

## 2021 Heart Disease & Stroke Statistical Update Fact Sheet Males & Cardiovascular Diseases

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

- According to 2015 to 2018 data, 54.1% of males 20 years of age and older had some form of CVD, compared with 44.4% of females.
- According to 2015 to 2018 data, of males 20 years of age and older, 60.1% of non-Hispanic (NH) Black males, 53.6% of NH White males, 52.3% of Hispanic males, and 52.0% of NH Asian males had some form of CVD.
- In 2018, CVD caused the deaths of 448,498 males. Males represented 51.6% of deaths from CVD.
- In 2016, CVD was the first listed diagnosis of 2,629,000 males and 2,211,000 females discharged from short-stay hospitals.
- In 2014, 74.4% of bypass and 67.7% of percutaneous coronary intervention (PCI) patients were male. Of the recipients in 2019, 69.5% of heart transplant patients were male.

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

- According to data from 2015 to 2018, about 11.0 million males (8.3%) 20 years of age and older had CHD. 5.8 million males (4.3%) had a history of myocardial infarction (MI, or heart attack).
- Among males 20 years of age and older between 2015 and 2018, 8.7% of NH White males, 6.7% of NH Black males, 6.8% of Hispanic males, and 5.0% of NH Asian males had CHD.
- Among males 20 years of age and older between 2015 and 2018, 4.4% of NH White males, 3.9% of NH Black males, 3.7% of Hispanic males, and 2.7% of NH Asian males had a previous MI.
- Based on data from 2005 to 2014, each year new and recurrent MI and fatal CHD impact an estimated 610,000 males 35 years of age and older.
- CHD caused the deaths of 215,032 males in 2018; 64,079 males died from MI.
- 664,000 males diagnosed with CHD were discharged from short-stay hospitals in 2016.

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

- Between 2015 and 2018, the prevalence of stroke among males 20 years of age and older was 3.5 million (2.6% of males) vs. 4.1 million among females (2.8% of females).
- Among males 20 years of age and older, the following had a previous stroke: 2.3% of NH White males; 4.1% of NH Black males, 2.4% of Hispanic males, and 1.4% of NH Asian males.
- In 2018, stroke caused the deaths of 62,844 males (42.5% of total stroke deaths).
- In 2016, 438,000 males were discharged from short-stay hospitals after having a stroke.

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

- Among males, 20 years of age and older between 2015 and 2018, 51.7% had HBP.
- Between 2015 and 2018, a higher percentage of males than females had hypertension in all age categories until 64 years of age. For those 65 years of age and older, the percentage of females with hypertension was higher than for males.
- Among males 20 years of age and older between 2015 and 2018, 51.0% of NH White adults, 58.3% of NH Black adults, 50.6% of Hispanic adults, and 51.0% of NH Asian adults had HBP.
- In 2018, 46,124 males died from HBP. They represented 48.1% of deaths from HBP.
- 246,000 males diagnosed with HBP were discharged from short-stay hospitals in 2016.

## Heart Failure (HF) (ICD-9 428, ICD-10 I50)

- About 3.4 million adult males 20 years of age and older alive between 2015 and 2018 had HF. In 2014, about 495,000 new cases were diagnosed in males age 55 years and older.
- Between 2015 and 2018, the overall prevalence of HF for males 20 years of age and older was 2.5%. Among adult males, the following had HF: 2.4% of NH White adults; 3.6% of NH Black adults, 2.4% of Hispanic adults and 1.9% of NH Asian adults.
- In 2018, there were 38,487 male deaths from HF (46.0% of HF deaths).
- 415,000 males diagnosed with HF were discharged from short-stay hospitals in 2016.

## Smoking

- According to 2018 data, lifetime use of tobacco products for individuals 12 to 17 years of age was greater in males than females (14.7% vs. 12.0%).
- In 2018, more adult males (15.6%) were current smokers than females (12.0%).
- In 2019, 27.6% of male high school students used e-cigarettes compared with 27.4% of females.
- Worldwide in 2019, tobacco caused 6.6 million male deaths and 2.1 million female deaths.

## High Blood Cholesterol and Other Lipids

- According to 2015 to 2018 data, among children 6 to 11 years of age, the mean total cholesterol level was 157.3 mg/dL. For boys, it was 157.4 mg/dL; for girls, it was 157.1 mg/dL.
- According to 2015 to 2018 data, among adolescents 12 to 19 years of age, the mean total cholesterol level was 155.1 mg/dL. For boys, it was 152.7 mg/dL; for girls, it was 157.5 mg/dL.
- Among adults 20 years of age and older:
  - 35.3% of males and 40.4% of females had total cholesterol levels of 200 mg/dL or higher in 2015 to 2018.
  - 10.5% of males and 12.1% of females had total cholesterol levels of 240 mg/dL or higher in 2015 to 2018.
  - 30.1% of males and 27.6% of females had low-density lipoprotein (LDL) cholesterol of 130 mg/dL or higher in 2013 to 2016.
  - 26.6% of males and 8.5% of females had high-density lipoprotein (HDL) cholesterol less than 40 mg/dL in 2015 to 2018.

## Physical Inactivity

- In 2017 boys were less likely than girls to report inactivity (11.0% vs. 19.5%).
- According to 2017 data, the prevalence of high school students who met aerobic activity recommendations of  $\geq 60$  minutes of PA on all 7 days of the week was 26.1% nationwide and was lower with each successive grade (from 9th [30.6%] to 12<sup>th</sup> [22.9%] grades). At each grade level, the prevalence was higher in boys than in girls.
- Only 27.4% of adult males and 20.8% of females met the 2018 Federal Physical Activity Guidelines for both aerobic and strengthening PA in 2018.

## Overweight and Obesity

- According to 2015 to 2018 data, an estimated 35.0% of boys 2 to 19 years of age were overweight or obese; 30.9% of NH White boys, 31.5% of NH Black boys, 45.9% of Hispanic boys, and 26.4% of NH Asian boys.
- According to 2015 to 2018 data for all boys 2 to 19 years of age, 20.0% were obese; 16.2% of NH White boys, 19.1% of NH Black boys, 28.6% of Hispanic boys, and 11.3% of NH Asian boys.

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

## Overweight and Obesity (continued)

- According to 2015 to 2018 data, an estimated 74.8% of males 20 years of age and older were overweight or obese; 73.9% of NH White adults, 69.9% of NH Black adults, 84.8% of Hispanic adults, and 55.9% of NH Asian adults.
- According to 2015 to 2018 data, of all adult males, 39.9% were obese; 40.7% of NH White male adults, 38.2% of NH Black male adults, 44.0% of Hispanic male adults, and 13.5% of NH Asian male adults.

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

- Of the estimated 26.0 million American adults with physician-diagnosed diabetes in 2013 to 2016, about 13.7 million were males (10.9% of all males); in all male adults, physicians diagnosed diabetes in 9.4% of NH White male adults, 14.7% of NH Black male adults, 15.1% of Hispanic male adults and 12.8% of NH Asian male adults.
- Of the estimated 9.4 million American adults (20 years of age or older) with undiagnosed diabetes in 2013 to 2016, about 5.5 million were males (4.6% of all males); in all male adults, diabetes was undiagnosed in 4.7% of NH White males, 1.7% of NH Black males, 6.3% of Hispanic males and 6.1% of NH Asian males.
- Of the estimated 91.8 million Americans adults with prediabetes in 2013 to 2016, about 51.7 million were males (44.0% of all males); in all adult males, prediabetes existed in 43.7% of NH White males; 31.9% of NH Black males, 48.1% of Hispanic males and 47.1% of NH Asian males.
- In 2018, there were 47,551 male diabetes deaths (56.0% of deaths from diabetes).
- 319,000 males of all ages diagnosed with diabetes were discharged from short-stay hospitals in 2016.
- Among national health survey participants between 2000 and 2009 diagnosed with diabetes, males had 1.56 times higher risk of death of all causes and females had 1.69 times higher risk than those without diabetes.

For additional information, charts and tables, see  
[Heart Disease & Stroke Statistics – 2021 Update](#)

Additional charts may be downloaded directly from the [online publication](#) or [www.heart.org/statistics](http://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, Aparicio HJ, Benjamin EJ, Bittencourt MS, Callaway CW, Carson AP, Chamberlain AM, Cheng S, Delling FN, Elkind MSV, Evenson KR, Ferguson JF, Gupta DK, Khan SS, Kissela BM, Knutson KL, Lee CD, Lewis TT, Liu J, Loop MS, Lutsey PL, Ma J, Mackey J, Martin SS, Matchar DB, Mussolino ME, Navaneethan SD, Perak AM, Roth GA, Samad Z, Satou GM, Schroeder EB, Shah SH, Shay CM, Stokes A, VanWagner LB, Wang N-Y, 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—2021 update: a report from the American Heart Association [published online ahead of print January 27, 2021]. *Circulation*. doi: 10.1161/CIR.0000000000000950

If you have questions about statistics or any points made in the 2021 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>.