

2020 Heart Disease & Stroke Statistical Update Fact Sheet Hispanics/Latinos & Cardiovascular Diseases*

Cardiovascular Disease (CVD) (ICD-9 390 to 459; ICD/10 100 to 199)

- Among Hispanic adults age 20 and older from 2013 to 2016, 49.0% of males and 42.6% of females had CVD.
- In 2017, CVD caused the deaths* of 29,366 Hispanic males and 25,309 Hispanic females of all
 ages.

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

- Among Hispanics age 20 and older, 2013 to 2016:
 - o 6.0% of males and 6.0% of females had CHD.
 - o 3.4% of males and 2.0% of females previously had a myocardial infarction (heart attack).
 - o 2.6% of males and 3.6% of females had angina.
- In 2017, CHD caused the deaths* of 14,195 Hispanic males and 10,041 Hispanic females.
- In 2017, myocardial infarction caused the deaths* of 4,437 Hispanic males and 3,113 Hispanic females.

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

- Among Hispanic adults, according to 2013 to 2016 data, 2.0% of males and 2.2% of females previously had a stroke.
- In 2017, stroke caused the deaths* of 5,073 Hispanic males and 5,702 Hispanic females.
- Males, blacks, and Mexican Americans have higher rates of TIA than their female and non-Hispanic white counterparts.
- Projections show that by 2030, an additional 3.4 million US adults aged ≥18 years will have had a stroke, a 20.5% increase in prevalence from 2012. The highest increase (29%) is projected to be in white Hispanic males.
- Among stroke survivors in one 2014 single-center study, Hispanics scored lower on a test of stroke symptoms and the appropriate response to those symptoms than non-Hispanic (NH) whites (72.5% vs. 79.1% of responses correct) and were less often aware of tPA as a treatment for stroke (91.5% vs. 79.2%).

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

- Among Hispanics age 20 and older from 2013 to 2016, 47.4% of the males and 40.8% of the females had HBP.
- In 2017, HBP caused the deaths* of 3,478 Hispanic males and 3,282 Hispanic females.
- In 2011 to 2012, having either HBP or borderline HBP was more common among boys than girls, non-Hispanic blacks were more likely to have either HBP or borderline HBP than Hispanic, non-Hispanic white, or non-Hispanic Asian boys or girls. However, HBP was more common among Hispanics than among NH blacks, NH whites, and NH Asians.

^{*} Due to inconsistencies in reporting, some statistics may be unreliable. Unless otherwise noted, all statistics in this Fact Sheet pertain to the United States.

High Blood Pressure (HBP) (continued)

• In 2011 to 2016 among Mexican American adults, rates of HBP awareness were 43.8% in males and 66.2% in females. 30.3% of males and 53.2% of females were undergoing treatment, and 11.6% of males and 27.0% of females had their HBP under control.

High Blood Cholesterol and Other Lipids

- Among children 6 to 11 years of age between 2013 and 2016, the mean total blood cholesterol (TC) level was 157.8 mg/dL. For Hispanics, TC was 158.7 mg/dL for males and 153.9 mg/dL for females.
- Among adolescents 12 to 19 years of age between 2013 and 2016, the mean TC level was 154.4 mg/dL. For Hispanics, TC was 152.7 mg/dL for males and 156.0 mg/dL for females.
- Among Hispanics age 20 and older between 2013 and 2016:
 - o 39.9% of males and 38.9% of females had TC levels of 200 mg/dL or higher.
 - o 13.0% of males and 10.1% of females had TC levels of 240 mg/dL or higher.
 - o 33.5% of males and 23.8% of females had low-density lipoprotein (LDL) cholesterol of 130 mg/dL or higher.
 - o 32.6% of males and 13.1% of females had high-density lipoprotein (HDL) cholesterol less than 40 mg/dL.
- Among Hispanic adults according to data from 2011 to 2012, 59.3% had their cholesterol checked (54.6% of males and 64.2% of females). The percentage of adults screened for cholesterol in the past 5 years was lower for Hispanic adults than for NH white, NH black, and NH Asian adults.

Smoking

- In 2017, among adults 18 years of age or older, Asians (7.1%) and Hispanics (9.9%) were less likely to be current smokers than American Indians or Alaska Natives (24.0%), NH blacks (14.9%), and NH whites (15.2%).
- According to data from 2017, the lifetime use of tobacco products among adults ≥18 years of age was highest in American Indians or Alaska Natives (81.2%) and whites (75.2%), followed by Native Hawaiian or Other Pacific Islander (56.4%), Hispanics or Latinos (55.3%), blacks (54.8%), and Asians (39.1%).
- In 2018, the rate of cigarette use in the previous month for high school students was lower among NH black youth (3.2%) than Hispanic youth (7.2%) and NH white youth (9.9%).
- In 2017, the lifetime use of tobacco products among adolescents 12 to 17 years old was highest among American Indians and Alaska Natives (26.7%), followed by whites (17.9%), Hispanics or Latinos (12.3%), blacks (11.0%), and Asians (4.7%).
- In 2015, receiving advice to quit smoking was lower in uninsured smokers and varied by race, with a lower prevalence in Asian (34.2%), American Indian/Alaska Native (38.1%), and Hispanic (42.2%) smokers than in white smokers (60.2%).

Physical Inactivity

- In 2017, the prevalence of students in grades 9-12 that did not participate in ≥60 minutes of physical activity on any day in the past 7 days was highest among NH black girls (26.6%) and Hispanic (20.0%) girls, followed by NH white girls (16.7%), NH Black boys (12.7%), Hispanic boys (12.3%), and NH white boys (10.2%).
- In 2017, among students in grades 9-12, 33.3% of Hispanic boys and 18.1% of Hispanic girls were active at least 60 min/day on all 7 days.

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Physical Inactivity (continued)

- In 2017, the prevalence of using computers ≥3 hours per day (for activities other than school work) was highest among NH black boys (47.7%), followed by Hispanic girls (46.8%), NH black girls (46.7%), Hispanic boys (43.9%), NH white boys (41.7%), and NH white girls (39.6%).
- In 2017, the prevalence of watching television ≥3 hours per day was highest among NH black boys (37.8%) and girls (32.8%), followed by Hispanic boys (21.9%) and girls (19.5%) and NH white girls (18.4%) and boys (16.9%).
- In 2017, 18.7% of Hispanic or Latinos age 18 and older met both the 2018 Federal Aerobic and Strengthening Physical Activity Guidelines for Adults.
- In 2017, among Hispanic or Latino adults 18 and older, 48.7% of males and 41.0% of females met aerobic guidelines of the 2018 Federal Physical Activity Guidelines for Americans through moderate leisure-time activity or vigorous activity.

Overweight and Obesity

- According to 2013 to 2016 data, 34.2% of children and adolescents age 2 to 19 were overweight or obese, 16.4% were overweight, and 17.8% were obese. Among Hispanic children and adolescents, rates of obesity were 24.3% of boys and 22.9% of girls.
- Between 2013 and 2016, 69.9% of adults over age 20 in the United States were overweight or obese; 38.3% were obese. Among Hispanic adults 80.8% of males and 77.8% of females were overweight or obese; 40.1% of males and 48.4% 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 higher in NH blacks (21.0%) and Hispanics (22.9%) than in NH white participants (15.1%).
- In a multi-center study among youth 19 years old or younger in 2003 to 2012, the incidence of type 1 DM increased 1.4% annually with a larger increase for Hispanics and Asian or Pacific Islanders than for other ethnic groups. Also, the incidence of type 2 DM increased 7.1% annually with a larger increase among NH blacks, Hispanics, Asian or Pacific Islanders, and Native Americans compared with NH whites.
- Among Hispanic adults 20 years of age or older between 2013 and 2016:
 - o 15.1% of males and 14.1% of females had physician diagnosed diabetes
 - o 6.3% of males and 4.0% of females had undiagnosed diabetes
 - o 48.1% of males and 31.7% of females had prediabetes
- According to 2007 to 2010 data, compared with NH whites, Mexican Americans were less likely to meet HbA1c and LDL-C goals.
- According to data from 2008 to 2011, DM prevalence ranged from 10.2% in South Americans, to 13.4% in Cubans, 17.7% in Central Americans, 18.0% in Dominicans and Puerto Ricans, and 18.3% in Mexicans.

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For additional information, charts and tables, see Heart Disease & Stroke Statistics – 2020 Update

Additional charts may be downloaded directly from the online publication or www.heart.org/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:

Virani SS, Alonso A, Benjamin EJ, Bittencourt MS, Callaway CW, Carson AP, Chamberlain AM, Chang AR, Cheng S, Delling FN, Djousse L, Elkind MSV, Ferguson JF, Fornage M, 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, Perak AM, Rosamond WD, Roth GA, Sampson UKA, Satou GM, Schroeder EB, Shah SH, Shay CM, Spartano NL, Stokes A, Tirschwell DL, VanWagner LB, Tsao CW; on behalf of the American Heart Association Council on Epidemiology and Prevention Statistics Committee and Stroke Statistics Subcommittee. Heart disease and stroke statistics—2020 update: a report from the American Heart Association. *Circulation*. 2020;141:e1–e458. doi: 10.1161/CIR.00000000000000757

If you have questions about statistics or any points made in the 2020 Statistical Update, please contact the American Heart Association National Center, Office of Science & Medicine at statistics@heart.org. Please direct all media inquiries to News Media Relations at http://newsroom.heart.org/newsmedia/contacts.

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