

Shocking Finding: Life Expectancy in America Continues to Plummet

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Provisional estimates and finalized reports reveal a significant decline in American life expectancy with young adults bearing the brunt of excess deaths

The gender life expectancy gap in the U.S. has reached its widest point since 1996, primarily driven by COVID-19 and the opioid crisis, highlighting systemic issues in health care and societal structures

Contrary to historical trends, the burden of death now falls disproportionately on young and working-aged Americans, prompting concerns about the underlying causes and the absence of a public health response

Amidst censorship and controversy, there's a growing call for a thorough investigation into pandemic management, including lockdowns, treatment protocols and vaccine deployment, to understand the root causes of excess deaths

The need for a new approach to global health is underscored by the current crisis, with emphasis on addressing health disparities and reconnecting with consciousness, as advocated in my forthcoming book, "The Power of Choice"

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As it turns out, one of the biggest news stories of 2023 never made the headlines, which is understandable considering its implications. The world is now grappling with the aftermath of a global crisis that, thanks to the sophisticated and meticulously engineered brainwashing strategies deployed by government and mass media, are unbeknownst to the masses.

In August 2022, provisional life expectancy estimates^{1,2} for 2021 were released showing Americans had lost nearly three years of life expectancy during 2020 and 2021. In December 2022, the finalized mortality report³ confirmed these shocking data.

In 2019, the average life span of Americans of all ethnicities was 78.8 years.⁴ By the end of 2020, it had dropped to 77.0 years⁵ and by the end of 2021, it was 76.4.⁶ As noted by the U.S. Centers for Disease Control and Prevention in its finalized mortality report for 2021,⁷ “From 2020 to 2021, death rates increased for each age group 1 year and over ...”

At the time, Virginia Commonwealth University professor of population health Dr. Steven Woolf told USA Today,⁸ “That means all the medical advances over the past quarter century have been erased.”

COVID Was a Turning Point

The COVID-19 pandemic was a turning point in human history and we are just now compiling the data to document the impact of government’s irrational responses. The big news that virtually no one is talking about is that a) the life expectancy of men has dropped far more than that of women, and b) young, working-age adults make up the bulk of excess deaths.⁹

This should be headline news across all mainstream media stations; instead, it has been suppressed probably because pandemic measures likely play a significant role in this trend. I didn’t even find out about it until I saw Jimmy Dore’s interview with Dr. Pierre Kory (above).

According to research published in JAMA Internal Medicine in November 2023:^{10,11,12,13}

“As life expectancy at birth in the U.S. decreased for the second consecutive year, from 78.8 years (2019) to 77.0 years (2020) and 76.1 years (2021), the gap between women and men widened to 5.8 years, its largest since 1996 and an increase from a low of 4.8 years in 2010.

For more than a century, U.S. women have out-lived U.S. men, attributable to lower cardiovascular and lung cancer death rates related largely to differences in smoking behavior. This study systematically examines the contributions of COVID-19 and other underlying causes of death to the widened gender life expectancy gap from 2010 to 2021.”

The opioid crisis further compounded the trend, driving down male life expectancy through a surge in drug overdoses, accidents and suicides. Deaths of despair, a term encapsulating the rise in suicide, drug use disorders and alcoholic liver disease, are often linked to economic hardship, depression and stress.

These deaths have particularly impacted men, marking a significant shift in the life expectancy landscape. Studies now reveal a stark reality, namely that working-age men are increasingly bearing the brunt of the damage from the COVID-19 crisis.

Widening Gender Gap in Life Expectancy

The architects of this carefully orchestrated plot have produced these results with chilling precision. Their goal was not merely to unleash a virus, but to test the resilience of societal structures and the adaptability of health care systems to unprecedented stressors by manipulating variables, including health care access and public health responses.

The pandemic disproportionately affected men, not solely due to biological predispositions, but also due to social and behavioral patterns. For example, men's reluctance to seek medical help and prevalence in high-risk behaviors likely contributed significantly to the observed life expectancy gap.

As the world emerges from the shadow of the pandemic, we are now forced to reconsider the foundational aspects of health care, employment and social support systems. As detailed in the JAMA paper, the gender gap in life expectancy in the U.S. — a difference of nearly six years — is the largest it's been since 1996:¹⁴

"The gender life expectancy gap increased 0.23 years from 2010 to 2019 and 0.70 years from 2019 to 2021. Prior to COVID-19 in 2020, the largest contributors to worsening life expectancy for men vs women were unintentional injuries, diabetes, suicide, homicide, and heart disease ...

The absolute difference in age-adjusted death rates between men and women increased from 252 to 315 per 100,000 between 2010 and 2021, with a persistent gap for heart disease and widening gaps for COVID-19, unintentional injuries, and several other causes.

This analysis finds that COVID-19 and the drug overdose epidemic were major contributors to the widening gender gap in life expectancy in recent years."

Young Americans Are Dying at Frightening Pace

In a December 12, 2023, article for The Hill,¹⁵ Kory also reviewed the actuarial data, which reveals another shocking shift: The burden of death now falls disproportionately on the young and working-aged, a demographic that once epitomized health and vitality within American society. The Centers for Disease Control and Prevention's decision to archive its excess deaths webpage in September, ceasing updates, adds a layer of mystery to this already perplexing situation.

The financial implications for insurers are profound. The surge in death claims since 2020 reflects the gravest increase since the 1918 influenza pandemic, prompting calls for an early-warning system to safeguard the insured against emerging health threats. As noted by Kory:¹⁶

"Unlike in the pandemic's early phase, these deaths are not primarily among the old. For people 65 and over, deaths in the second quarter of 2023 were 6% below the pre-pandemic norm, according to a new report from the [Society of Actuaries](#).

Mortality was 26% higher among insured 35-to-44-year-olds, and 19% higher for 25-to-34-year-olds, continuing a death spike that peaked in the third quarter of 2021 at a

staggering 101% and 79% above normal, respectively.”

Interestingly, the increase in mortality is not confined to the elderly but is significantly higher among younger, insured adults. This shift raises critical questions about the causes, which extend beyond COVID-19 to include rises in liver, kidney and cardiovascular diseases, diabetes, and drug overdoses, though not predominantly among the young working class.

This scenario begs a critical examination: why has the response from public health officials, who were once at the forefront of the pandemic management, been conspicuously absent in addressing these excess deaths?

The United Kingdom’s independent public inquiry into post-pandemic excess deaths offers a stark contrast, highlighting the need for a similar, rigorous investigation in the United States. This inquiry should scrutinize the pandemic’s management, including lockdowns, treatment protocols, and the rapid deployment of vaccines, amidst over a million reports of potential adverse effects and emerging studies on post-vaccination syndromes.

The unparalleled censorship of dissent and the enforcement of pandemic measures raise further concerns about the decisions made during the crisis. As actuaries warn of continued excess deaths — particularly among younger insured individuals — until 2030, the necessity for a comprehensive assessment becomes clear.

This evaluation must dissect what strategies succeeded and which failed, to better prepare for future pandemics and safeguard all segments of society, especially the most vulnerable.

We Need a New Paradigm

It couldn’t be more obvious — as we are now collecting the data that confirms everything I’ve been saying these past few years — that we have been lied to and are now reaping the results of that deception.

It is my intention to usher in a new era of global health — one that recognizes and addresses the intricate web of factors that contribute to health disparities. One of the primary factors being the disconnection between ourselves and consciousness.

I’m just finishing my new book, “The Power of Choice,” which I expect to be published in the next few months. It is designed to be a seminal work addressing the foundational issues that have led to the desperate state of affairs that we are now in. In many ways it’s a handbook for how to get out of this crisis.

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Notes

^{1, 6} [CDC Provisional Life Expectancy Estimates for 2021, August 2022](#)

² [New York Times August 31, 2022 \(Archived\)](#)

^{3, 5, 7} [CDC NCHS Data Brief December 2022](#)

⁴ [CDC Press release July 21, 2021](#)

⁸ [USA Today December 22, 2022](#)

^{9, 15, 16} [The Hill December 12, 2023](#)

^{10, 14} [JAMA Internal Medicine November 2023; 184\(1\)](#)

¹¹ [Harvard Press Release November 13, 2023](#)

¹² [STAT News November 13, 2023](#)

¹³ [Medical Xpress November 13, 2023](#)

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