

Heart failure strikes younger African-Americans at the same rate as older Caucasians

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Heart failure—a disabling and often deadly form of heart disease—is hitting African Americans in their thirties and forties at the same rate as Caucasians in their fifties and sixties, according to a study featured as the lead article of the March 19 issue of the *New England Journal of Medicine*.

One in 100 African-American men and women developed <u>heart failure</u> at an average age of 39, 20 times the rate in Caucasians, according to Racial Differences in Incident Heart Failure Among Young Adults. Heart failure in African Americans was associated with <u>risk factors</u> such as hypertension and obesity that were already present when these adults were in their twenties.

"These findings should be a wake-up call on the need for African Americans and physicians to address risk factors that can lead to heart failure. Heart failure is disproportionately hitting African Americans in the prime of their lives," said Kirsten Bibbins-Domingo, Ph.D., M.D., lead author of the study and a scholar with the Harold Amos Medical Faculty Development Program of the Robert Wood Johnson Foundation. Bibbins-Domingo is an assistant professor of medicine, epidemiology and biostatistics at the University of California, San Francisco (UCSF) and co-director of the UCSF Center for Vulnerable Populations at San Francisco General Hospital.



Each year, heart failure—also known as congestive heart failure—affects about 5 million people in the United States and results in nearly 300,000 deaths, according to the National Heart, Lung, and Blood Institute, a part of the National Institutes of Health. Heart failure affects the heart's ability to pump blood to the lungs or oxygen-rich blood to the rest of the body and can cause debilitating fatigue, shortness of breath and, eventually, death.

Heart failure is traditionally perceived as a form of heart disease that mostly affects the elderly. The results of the study suggest, however, that heart failure can occur at much younger ages, particularly among African Americans.

Physicians and patients should be aware of the risk factors such as hypertension and obesity and work to prevent and treat these conditions, even among young adults.

"These findings illustrate the importance of identifying solutions to the social, economic, environmental and health care-related factors that contribute to persistent health disparities," said Robert Wood Johnson Foundation President and CEO Risa Lavizzo-Mourey, M.D., M.B.A. "The study results also highlight the urgency of reversing the childhood obesity epidemic. Today's unhealthy children are tomorrow's unhealthy adults. We know that obese children are being diagnosed with conditions previously considered adult illnesses, such as type 2 diabetes and hypertension, and they're at higher lifetime risk for a host of serious health problems, including heart disease, stroke, diabetes, asthma and some forms of cancer. The harsh reality is that, unless we act now to reverse the epidemic of childhood obesity, we may raise the first generation of Americans who will live sicker and die younger than their parents."

This study found that each 10 mmHg increase in diastolic blood pressure



(the "bottom" number) among African Americans in their twenties doubles the likelihood of developing heart failure when they are in their forties. "It doesn't matter how young a patient is—hypertension needs to be diagnosed and treated," Bibbins-Domingo said. "The longer you have uncontrolled hypertension, the greater the chance that you will develop heart failure."

Young adults are often unaware that they have hypertension, and even when aware are often untreated or undertreated. Physicians may be reluctant to treat younger adults because cardiovascular complications are perceived to be rare and far in the future. "Our study suggests that the complications of high blood pressure can occur much earlier and should serve as a reminder that current guidelines recommend identification and treatment of blood pressure regardless of the age of the patient," said Bibbins-Domingo.

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