## 2021 Heart Disease \& Stroke Statistical Update Fact Sheet White Race \& Cardiovascular Diseases

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

- Among non-Hispanic (NH) White adults between 2015 and 2018, 53.6\% of males and $42.1 \%$ of females had CVD.
- In 2018, CVD caused the deaths of 344,013 NH White males and 326,069 NH White females.


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

- Among NH White adults age 20 and older between 2015 and $2018,8.7 \%$ of males and $6.0 \%$ of females had CHD. $4.4 \%$ of NH White males and $2.0 \%$ of NH White females had a previous heart attack.
- In 2018 for all ages, CHD caused the deaths of 169,211 NH White males and 117,194 NH White females. Heart attack caused the deaths of $50,465 \mathrm{NH}$ White males and 34,447 NH White females.
- In 2018, the overall age-adjusted CHD death rate per 100,000 was 128.6 for NH White males and 64.9 for NH White females.
- On the basis of pooled data from 1995 to 2012, within 1 year after a first MI:
- At 45 to 64 years of age, $3 \%$ of White males and $5 \%$ of White females died.
- At 65 to 74 years of age, $14 \%$ of White males and $18 \%$ of White females died.
- At $\geq 75$ years of age, $27 \%$ of White males and $29 \%$ of White females died.
- On the basis of pooled data from 1995-2012, of those who have a first MI, the percentage with a recurrent MI or fatal CHD within 5 years was as follows:
- At 45 to 64 years of age, $11 \%$ of White males and $15 \%$ of White females.
- At 65 to 74 years of age, $12 \%$ of White males and $17 \%$ of White females.
- At $\geq 75$ years of age, $21 \%$ of White males and $20 \%$ of White females.


## Stroke (ICD-9 430 to 438; ICD-10 160 to I69)

- Among NH White adults between 2015 and 2018, 2.3\% of males and $2.5 \%$ of females had a previous stroke.
- In 2018 for all ages, stroke caused the deaths of 45,741 NH White males and 64,789 NH White females.
- The 2018 age-adjusted death rate for stroke as an underlying cause of death was 37.1 per 100,000. Death rates for NH White individuals were 35.6 for males and 35.5 for females.


## High Blood Pressure (HBP) (ICD-9 401 to 404; ICD-10 l10 to 115)

- Among NH White adults age 20 and older between 2015 and 2018, the following have HBP: 51.0\% of males and $40.5 \%$ of females.
- In 2018 for all ages, HBP caused the deaths of 31,094 NH White males and 35,763 NH White females.
- The 2018 age-adjusted death rate from HBP was 24.0 per 100,000. Death rates (per 100,000) for NH White individuals were 24.1 for males and 19.6 for females.


## High Blood Cholesterol and Other Lipids

- Among children 6 to 11 years of age between 2015 and 2018, the mean total cholesterol level was $157.3 \mathrm{mg} / \mathrm{dL}$. For NH White children, mean total cholesterol was $156.1 \mathrm{mg} / \mathrm{dL}$ for boys and $157.8 \mathrm{mg} / \mathrm{dL}$ for girls.
- Among adolescents 12 to 19 years of age between 2015 and 2018, the mean total blood cholesterol level was $155.1 \mathrm{mg} / \mathrm{dL}$. For NH White adolescents, mean total cholesterol was $151.2 \mathrm{mg} / \mathrm{dL}$ for boys and $158.0 \mathrm{mg} / \mathrm{dL}$ for girls.
- Among NH White adults:
o $35.0 \%$ of males and $41.8 \%$ of females had total blood cholesterol levels of $200 \mathrm{mg} / \mathrm{dL}$ or higher between 2015 and 2018.
o $10.1 \%$ of males and $13.1 \%$ of females had levels of $240 \mathrm{mg} / \mathrm{dL}$ or higher between 2015 and 2018.
o $29.4 \%$ of males and $29.7 \%$ of females had low-density lipoprotein (LDL) cholesterol of 130 $\mathrm{mg} / \mathrm{dL}$ or higher between 2013 and 2016.
o $26.3 \%$ of males and $7.4 \%$ of females had high-density lipoprotein (HDL) cholesterol less than $40 \mathrm{mg} / \mathrm{dL}$ between 2015 and 2018.


## Smoking

- In 2018, the lifetime use of tobacco products in adolescents 12 to 17 years of age was highest among American Indians and Alaska Native (18.7\%) adolescents, followed by NH Whites (16.3\%), Hispanic or Latino (10.8\%), NH Black (9.8\%), and NH Asian (4.6\%) adolescents.
- Among NH White high school and middle school students in 2019, cigarette use in the past month was 5.0\%.
- Among NH White adults $\geq 18$ years of age in $2018,15.0 \%$ were current smokers.
- In 2018, the lifetime use of tobacco products in adults $\geq 18$ years of age was highest among American Indians or Alaska Native (78.2\%) and White (74.1\%) adults, followed by Native Hawaiian or Other Pacific Islander (69.7\%), Hispanic or Latino (51.6\%), Black (55.1\%), and Asian (40.1\%) adults.
- During 2011 to 2012 , the percentage of the US nonsmoking population with serum cotinine $\geq 0.05$ $\mathrm{ng} / \mathrm{mL}$ (which indicates exposure to secondhand smoke) was $40.6 \%$ for those 3 to 11 years of age, $33.8 \%$ for those 12 to 19 years of age, and $21.3 \%$ for those $\geq 20$ years of age. The percentage was also higher for NH Black ( $46.8 \%$ ) individuals than for NH White ( $21.8 \%$ ) and Mexican American (23.9\%) individuals.


## Physical Inactivity

- Nationwide in 2017,15.4\% of high school students reported that they did not participate in > 60 minutes of any kind of physical activity on any 1 of the previous 7 days. NH White boys (10.2\%) had the lowest percent not participating in > 60 minutes of any kind of physical activity on any 1 of the previous 7 days compared to NH Black boys (12.7\%) and Hispanic boys (12.3\%). NH White girls (16.7\%) had the lowest percent not participating in $>60$ minutes of any kind of physical activity on any 1 of the previous 7 days compared to NH Black girls (26.6\%) and Hispanic girls (20.0\%).
- According to 2017 data, the prevalence of high school students meeting activity recommendations on $\geq 5$ days per week was higher among NH White boys (59.4\%), NH Black boys (54.5\%), and Hispanic boys (52.6\%) than NH White girls (38.8\%), NH Black girls (29.9\%), and Hispanic girls (36.9\%).


## Physical Inactivity (continued)

- In 2017, the prevalence of using computers $\geq 3$ hours per day, among high school students for activities other than schoolwork (e.g., videogames or other computer games) 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\%).
- According to 2017 data of students in grades 9 to 12 , the prevalence of watching television $\geq 3$ 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 2018, 25.7\% of NH White adults 18 years of age and older met the 2018 Federal Aerobic and Strengthening Physical Activity Guidelines for Adults.


## Overweight and Obesity

- Between 2015 and 2018, 35.4\% of children age 2 to 19 in the United States were overweight or obese; $19.0 \%$ were obese. Among NH White children, $30.9 \%$ of boys and $31.7 \%$ of girls were overweight or obese; $16.2 \%$ of boys and $14.2 \%$ of girls were obese.
- Between 2015 and 2018, 71.3\% of adults over age 20 in the United States were overweight or obese; $40.6 \%$ were obese. Among NH White adults, $73.9 \%$ of males and $65.4 \%$ of females were overweight or obese; $40.7 \%$ of males and $38.7 \%$ of females were obese.


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

- Among NH White adults between 2013 and 2016:
o $9.4 \%$ of males and $7.3 \%$ of females had physician diagnosed diabetes
o $4.7 \%$ of males and $2.6 \%$ of females had undiagnosed diabetes
o $43.7 \%$ of males and $32.2 \%$ of females had prediabetes
- In 2018, diabetes caused the deaths, all ages, of 32,182 NH White males and 23,591 NH White females.

> 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

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:
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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. Please direct all media inquiries to News Media Relations at http://newsroom.heart.org/newsmedia/contacts.

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