

2019 Heart Disease & Stroke Statistical Update Fact Sheet Cardiovascular Health

Cardiovascular Health

By 2020, to improve the cardiovascular health of all Americans by 20%, while reducing deaths from cardiovascular diseases and stroke by 20%.

AHA's goals for cardiovascular health (CV) are characterized by 7 metrics (Life's Simple 7), including health behaviors (i.e, not smoking, healthy diet pattern, sufficient physical activity (PA), normal body weight) and health factors (i.e. normal blood cholesterol, blood pressure, and fasting blood glucose in the absence of drug treatment). Ideal cardiovascular health is defined by the absence of clinically manifest CVD together with the simultaneous presence of optimal levels of all 7 metrics for health behaviors and health factors. The table below provides the specific definitions for poor, intermediate, and ideal cardiovascular health for each of the 7 metrics, both for adults and for children.

Definitions of Poor, Intermediate, and Ideal Cardiovascular Health for Each Metric			
Metric	Poor	Intermediate	Ideal
Current smoking			
Adults ≥20 y of age	Yes	Former ≥12 mo	Never or quit >12 mo
Children 12–19 y of age*	Tried during the prior 30 days	()	Never tried; never smoked whole cigarette
BMI†			
Adults ≥20 y of age	≥30 kg/m2	25-29.9 kg/m2	<25 kg/m2
Children 2–19 y of age	>95th percentile	85th–95th percentile	<85th percentile
Physical activity			
Adults ≥20 y of age	None	1–149 min/wk moderate or 1–74 min/wk vigorous or 1–149 min/wk moderate + 2× vigorous	≥150 min/wk moderate or ≥75 min/wk vigorous or ≥150 min/wk moderate + 2× vigorous
Children 12–19 y of age	None	>0 and <60 min of moderate or vigorous-daily	≥60 min of moderate or vigorous every day
Healthy diet pattern, No. of components (AHA diet score)‡			
Adults ≥20 y of age	<2 (0-39)	2-3 (40-79)	4-5 (80-100)
Children 5–19 y of age	<2 (0-39)	2-3 (40-79)	4-5 (80-100)
Total cholesterol, mg/dL			
Adults ≥20 y of age	≥240	200-239 or treated to goal	<200
Children 6–19 y of age	≥200	170-199	<170
Blood pressure			
Adults ≥20 y of age	SBP ≥140 mm Hg or DBP ≥90 mm Hg	SBP 120–139 mm Hg or DBP 80–89 mm Hg or treated to goal	<120 mm Hg/<80 mm Hg
Children 8–19 y of age	>95th percentile	90th–95th percentile or SBP ≥120 mm Hg or DBP ≥80 mm Hg	<90th percentile
Fasting plasma glucose, mg/dL			
Adults ≥20 y of age	≥126	100-125 or treated to goal	<100
Children 12–19 y of age	≥126	100-125	<100

AHA indicates American Heart Association; BMI, body mass index; DBP, diastolic blood pressure; ellipses (...), data not available; and SBP, systolic blood pressure.

‡In the context of a healthy dietary pattern that is consistent with a Dietary Approaches to Stop Hypertension (DASH)–type eating pattern, to consume ≥4.5 cups/d of fruits and vegetables, ≥2 servings/wk of fish, and ≥3 servings/d of whole grains and no more than 36 oz/wk of sugar-sweetened beverages and 1500 mg/d of sodium. The consistency of one's diet with these dietary targets can be described using a continuous AHA diet score, scaled from 0 to 100. Modified from Lloyd-Jones et al. Copyright © 2010, American Heart Association, Inc.

^{*}Age ranges in children for each metric depend on guidelines and data availability.

[†]Represents appropriate energy balance, that is, appropriate dietary quantity and physical activity to maintain normal body weight.

Summary of Cardiovascular Health (CV) of All Americans

- For most metrics based on 2013 to 2014 data, the prevalence of ideal levels of health behaviors and health factors was higher in US children than in US adults. The main exceptions are diet and PA, for which prevalence of ideal levels in children was worse than in adults.
- Based on 2013 to 2014 data, among US children aged 12 to 19 years, the prevalence (unadjusted) of ideal levels of cardiovascular health behaviors and factors varied from <1% for the healthy diet pattern (i.e., <1 in 100 US children meets at least 4 of the 5 dietary components or a corresponding diet score of at least 80) to >80% for the smoking, BP, and fasting glucose metrics.
- Among US adults, the age-standardized prevalence of ideal levels of cardiovascular health behaviors and factors varied from <1% for having a healthy diet pattern to up to 78% for never having smoked or being a former smoker who has quit for >12 months.
- Based on 2013 to 2014 data, the metrics with the greatest potential for improvement in the United States are health behaviors, including diet quality, PA, and body weight. However, each of the 7 cardiovascular health metrics can be improved and deserves major focus.

CV Health in Children

- In 2013 to 2014, few US children 12 to 19 years of age (≈4%) met only 0, 1, or 2 criteria for ideal cardiovascular health.
- In 2013 to 2014, approximately half of US children (48%) met 3 or 4 criteria for ideal cardiovascular health, and ≈47% meet 5 or 6 criteria.
- In 2013 to 2014, less than 1% of children met all 7 criteria for ideal cardiovascular health.
- In 2013 to 2014, approximately 47% of US children 12 to 19 years of age have ≥5 metrics at ideal levels, with similar prevalence in boys (49%) as in girls (46%).

CV Health in Adults

- In 2013 to 2014, approximately 2% of US adults met 0 of the 7 criteria at ideal levels, and another 15% met only 1 of 7 criteria. This is much worse than among children (12-19 years of age), for whom having ≤1 ideal metric is <1%.
- In 2013 to 2014, most US adults (≈62%) had 3 or fewer criteria at ideal cardiovascular health.
- In 2013 to 2014, approximately 13% of US adults met ideal levels in 5 criteria, 5% had 6 ideal levels, and virtually 0% had 7 criteria at ideal levels.

CV Health and Age/Sex

- Presence of ideal cardiovascular health is both age and sex related.
- Based on 2013 to 2014 data, younger adults were more likely to meet greater numbers of ideal metrics than are older adults. More than 60% of Americans >60 years of age had ≤2 metrics at ideal levels. At any age, females tended to have more metrics at ideal levels than did males.

CV Health and Race

• Presence of ideal cardiovascular health varies by race. Blacks and Hispanics tend to have fewer metrics at ideal levels than other races. Based on 2013 to 2014 data, having ≥4 ideal metrics was most common among Asians (48%), followed by whites (38%), Hispanics (34%), blacks (30%), and others (24%).

CV Health and Race (continued)

 Based on 2013 to 2014 data, in adults, NH Asians had a higher prevalence of ≥5 metrics at ideal levels than other race/ethnic groups. In children, the prevalence of ≥5 metrics at ideal levels was highest for NH whites.

Among children between 2013 and 2014, approximately 53% of NH whites, 48% of NH Asians, 40% of Hispanics, and 36% of NH blacks had ≥5 metrics at ideal levels. 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

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