



# 2019 Heart Disease & Stroke Statistical Update Fact Sheet

## Blacks & Cardiovascular Diseases

### Cardiovascular Disease (CVD) (ICD-9 390 to 459; ICD-10 I00 to I99)

- Based on 2013–2016 data, among non-Hispanic (NH) blacks age 20 and older, 60.1% of males and 57.1% of females had CVD.
- In 2016 among all ages, CVD caused the deaths of 52,874 black males and 51,767 black females.
- The Atherosclerosis Risk in Communities Study of middle-aged participants, published in 2007, showed that ≈90% of CVD events in black participants, compared with ≈65% in white participants, appeared to be explained by elevated or borderline risk factors.

### Coronary Heart Disease (CHD) (ICD-9 410 to 414, 429.2; ICD-10 I20 to I25, includes MI-10 I21 to I22)

- According to 2013–2016 data, among NH blacks age 20 and older, 7.2% of males and 6.5% of females had CHD.
- According to 2013–2016 data, among NH blacks age 20 and older, 4.0% of males and 2.2% of females have had a myocardial infarction (heart attack).
- Based on data from 2005–2014, each year in ages 35 years and older, about 90,000 black males and 75,000 black females had an MI or fatal CHD event. (\*Estimate includes Hispanic and non-Hispanics.)
- In 2016 among all ages, CHD caused the deaths of 21,900 black males and 18,256 black females.
- In 2016 among all ages, myocardial infarction caused the deaths of 6,587 black males and 5,750 black females.
- Within 1 year after a first MI, based on 1995–2012 data:
  - At 45 to 64 years of age, 9% of black males, and 10% of black females will die.
  - At 65 to 74 years of age, 22% of black males, and 21% of black females will die.
  - At ≥75 years of age, 19% of black males, and 31% of black females will die.
- Within 5 years after a first MI, based on 1995–2012 data:
  - At 45 to 64 years of age, 16% of black males, and 28% of black females will die.
  - At 65 to 74 years of age, 33% of black males, and 44% of black females will die.
  - At ≥75 years of age, 61% of black males, and 64% of black females will die.
- Of those who have a first MI, the percentage with a recurrent MI or fatal CHD within 5 years is as follows, based on 1995–2012 data:
  - At 45 to 64 years of age, 22% of black males, and 32% of black females.
  - At 65 to 74 years of age, 30% of black males, and 30% of black females.
  - At ≥75 years of age, 45% of black males, and 20% of black females.
- Based on 1995–2012 data, for those 45 years of age and older, the median survival time (in years) after a first MI was 7.0 for black males, and 5.5 for black females.
- From 2006 to 2016, CHD age-adjusted death rates per 100,000 were 146.5 for NH black males, and 85.4 for NH black females.

## Stroke (ICD-9 430 to 438; ICD-10 I60 to I69)

- According to 2013–2016 data, among NH blacks age 20 and older, 3.1% of males and 3.8% of females have had a stroke.
- In 2005, blacks had a higher annual age-adjusted incidence of first-ever ischemic stroke (294/100,000) than that of whites (179/100,000).
- In 2016 among all ages, stroke caused the deaths of 8,115 NH black males and 10,074 NH black females.
- The 2016 age-adjusted death rate for stroke was 56.7 per 100,000 for NH black males and 47.8 per 100,000 NH black females.
- Based on a 2016 study using data from the Ethnic/Racial Variations of Intracerebral Hemorrhage (ICH) study, both treated and untreated hypertension conferred a greater risk of ICH among blacks both treated and untreated compared to whites and Hispanics.
- According to a 2013 study, overall, ischemic stroke patients with DM are younger, more likely to be black, and more likely to have HBP, MI, and high cholesterol than nondiabetic patients.

## High Blood Pressure (HBP) (ICD-9 401 to 404; ICD-10 I10 to I15)

- According to 2013–2016 data, among NH blacks age 20 and older, 58.6% of males and 56.0% of females had HBP (defined as systolic pressure of 130 mm Hg or higher or diastolic pressure of 80 mm Hg or higher, or taking antihypertensive medicine or being told twice by a physician or other professional that you have hypertension).
- Based on 2014 data, black adults were more likely (33.0%) to have been told on  $\geq 2$  occasions that they had HBP than American Indian/Alaska Native adults (26.4%), white adults (23.5%), Hispanic or Latino adults (22.9%), or Asian adults (19.5%).
- According to 2011–2016 data, among NH blacks with hypertension, 48.4% of males and 64.6% of females receive treatment for their HBP.
- According to a 2013 study, among adults with hypertension, blacks were more likely to have resistant hypertension than whites and Hispanics (19.0% versus 13.5% and 11.2%, respectively).
- In 2016 among all ages, HBP caused the deaths of 8,429 NH black males and 7,897 NH black females.
- In 2016 the age-adjusted death rate from HBP was 21.6 per 100,000. Death rates (per 100,000) for NH blacks were 54.0 for males and 36.7 for females.

## High Blood Cholesterol and Other Lipids

- According to 2013–2016 data, among children 6 to 11 years of age, the mean total cholesterol level was 157.8 mg/dL. Among NH black children 6 to 11 years of age, the mean total cholesterol level was 158.8 mg/dL for boys and 158.2 mg/dL for girls.
- According to 2013–2016 data, among adolescents 12 to 19 years of age, the mean total blood cholesterol level was 154.4 mg/dL. For NH blacks, mean total cholesterol was 150.8 mg/dL for boys and 156.0 mg/dL for girls.
- According to 2011–2012 data, among NH blacks, 71.9% have had their cholesterol checked (66.8% of males and 75.9% of females).
- Among NH blacks age 20 and older:
  - 29.8% of males and 33.1% of females had total blood cholesterol levels of 200 mg/dL or higher, according to 2013–2016 data.
  - 8.9% of males and 9.0% of females had levels of 240 mg/dL or higher, according to 2013–2016 data.

## High Blood Cholesterol and Other Lipids (continued)

- 29.9% of males and 27.9% of females had an LDL cholesterol of 130 mg/dL or higher, according to 2011–2014 data.
- 19.8% of males and 8.1% of females had HDL cholesterol less than 40 mg/dL, according to 2013–2016 data.

## Smoking

- In 2015 among adolescents aged 12 to 17 years, NH white students were more likely than Hispanic or NH black students to report cigarette use in the past month (5.4% compared with 2.7% for Hispanic students and 2.6% for NH black students).
- Among black or African American adults aged 18 years or older in 2016, 16.5% are current cigarette smokers.
- During 2011 to 2012, the percentage of the US nonsmoking population with serum cotinine  $\geq 0.05$  ng/mL (which indicates exposure to secondhand smoke) was higher for NH blacks (46.8%) than for NH whites (21.8%) and Mexican Americans (23.9%).

## Physical Inactivity

In 2015:

- Nationwide, 14.3% of high school students reported that they were inactive on all of the previous 7 days (that is, they did not participate in  $\geq 60$  minutes of any kind of physical activity, including aerobic and muscle and bone strengthening activity, on any 1 of the previous 7 days).
- The prevalence of inactivity for high school students was highest among black (25.2%) and Hispanic (19.2%) girls, followed by NH black boys (16.2%), NH white girls (14.3%), Hispanic boys (11.9%), and NH white boys (8.8%).
- The prevalence of high school students using computers  $\geq 3$  hours per day for activities other than school work (e.g., video games or other computer games) was highest among NH black girls (48.4%), followed by Hispanic girls (47.4%), Hispanic boys (45.1%), NH black boys (41.2%), NH white boys (38.9%), and NH white girls (38.3%).
- The prevalence of watching television  $\geq 3$  hours per day among students in grades 9 to 12, was highest among NH black girls (41.5%) and boys (37.0%), followed by Hispanic girls (29.2%) and boys (27.4%), and NH white boys (21.4%), and girls (18.8%).
- In 2016, 20.8% of NH blacks age 18 and older met the 2008 Federal Aerobic and Strengthening Physical Activity Guidelines for Adults.

## Overweight and Obesity

- Based on data from 2011 to 2014, 32.1% of children age 2 to 19 in the United States were overweight or obese; 16.5% were obese. Among NH black children, 32.8% of boys and 37.6% of girls were overweight or obese. Of these, 17.5% of boys, and 20.0% of girls were obese.
- Based on data from 2011 to 2014, 69.4% of adults over age 20 in the United States were overweight or obese; 36.3% were obese. Among NH black adults 69.1% of males and 82.2% of females were overweight or obese. Of these, 37.5% of males, and 56.9% of females were obese.

## Diabetes Mellitus (ICD-9 250; ICD-10 E10 to E14)

- Among US adolescents aged 12 to 19 years in 2005 to 2014, the prevalence of prediabetes was 17.7%. Prediabetes was higher in NH blacks (21.0%) and Hispanics (22.9%) than in NH white participants (15.1%).
- A multi-center study found that among youth 10-19 years of age, the incidence of type 2 DM increased by 7.1% annually (from 9.0 to 12.5 cases per 100 000 youths per year from 2002 to 2012). The annual increase was larger among girls than boys and among NH blacks, Hispanics, Asian or Pacific Islanders, and Native Americans compared with NH whites.
- Among NH black adults between 2013 and 2016, aged 20 years and older:
  - 14.7% of males and 13.4% of females had physician diagnosed diabetes
  - 1.7% of males and 3.3% of females had undiagnosed diabetes
  - 31.9% of males and 24.0% of females had prediabetes
- In 2016, diabetes caused the deaths of 6,976 NH black males and 7,077 NH black females.

For additional information, charts and tables, see  
[Heart Disease & Stroke Statistics – 2019 Update](#)

Additional charts may be downloaded directly from  
<https://www.ahajournals.org/doi/10.1161/CIR.0000000000000659> or  
<https://www.heart.org/en/about-us/heart-and-stroke-association-statistics>

Many statistics in this Fact Sheet come from unpublished tabulations compiled for this document and can be cited using the document citation listed below. The data sources used for the tabulations are listed in the full document. Additionally, some statistics come from published studies. If you are citing any of the statistics in this factsheet, please review the full Heart Disease and Stroke Statistics document to determine data sources and original citations.

The American Heart Association requests that this document be cited as follows:

Benjamin EJ, Muntner P, Alonso A, Bittencourt MS, Callaway CW, Carson AP, Chamberlain AM, Chang AR, Cheng S, Das SR, Delling FN, Djousse L, Elkind MSV, Ferguson JF, Fornage M, Jordan LC, Khan SS, Kissela BM, Knutson KL, Kwan TW, Lackland DT, Lewis TT, Lichtman JH, Longenecker CT, Loop MS, Lutsey PL, Martin SS, Matsushita K, Moran AE, Mussolino ME, O'Flaherty M, Pandey A, Perak AM, Rosamond WD, Roth GA, Sampson UKA, Satou GM, Schroeder EB, Shah SH, Spartano NL, Stokes A, Tirschwell DL, Tsao CW, Turakhia MP, VanWagner LB, Wilkins JT, Wong SS, Virani SS; on behalf of the American Heart Association Council on Epidemiology and Prevention Statistics Committee and Stroke Statistics Subcommittee. Heart disease and stroke statistics - 2019 update: a report from the American Heart Association [published online ahead of print January 31, 2019]. *Circulation*. doi: 10.1161/CIR.0000000000000659.

If you have questions about statistics or any points made in the 2019 Statistical Update, please contact the American Heart Association National Center, Office of Science & Medicine at [statistics@heart.org](mailto:statistics@heart.org). Please direct all media inquiries to News Media Relations at <http://newsroom.heart.org/newsmedia/contacts>.