, Chief Statistician, Division of Biometry
and Medical Statistics, Mayo Clinic,
Rochester, Minn.

Dr. .F. Daily, Director, Division of Health Services, U.S.
Children's Bureau, Washington, D.C.

P.M. Densen, Sc.D., Chief, Division of Medical Research
Statistics, Veterans Administration,
Washington, D.C.

H.F. Dorn, Ph.D., United States Public Health Service,
Washington, D.C.

W.T. Fales, Sc.D., Director, Statistical Section, Baltimore
City Health Department; Research Associate,
School of Hygiene, Johns Hopkins University,
Baltimore, Md.

E.L. Hamilton, Chief, Medical Statistics Division, Office
of the Surgeon General, U.S. Army,
Washington, D.C.

I.M. Moriyama, Ph.D., Chief, Mortality Analysis Section,
National Office of Vital Statistics,
United States Public Health Service,
Washington, D.C.

Dr. E. Rogers, Professor of Public Health and Medical
Administration; Dean, School of Public
Health, University of California,
Berkeley, Cal.

Dr. R.L. Ware, Chief, Division of Medical Statistics, Bureau
of Medicine and Surgery, Navy Department,
Washington, D.C.

Secretaries: Dr. M. Aubenque
 J. Bourgeois-Pichat
 Dr. F. Choffé
 Professeur L. Dérobert
 V. Fonsagrive
 P. Gasc

Drafting Committee: Professeur L.C. Bugnard
 W.T. Fales

Representatives of the Expert Committee (of the World Health Organization) for the Preparation of the Sixth Decennial Revision of the International Lists of Diseases and Causes of Death:

Dr. P. Stooks (Chairman of the Expert Committee), Chief Statistician (Medical), General Register Office, London

W.T. Fales (Vice-Chairman of the Expert Committee), Director, Statistical Section, Baltimore City Health Department; Research Associate, School of Hygiene, Johns Hopkins University, Baltimore, Md.

Dr. A.H.T. Robb-Smith (Rapporteur of the Expert Committee), Nuffield Reader in Pathology, University of Oxford