2022 Heart Disease & Stroke Statistical Update Fact Sheet
Hispanic/Latino Race & Cardiovascular Diseases*

Cardiovascular Disease (CVD) (ICD-9 390 to 459; ICD/10 I00 to I99)
- Among US Hispanic adults 20 years of age and older from 2015 to 2018, 52.3% of males and 42.7% of females had CVD.
- In 2019 in the United States, CVD caused the deaths* of 31,864 Hispanic males and 26,820 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 US Hispanic adults 20 years of age and older, 2015 to 2018:
  - 6.8% of males and 6.4% of females had CHD.
  - 3.7% of males and 2.1% of females previously had a myocardial infarction (heart attack).
  - 3.5% of males and 4.3% of females had angina.
- In 2019, CHD caused the deaths* of 15,166 US Hispanic males and 10,182 Hispanic females.
- In 2019, myocardial infarction caused the deaths* of 4,475 US Hispanic males and 3,068 Hispanic females.

Stroke (ICD-9 430 to 438; ICD-10 I60 to I69)
- Among US Hispanic adults, according to 2015 to 2018 data, 2.4% of males and 1.7% of females previously had a stroke.
- In 2019, stroke caused the deaths* of 5,649 US Hispanic males and 6,310 Hispanic females.
- Projections show that by 2030, an additional 3.4 million US adults ≥18 years of age 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, Hispanic individuals scored lower on a test of stroke symptoms and the appropriate response to those symptoms than NH White individuals (72.5% vs. 79.1% of responses correct) and were less often aware of tPA as a treatment for stroke (79.2% vs. 91.5%).

High Blood Pressure (HBP) (ICD-9 401 to 404; ICD-10 I10 to I15)
- Among US Hispanic adults 20 years of age and older from 2015 to 2018, 50.6% of males and 40.8% of females had HBP.
- In 2019, HBP caused the deaths* of 3,949 US Hispanic males and 3,659 Hispanic females.
- In 2015 to 2016, HBP was more common among US male youth than female youth, and among Mexican American youth compared with NH Black youth and NH White youth.
- In 2015 to 2018 among Hispanic US adults, rates of HBP awareness were 46.8% in males and 57.9% in females. 34.6% of males and 49.0% of females were undergoing treatment, and 12.7% of males and 20.5% of females had their HBP under control.

* Due to inconsistencies in reporting, some statistics may be unreliable.
Unless otherwise noted, all statistics in this Fact Sheet pertain to the United States. Please refer to the complete 2022 Statistics Update for references and additional information for reported statistics.
High Blood Cholesterol and Other Lipids

- Among US children 6 to 11 years of age between 2015 and 2018, the mean total blood cholesterol (TC) level was 157.3 mg/dL. For Hispanic children, TC was 157.6 mg/dL for males and 154.8 mg/dL for females.
- Among adolescents 12 to 19 years of age in the United States between 2015 and 2018, the mean TC level was 155.1 mg/dL. For Hispanic adolescents, TC was 152.3 mg/dL for males and 153.8 mg/dL for females.
- Among US Hispanic adults 20 years of age and older between 2015 and 2018:
  - 37.7% of males and 37.3% of females had TC levels of 200 mg/dL or higher.
  - 12.4% of males and 9.2% of females had TC levels of 240 mg/dL or higher.
  - 29.4% of males and 26.3% of females had low-density lipoprotein cholesterol of 130 mg/dL or higher.
  - 32.0% of males and 12.3% of females had high-density lipoprotein cholesterol less than 40 mg/dL.
- Among US Hispanic adults according to data from 2011 to 2012, 59.3% had their cholesterol checked the past 5 years (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 2019, among US adults 18 years of age or older, NH Asian (7.2%) and Hispanic (8.8%) adults were less likely to report smoking every day or some days than American Indians or Alaska Native (20.9%), NH Black (14.9%), and NH White (15.5%) adults.
- According to US data from 2019, the lifetime use of tobacco products among adults ≥18 years of age was highest in NH White (74.4%) and American Indians or Alaska Native (70.4%) adults followed by Hispanic or Latino (51.7%), NH Black (53.0%), Native Hawaiian or Other Pacific Islander (48.9%), and NH Asian (36.9%) adults.
- In 2020 among US middle and high school students, the prevalence of past 30-day cigarette use was 3.7% in NH White youth compared with 2.5% in NH Black youth and 3.6% in Hispanic youth.
- In 2019, the lifetime use of tobacco products among US adolescents 12 to 17 years old was highest among American Indians and Alaska Native (21.6%) adolescents, followed by NH White (14.8%), Hispanic or Latino (12.0%), NH Black (8.8%), and NH Asian (3.5%) adolescents.
- In 2014 to 2015, receipt of doctor’s advice to quit among US adult smokers was significantly lower in NH Black (59.7%) and Hispanic (57.9%) individuals compared with NH White individuals (66.6%).

Physical Inactivity

- In 2019, the prevalence of using computers ≥3 hours per day (for activities other than schoolwork) was 46.1% for all US adolescents in grades 9 through 12. For Hispanic adolescents, the prevalence was 47.2%.
- In 2019, the prevalence of watching television ≥3 hours per day was 19.8 for all US adolescents in grades 9 through 12. For Hispanic adolescents, the prevalence was 21.3%.
- In 2018, 24.0% of all US adults and 21.4% of Hispanic or Latino adults 18 years of age and older met both the 2018 Federal Aerobic and Strengthening Physical Activity Guidelines for Adults. In 2018, among US Hispanic adults 18 years of age and older, 51.7% of males and 43.2% of females met aerobic guidelines of the 2018 Federal Physical Activity Guidelines for Americans through moderate leisure-time activity or vigorous activity. Of all US adults, 54.2% met the aerobic guidelines.
Overweight and Obesity

- According to 2015 to 2018 US data, 35.4% of children and adolescents 2 to 19 years of age were overweight or obese and 19.0% were obese. Among Hispanic children and adolescents, rates of overweight and obesity were 45.9% for males and 43.8% for females and rates of obesity were 28.6% for males and 23.4% for females.
- Between 2015 and 2018, 71.3% of US adults over 20 years of age in the United States were overweight or obese; 40.6% were obese. Among Hispanic adults 84.8% of males and 77.8% of females were overweight or obese; 44.0% of males and 46.2% of females were obese.

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

- Using 2014 to 2015 US data, the incidence of type 1 diabetes in youths less than 20 years of age was 22.3 per 100,000. For Hispanic youths, the incidence of type 1 diabetes was 16.3 per 100,000. The incidence of type 2 diabetes was 13.8 per 100,000 for all youths, and 20.9 per 100,000 for Hispanic youth.
- Among US Hispanic adults 20 years of age or older between 2015 and 2018:
  - 15.3% of males and 13.1% of females had physician diagnosed diabetes
  - 6.0% of males and 4.6% of females had undiagnosed diabetes
  - 49.8% of males and 41.2% of females had prediabetes

For additional information, charts and tables, see
Heart Disease & Stroke Statistics – 2022 Update

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

Many statistics in this At-a-Glance document 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 At-a-Glance document, 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:

Link to document: https://www.ahajournals.org/doi/10.1161/CIR.0000000000001052

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