

and merged on close matches of name, date of birth, sex and address. For each death, data were updated into one complete record and underlying cause re-coded when necessary.

Results 38% of all injury deaths were not registered 13% of the remainder were misclassified as SSIs. Capture rate of homicides increased from 42% to 85%. Homicides had been mis-classified as Accidents caused by firearms and Legal interventions. Homicide rose in rank from 7th leading cause of death to 5th. Proportional injury mortality due to homicides increased from 18.3% to 31.5%. Capture rate of fatal road traffic injuries (RTIs) increased from 28% to 83% RTIs rose in rank from 21st leading cause of death to 19th Proportional injury mortalities for RTIs increased from 7.1% to 11.5% Capture rate of fatal self-inflicted injuries increased from 19% to 97%. Self-inflicted deaths were usually misclassified as Accidental threats to breathing and Accidental poisoning.

Conclusion That estimates based on published injury mortalities would be grossly underestimated, but every effort should be taken to ensure the completeness of data, especially the training of certifying physicians in the correct medical certification of cause of death.

0364 WHERE DO FATAL INJURIES GO?

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Aim To determine the quality of external cause of death data.

Methodology Data on all injury deaths were captured from multiple sources police station diaries, autopsy reports, coroners inquests, hospital records in addition to death certificates from the Registrars Office in Jamaica. Records were sorted