

## Cardiovascular Health

### Key Findings

Major cardiovascular diseases (heart disease and stroke) accounted for 34% of all Allen County adult deaths from 2005-2007 (Source: ODH Information Warehouse). The 2009 Allen County assessment found that 7% of adults had a heart attack and 2% had a stroke at some time in their life. Over two-fifths (41%) of Allen County adults have been diagnosed with high blood pressure and 34% have high blood cholesterol, two known risk factors for heart disease and stroke.

### Allen County Leading Types of Death 2005-2007

**Total Deaths: 3,070**

1. Heart Disease (28% of all deaths)
2. Cancers (23%)
3. Stroke (6%)
4. Chronic Lower Respiratory Diseases (6%)
5. Alzheimer's Disease (4%)

*(Source: ODH Information Warehouse, updated 3-15-09)*

### Heart Disease and Stroke

- ◆ In 2009, 7% of Allen County adults reported they had a heart attack or myocardial infarction, increasing to 18% of those over the age of 65, 12% of those with incomes less than \$25,000, and 10% of males.
- ◆ 11% of adults reported they had angina or coronary heart disease, increasing to 26% of those over the age of 65.
- ◆ 2% of Allen County adults reported having had a stroke.

### High Blood Pressure (Hypertension)

- ◆ Over two-fifths (41%) of Allen County adults had been diagnosed with high blood pressure. The 2007 BRFSS reports hypertension prevalence rates of 28% for Ohio and the U.S.
- ◆ 80% of adults who were diagnosed with high blood pressure were taking blood pressure medication.
- ◆ 68% of adults had their blood pressure checked in the past 6 months and 84% had it taken in the past year.
- ◆ Allen County adults diagnosed with high blood pressure were more likely to:
  - Be male (45%)
  - Be age 65 years or older (66%)
  - Be classified as obese by Body Mass Index-BMI (60%)

### High Blood Cholesterol

- ◆ Over one-third (34%) of adults had been diagnosed with high blood cholesterol. The 2007 BRFSS reported that 40% of Ohio adults and 38% of U.S. adults have been told they have high blood cholesterol.
- ◆ Half (50%) of adults had their blood cholesterol checked in the past year.
- ◆ Allen County adults with high blood cholesterol were more likely to:
  - Be age 65 years and older (55%)
  - Be classified as obese by Body Mass Index-BMI (41%)

#### Ohio Leading Types of Death 2005-2007

1. Heart Disease (26% of all deaths)
2. Cancers (23%)
3. Chronic Lower Respiratory Diseases (6%)
4. Stroke (5%)
5. Accidents- Unintentional Injuries (4%)

*(Source: ODH Information Warehouse, updated 3-15-09)*

#### United States Leading Types of Death 2005

1. Heart Disease (27% of all deaths)
2. Cancers (23%)
3. Stroke (6%)
4. Chronic Lower Respiratory Diseases (5%)
5. Accidents- Unintentional Injury (5%)

*(Source: CDC, FASTATS)*

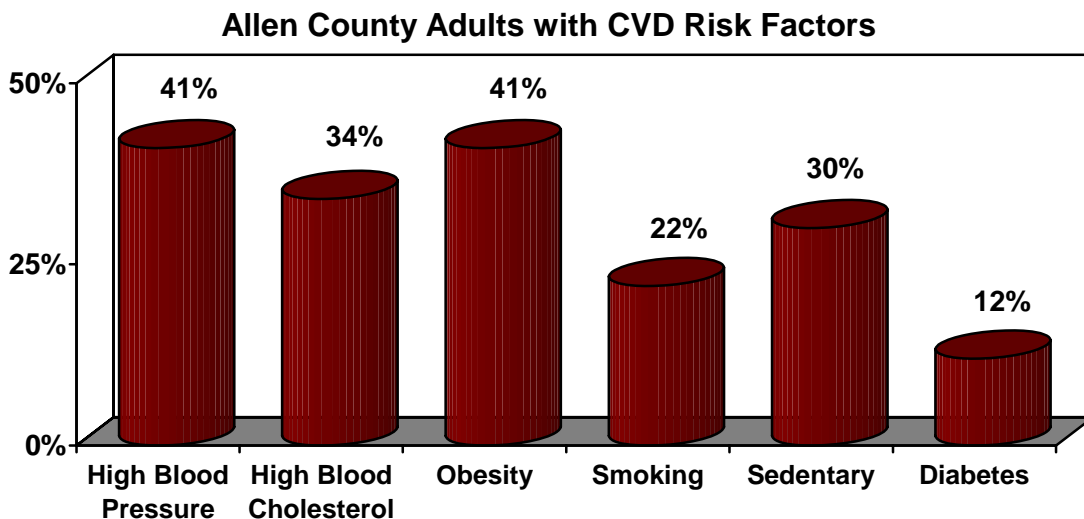
### 2002 Allen County Comparisons

- ◆ 6.7% of Allen County residents reported they had a heart attack.
- ◆ 33.8% of adults were told by a health care professional that they had high blood pressure.
- ◆ 32.2% of adults were told by a health care professional that they had high blood cholesterol.

*(Source: Allen County Assessment 2002)*

## Cardiovascular Health

The following graph demonstrates the percentage of Allen County adults who had major risk factors for developing cardiovascular disease (CVD). *(Source: 2009 Allen County Assessment)*



*Source: 2009 Allen County Health Risk and Community Needs Assessment*

### Risk Factors for Cardiovascular Disease That Can Be Modified or Treated:

**Cholesterol** – High blood cholesterol alone increases the risk for stroke and heart disease; however, the risk is even greater when high blood cholesterol is compounded with other risk factors such as smoking, sedentary lifestyle, and obesity.

**High Blood Pressure** – High blood pressure causes the heart to enlarge and weaken over time. Other risks associated with high blood pressure include stroke, heart attack, congestive heart failure, and kidney failure. When compounded with risk factors such as smoking, sedentary lifestyle, and obesity, the risk for heart attack and stroke dramatically increases.

**Obesity and Overweight** – Excess weight increases strain on the heart, which could lead to heart disease or stroke even with no other existing risk factors. Being overweight or obese affects blood cholesterol and blood pressure. It can increase the risk of developing diabetes and it may make this disease more difficult to control.

**Smoking** – Smokers are 2 to 4 times more likely to develop heart disease than nonsmokers. For smokers the risk for sudden death related to heart disease is twice the risk for nonsmokers. Smokers are also ten times more likely to develop peripheral vascular disease than nonsmokers, a disease typically in the peripheral (surface) arteries of the legs in which fatty deposits narrow the arteries, decreasing circulation. Environmental tobacco smoke (secondhand smoke) also increases risk of heart disease.

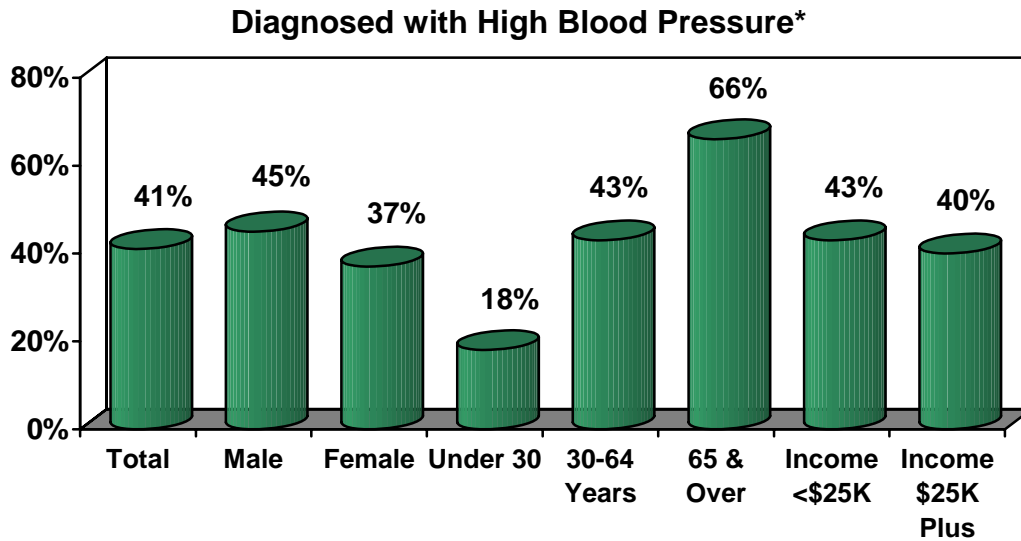
**Physical Inactivity** – Exercise can lower blood cholesterol and blood pressure, decreases the incidence of diabetes, and help with weight management. Vigorous exercise is most beneficial in preventing cardiovascular disease; however, moderate intensity is also beneficial if done long term.

**Diabetes Mellitus** – 75% of people with diabetes die from some type of disease affecting blood vessels or the heart. Controlling blood sugar (glucose) is very important, although there remains an increased risk for heart disease even when blood glucose levels are managed.

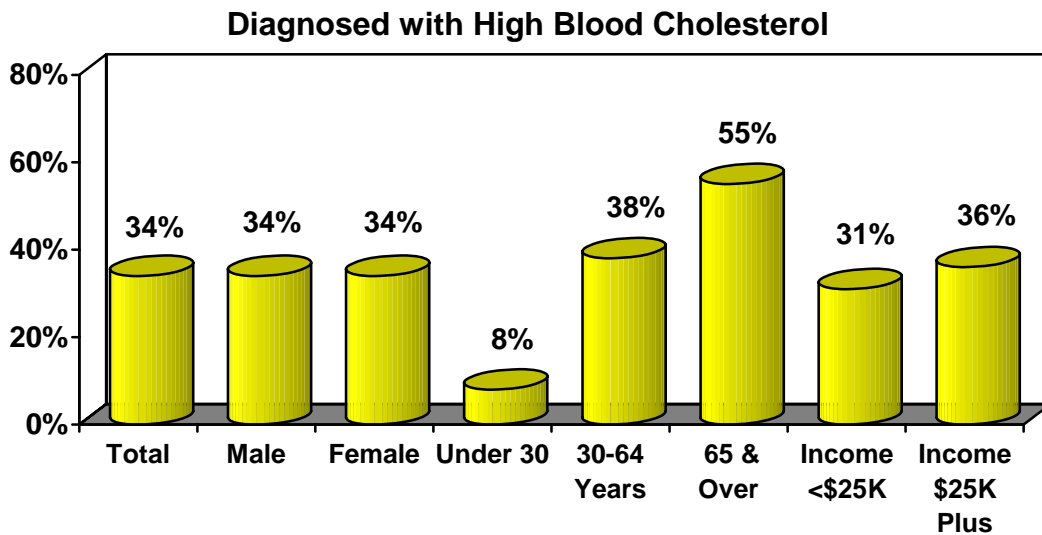
*(Source: American Heart Association, Risk Factors for Coronary Heart Disease, 2-9-05)*

## Cardiovascular Health

The following graphs show the number of Allen County adults who have been diagnosed with high blood pressure or high blood cholesterol. Examples of how to interpret the information on the first graph include: 41% of all Allen County adults have been diagnosed with high blood pressure, 45% of all Allen County males, 37% of all females, and 66% of those 65 years and older.



*\*Does not include respondents who indicated high blood pressure during pregnancy only.  
Source: 2009 Allen County Health Risk and Community Needs Assessment*

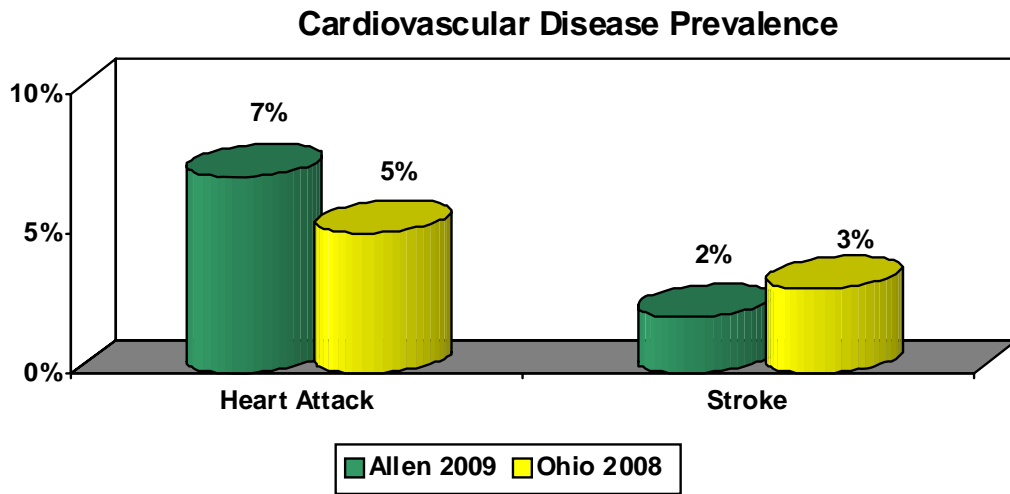


*Source: 2009 Allen County Health Risk and Community Needs Assessment*

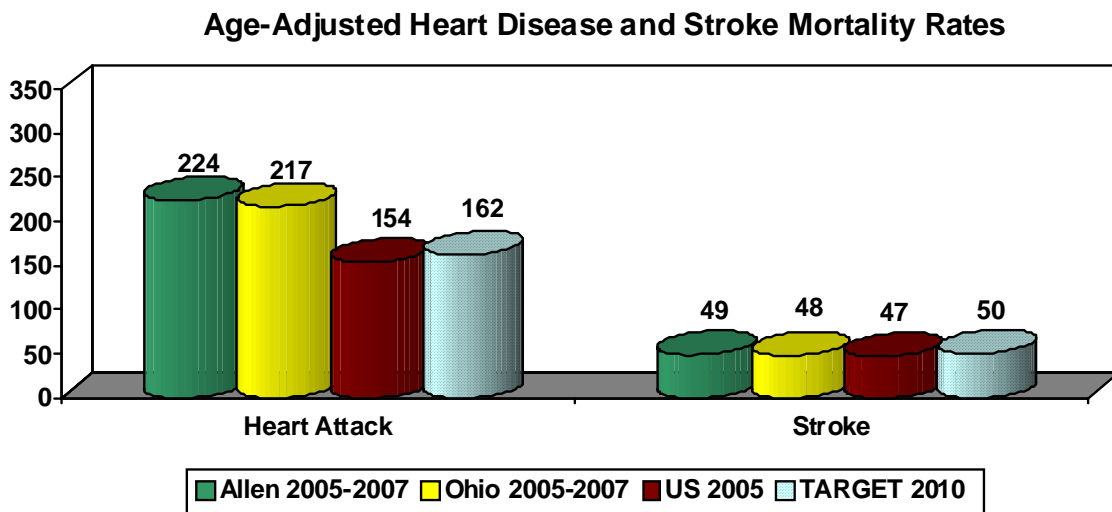
## Cardiovascular Health

The following graphs show the Allen County and Ohio age-adjusted mortality rates per 100,000 population for heart disease and stroke by gender and race/ethnicity.

- When age differences are accounted for, the statistics indicate that from 2005-2007 the Allen County heart disease mortality rate is higher than the figures for the state, the U.S and the Healthy People 2010 target.
- The Allen County age-adjusted stroke mortality rate for 2005-2007 is above the state figures and the nation and below the target rate.
- Disparities exist for heart disease mortality rates by gender in Allen County and Ohio.



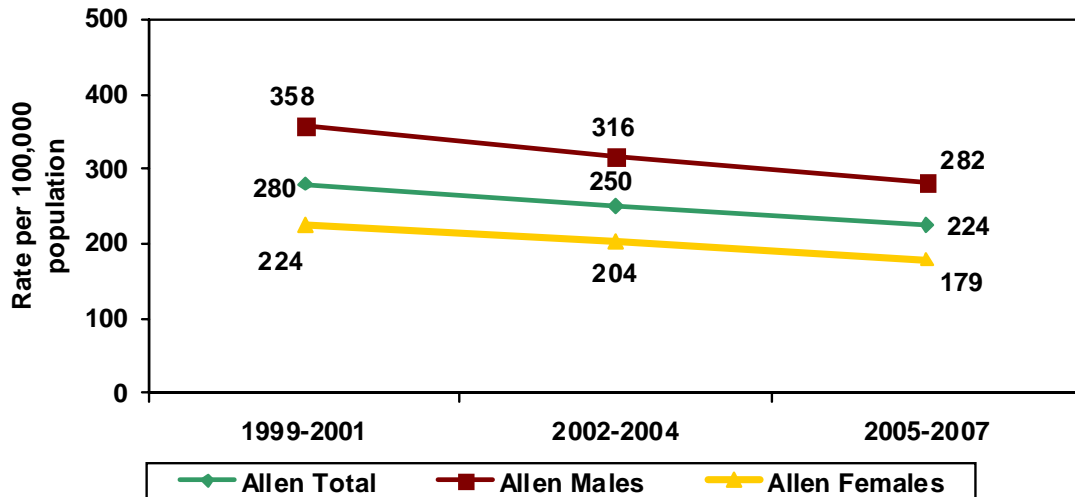
(Source: 2009 Allen Assessment and BRFSS)



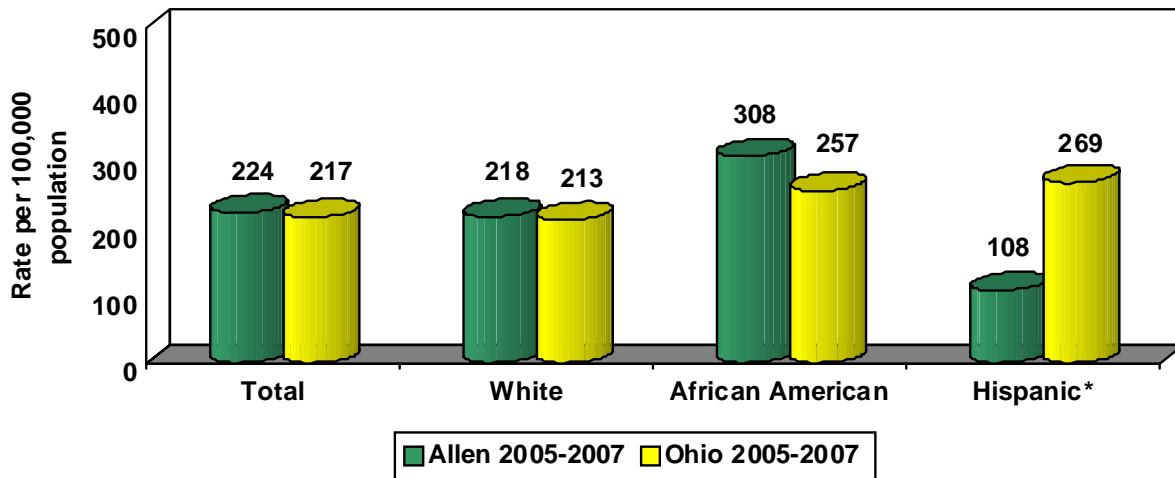
*Graph reports age-adjusted rates/100,000 population, 2000 standard  
 The Healthy People 2010 Target goal of heart attack mortality is reported for Coronary Heart Disease  
 (Source: ODH Information Warehouse, updated 3-15-09, CDC Wonder Data 2010)*

## Cardiovascular Health

**Allen County Age-Adjusted Heart Disease Mortality Rates by Gender**



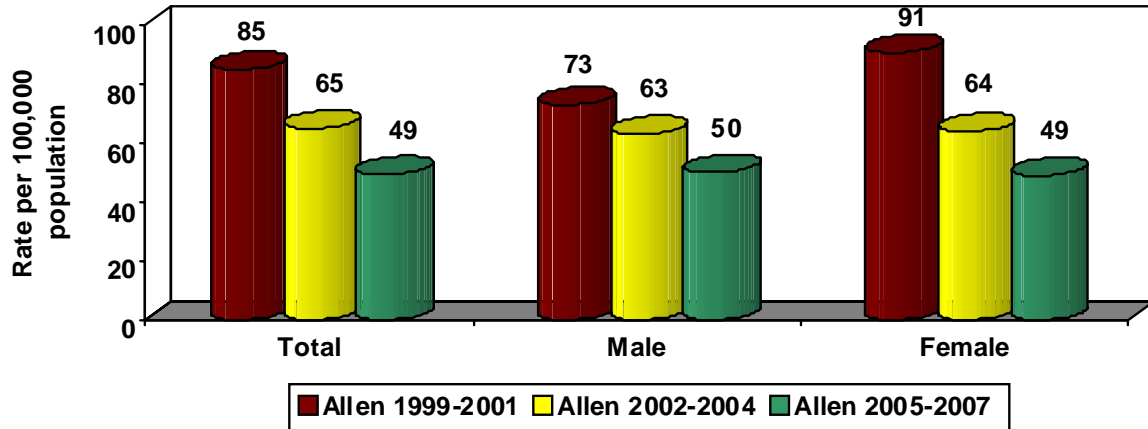
**Age-Adjusted Heart Disease Mortality Rates by Race/Ethnicity**



*\*There were less than 5 Hispanic heart disease deaths in Allen County, so the rate should be used with caution.  
 (Source for graphs: ODH Information Warehouse, updated 3-15-09)*

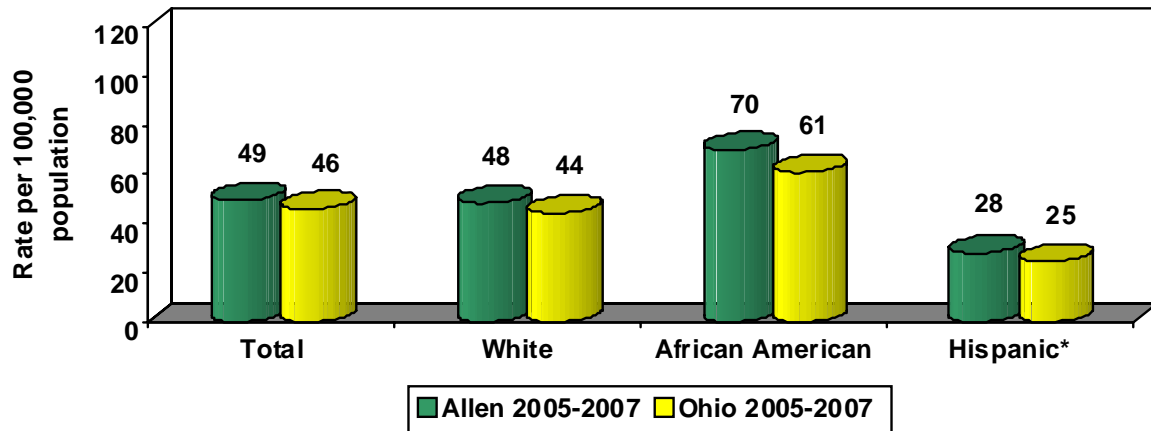
# Cardiovascular Health

### Age-Adjusted Stroke Mortality Rates by Gender



*(Source: ODH Information Warehouse, updated 3-15-09)*

### Age-Adjusted Stroke Mortality Rates by Race/Ethnicity



*\*There were less than 5 Hispanic stroke deaths in Allen County between the years 2005-2007, so the rate should be used with caution.  
(Source: ODH Information Warehouse, updated 3-15-09)*

## Cardiovascular Health

### Healthy People 2010 Objectives

#### High Blood Pressure

Objective	Target	U.S. Baseline	Allen Survey Population (2009)
12-09: Reduce proportion of adults with high blood pressure (HBP)	14%	31%* Adults age 20 and older (2004)	41%
12-10: Increase proportion of adults with high blood pressure whose BP is under control	68%	36% Adults age 18 and up (2004)	80%
12-11: Increase proportion of adults with high BP who are taking action (i.e., losing weight, increased exercise, decreased sodium intake) to control BP	98%	93% Adults age 18 and up (2003)	N/A
12-12: Increase proportion of adults who had BP measured within the preceding 2 years and can state whether BP is normal or higher	95%	90% Adults age 18 and up (2003)	93%

N/A= not available

\*All U.S. figures age-adjusted to 2000 population standard.  
(Source: Healthy People 2010, DATA 2010)

#### Blood Cholesterol

Objective	Target	U.S. Baseline*	Allen Survey Population (2009)
12-13: Decrease mean total blood cholesterol levels among adults	199 mg/dl	202 mg/dl Adults age 20 and up (2004)	N/A
12-14: Decrease proportion of adults with high total blood cholesterol (TBC)	17%	17% Adults age 20 & up with TBC>240 mg/dl (2004)	34%
12-15: Increase proportion of adults who had their blood cholesterol checked within the preceding 5 years	80%	73% Adults age 18 and up (2003)	69%

\*All U.S. figures age-adjusted to 2000 population standard.  
(Source: Healthy People 2010, DATA 2010)