

New stats show America's heart health needs improvement

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America's heart and blood vessel health is far from ideal, according to data in the American Heart Association's "Heart Disease and Stroke Statistical Update 2012," published in *Circulation: Journal of the American Heart Association*.

The update provides insight into our less than ideal [cardiovascular health](#). For example, obesity continues to be a major problem for many Americans. More than 67 percent of U.S. adults and 31.7 percent of children are overweight or obese. Over the past 30 years, the prevalence of obesity in children has increased from 4 percent to more than 20 percent.

The American [Heart](#) Association defines ideal cardiovascular health based on seven health factors: smoking status, weight, physical activity, healthy diet, cholesterol, blood pressure and fasting glucose levels, as well as the absence of a diagnosis of heart or blood vessel disease.

Based on that definition, the new data shows that 94 percent of U.S. adults have at least one and 38 percent have at least three of the seven factors at "poor" levels. Half of U.S. children 12 to 19 years old meet four or fewer criteria for ideal cardiovascular health.

Between 1971 and 2004, our average calorie consumption has increased by 22 percent in women (from 1,542 to 1,886 kcal/d) and by 10 percent in men (from 2,450 to 2,693 kcal/d). Many of these increased calories come from consuming more carbohydrates, particularly starches, refined

grains and sugars; larger portion sizes and calories per meal as well as consuming more sugar-sweetened beverages, snacks, commercially prepared meals (especially fast food) and high-calorie foods.

Burning those calories is also an increasing challenge – 33 percent of adults engage in no aerobic leisure-time physical activity. Furthermore, in 2009, among adolescents in grades nine through 12, 29.9 percent of girls and 17 percent of boys had not engaged in 60 minutes of moderate-to-vigorous physical activity — the recommended amount for good health — even once in the previous seven days.

There is some good news in the update -- the death rate from cardiovascular diseases (CVD -- all diseases of the heart and blood vessels) fell 30.6 percent from 1998 to 2008, possibly due to better treatments for heart attacks, congestive heart failure and other acute conditions.

The stroke death rate fell 34.8 percent during that time period, dropping it from the third to the fourth leading cause of death. While the drop in ranking is mostly driven by decreases in the number of stroke deaths, likely due to better treatment options for acute stroke, reclassifying some respiratory diseases into one category also played a role.

For example, deaths from chronic obstructive pulmonary disease (COPD), bronchitis and pneumonia are now grouped under the larger category, "respiratory diseases."

Unfortunately, other statistics in the update illustrate America's continued cardiovascular disease burden:

- Cardiovascular diseases accounted for one in every three deaths in the United States in 2008; more than 2,200 Americans die of

cardiovascular diseases every day — an average of one death every 39 seconds.

- The cost of cardiovascular care and treatment increased over \$11 billion from 2007 to 2008.
- The direct and indirect cost of CVD and stroke in the United State for 2008 was an estimated \$297.7 billion.

"By monitoring health, as well as disease, the update provides information essential to public health initiatives, patient care and for people to take personal responsibility for their health — and for their lives," said Véronique L. Roger, M.D, M.P.H., lead author of the update and professor of medicine and epidemiology at the Mayo Clinic College of Medicine in Rochester, Minn.

The American Heart Association has set a goal for America — to improve the cardiovascular health of all Americans by 20 percent and reduce deaths from cardiovascular diseases and stroke by 20 percent by 2020. "If we're to reach this goal, we'll need to engage every segment of the population to focus on improved health behaviors," said Donald Lloyd-Jones, M.D., an author of the statistical update and chair of the Department of Preventive Medicine, Northwestern University Feinberg School of Medicine in Chicago.

"In particular, more children, adolescents and young adults will need to learn how to improve and preserve their ideal levels of health factors and health behaviors into older ages. Moving people who are at poor health to make small changes in their behavior and reach intermediate health is a step in the right direction that can make a big difference," said Lloyd-Jones.

Provided by American Heart Association

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