

Heart disease, stroke less widespread among foreign-born vs. US-born adults

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Foreign-born adults living in the United States had a lower prevalence of coronary heart disease and stroke than U.S.-born adults in nationally representative data spanning 2006-2014, according to new research in *Journal of the American Heart Association*, the Open Access Journal of the American Heart Association/American Stroke Association.

Researchers from the Centers for Disease Control and Prevention compared the prevalence of coronary [heart disease](#) and stroke among U.S. adults by birthplace. The proportion of adults living in the United States who were born elsewhere has almost tripled from about 9.6 million in 1970 to 40 million in 2010.

After adjusting for age and select demographic and health characteristics, researchers found that overall:

- The percentage of U.S. men who report having coronary heart disease was 8.2 percent among those born in the United State versus 5.5 percent for those born in another country. For women with coronary heart disease, the figures were 4.8 percent for those born in the United States and 4.1 percent for those born elsewhere.
- The percentage of the population living with stroke was 2.7 percent for U.S.-born men and women compared to 2.1 percent for foreign-born men and 1.9 percent for foreign-born women.
- The number of years people had been living in the United States was not related to risk of coronary heart disease or stroke after

adjustment with demographic and health characteristics.

Comparing individual regions with those of U.S.-born, [coronary heart disease](#) prevalence was lower among people born in Asia, Mexico, Central America or the Caribbean. Stroke prevalence was lowest among men born in South America or Africa and women from Europe.

The reason foreign-born adults fare better could be explained by the "healthy immigrant effect", where those who decide to immigrate to another country are usually healthier than others, due to either self-selection or physical/legal barriers.

Researchers said these findings may support efforts to target high-risk groups with [public health interventions](#).

More information: *Journal of the American Heart Association* (2018). [DOI: 10.1161/JAHA.117.008153](https://doi.org/10.1161/JAHA.117.008153)

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