

Health disparities in cardiometabolic disease seen within racial subgroups

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Health disparities are seen in the prevalence of cardiometabolic diseases by disaggregated racial and ethnic subgroups, according to research published in the Jan. 25 issue of the U.S. Centers for Disease Control and Prevention *Morbidity and Mortality Weekly Report*.

Alain K. Koyama, Sc.D., from the CDC in Atlanta, and colleagues describe the prevalence of diagnosed cardiometabolic diseases among U.S. adults by disaggregated racial and ethnic subgroups using data from 3,970,904 respondents to the Behavioral Risk Factor Surveillance System from 2013 to 2021. The prevalence of diabetes, [myocardial infarction](#), angina or [coronary heart disease](#), and stroke was stratified by race and ethnicity.

The mean respondent age was 47.5 years, and more than half (51.4 percent) of the respondents were women. The researchers found that among disaggregated race and ethnicity subgroups, there was [considerable variation](#) seen in the prevalence of cardiometabolic diseases. Within the aggregated non-Hispanic Asian category, the prevalence of diabetes was 11.5 percent and ranged from 6.3 to 15.2 percent in the Vietnamese and Filipino subgroups, respectively. For the aggregated Hispanic or Latino category, the prevalence of angina or coronary heart disease was 3.8 percent and varied from 3.1 to 6.3 percent in the Cuban and Puerto Rican subgroups, respectively.

"Findings from this study illustrate pronounced differences in cardiometabolic disease prevalence among racial and ethnic subgroups, with the largest variation occurring in diabetes prevalence," the authors write.

More information: Alain K. Koyama et al, Prevalence of Cardiometabolic Diseases Among Racial and Ethnic Subgroups in Adults—Behavioral Risk Factor Surveillance System, United States, 2013–2021, *MMWR. Morbidity and Mortality Weekly Report* (2024). [DOI: 10.15585/mmwr.mm7303a1](https://doi.org/10.15585/mmwr.mm7303a1)

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