



2020 Heart Disease & Stroke Statistical Update Fact Sheet Blacks & Cardiovascular Diseases

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

- Based on 2013 to 2016 data, among non-Hispanic (NH) blacks age 20 and older, 60.1% of males and 57.1% of females had CVD.
- In 2017 among all ages, CVD caused the deaths of 54,780 NH black males and 52,528 NH black females.
- The Atherosclerosis Risk in Communities Study of middle-aged participants, published in 2007, showed that ≈90% of CVD events occurred in black participants, compared with ≈65% in white participants, appeared to be explained by elevated or borderline risk factors.

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

- According to 2013 to 2016 data, among NH blacks age 20 and older, 7.2% of males and 6.5% of females had CHD.
- According to 2013 to 2016 data, among NH blacks age 20 and older, 4.0% of males and 2.2% of females have had a myocardial infarction (heart attack).
- Based on data from 2005 to 2014, each year in ages 35 years and older, about 90,000 black males and 75,000 black females had an MI or fatal CHD event. (*Estimate includes Hispanics and non-Hispanics.)
- In 2017 among all ages, CHD caused the deaths of 22,167 black males and 18,055 black females.
- In 2017 among all ages, myocardial infarction caused the deaths of 6,595 black males and 5,458 black females.
- Within 1 year after a first MI, based on 1995 to 2012 data:
 - At 45 to 64 years of age, 9% of black males, and 10% of black females will die.
 - At 65 to 74 years of age, 22% of black males, and 21% of black females will die.
 - At ≥75 years of age, 19% of black males, and 31% of black females will die.
- Within 5 years after a first MI, based on 1995 to 2012 data:
 - At 45 to 64 years of age, 16% of black males and 28% of black females will die.
 - At 65 to 74 years of age, 33% of black males and 44% of black females will die.
 - At ≥75 years of age, 61% of black males and 64% of black females will die.
- Of those who have a first MI, the percentage with a recurrent MI or fatal CHD within 5 years is as follows, based on 1995 to 2012 data:
 - At 45 to 64 years of age, 22% of black males and 32% of black females.
 - At 65 to 74 years of age, 30% of black males and 30% of black females.
 - At ≥75 years of age, 45% of black males and 20% of black females.
- Based on 1995 to 2012 data, for those 45 years of age and older, the median survival time (in years) after a first MI was 7.0 for black males, and 5.5 for black females.
- In 2017, CHD age-adjusted death rates per 100,000 were 142.2 for NH black males, and 81.8 for NH black females.

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

- According to 2013 to 2016 data, among NH blacks age 20 and older, 3.1% of males and 3.8% of females have had a stroke.
- In 2005, blacks had a higher annual age-adjusted incidence of first-ever ischemic stroke (294/100,000) than that of whites (179/100,000).
- In 2017 among all ages, stroke caused the deaths of 8,566 NH black males and 10,522 NH black females.
- The 2017 age-adjusted death rate for stroke was 57.9 per 100,000 for NH black males and 48.3 per 100,000 NH black females.

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

- According to 2013 to 2016 data, among NH blacks age 20 and older, 58.6% of males and 56.0% of females had HBP (defined as systolic pressure of 130 mm Hg or higher or diastolic pressure of 80 mm Hg or higher, or taking antihypertensive medicine or being told twice by a physician or other professional that you have hypertension).
- Based on 2014 data, black adults were more likely (33.0%) to have been told on ≥ 2 occasions that they had HBP than American Indian/Alaska Native adults (26.4%), white adults (23.5%), Hispanic or Latino adults (22.9%), or Asian adults (19.5%).
- According to 2011 to 2016 data, among NH blacks with hypertension, 48.4% of males and 64.6% of females received treatment for their HBP.
- In 2017 among all ages, HBP caused the deaths of 8,690 NH black males and 8,387 NH black females.
- In 2017 the age-adjusted death rate from HBP was 23.0 per 100,000. H Death rates (per 100,000) for NH blacks were 54.1 for males and 37.8 for females.

High Blood Cholesterol and Other Lipids

- According to 2013 to 2016 data, among children 6 to 11 years of age, the mean total cholesterol level was 157.8 mg/dL. Among NH black children 6 to 11 years of age, the mean total cholesterol level was 158.8 mg/dL for males and 158.2 mg/dL for females.
- According to 2013 to 2016 data, among adolescents 12 to 19 years of age, the mean total blood cholesterol level was 154.4 mg/dL. For NH blacks, mean total cholesterol was 150.8 mg/dL for males and 156.0 mg/dL for females.
- According to 2011 to 2012 data, among NH blacks, 71.9% had their cholesterol checked in the past 5 years (66.8% of males and 75.9% of females).
- Among NH blacks age 20 and older from 2013 to 2016:
 - 29.8% of males and 33.1% of females had total blood cholesterol levels of 200 mg/dL or higher.
 - 8.9% of males and 9.0% of females had total blood cholesterol levels of 240 mg/dL or higher.
 - 29.5% of males and 23.4% of females had low-density lipoprotein (LDL) cholesterol of 130 mg/dL or higher.
 - 19.8% of males and 8.1% of females had high-density lipoprotein (HDL) cholesterol less than 40 mg/dL.

Smoking

- Using data from 2011 to 2018, among adolescents in high school, NH white students were more likely than Hispanic or NH black students to report cigarette use in the past 30 days.
- Among black adults aged 18 years or older in 2017, 14.9% were current cigarette smokers.
- During 2011 to 2012, the percentage of the US nonsmoking population with serum cotinine ≥ 0.05 ng/mL (which indicates exposure to secondhand smoke) was higher for NH blacks (46.8%) than for NH whites (21.8%) and Mexican Americans (23.9%).

Physical Inactivity

In 2017:

- Nationwide, 15.4% of high school students reported that they were inactive on all of the previous 7 days (that is, they did not participate in > 60 minutes of any kind of physical activity, including aerobic or muscle and bone strengthening activity, on any 1 of the previous 7 days).
- The prevalence of inactivity for high school students was highest among black (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%).
- The prevalence of high school students using computers ≥ 3 hours per day for activities other than school work (e.g., video games 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%).
- The prevalence of watching television ≥ 3 hours per day among students in grades 9 through 12 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, 20.8% of NH blacks age 18 and older met the 2018 Federal Aerobic and Strengthening Physical Activity Guidelines for Adults.

Overweight and Obesity

- Based on data from 2013 to 2016, 34.2% of children age 2 to 19 in the United States were overweight or obese; 17.8% were obese. Among NH black children, 32.4% of males and 42.2% of females were overweight or obese; 17.9% of males and 23.0% of females were obese.
- Based on data from 2013 to 2016, 69.9% of adults over age 20 in the United States were overweight or obese; 38.3% were obese, and 7.7% were extremely obese. Among NH black adults 69.1% of males and 79.5% of females were overweight or obese, 37.0% of males and 55.3% of females were obese, and 7.2% of males and 15.3% of females were extremely 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 17.7%. Prediabetes was higher in NH blacks (21.0%) and Hispanics (22.9%) than in NH white participants (15.1%).
- A multi-center study found that among youth 10-19 years of age, the incidence of type 2 diabetes mellitus increased by 7.1% annually (from 9.0 to 12.5 cases per 100 000 youths per year from 2002 to 2012). The annual increase was larger among females than males and among NH blacks, Hispanics, Asian or Pacific Islanders, and Native Americans compared with NH whites.
- Among NH black adults between 2013 and 2016, aged 20 years and older:
 - 14.7% of males and 13.4% of females had physician diagnosed diabetes.
 - 1.7% of males and 3.3% of females had undiagnosed diabetes.
 - 31.9% of males and 24.0% of females had prediabetes.
- In 2017, diabetes caused the deaths of 7,494 NH black males and 7,304 NH black females.

Unless otherwise noted, all statistics in this Fact Sheet pertain to the United States.

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.0000000000000757

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>.