



The 2024 and 2025 Statistics Updates both contain 2021 Global Burden of Disease study data. Some global estimates below (from the 2025 Statistics Update) reflect slightly different estimates from the 2024 Statistics Update due to improvements in demography and population estimation, statistical and geospatial modeling methods, and the addition of nearly 3000 new data sources since the 2024 AHA Statistics Update.

### **Cardiovascular Disease (CVD)**

- In 2021, approximately 19.41 million global deaths were attributed to CVD. The age-adjusted death rate per 100 000 population was 235.18. The global prevalence of CVD was 612.06 million. The age-adjusted prevalence rate was 7178.73 per 100 000.
- The highest mortality rates attributable to CVD in 2021 were in central Asia and eastern Europe, with high levels also seen for Oceania, north Africa and the Middle East, and central sub-Saharan Africa. Rates were lowest for high-income Asia Pacific and Australasia.

### **Coronary Heart Disease (CHD)**

- Globally, it was estimated that in 2021, 254.28 million people were living with ischemic heart disease (IHD), and it was more prevalent in males than in females (145.31 and 108.97 million people, respectively).
- In 2021, North Africa and the Middle East had the highest prevalence rates of IHD amongst regions, followed by eastern Europe and south and central Asia.
- An estimated 8.99 million total deaths due to IHD occurred globally in 2021.
- In 2021, the global IHD age-standardized mortality rate was 108.73 per 100 000. IHD mortality rates were highest for central Asia, eastern Europe, and north Africa and the Middle East. Mortality was lowest for high-income Asia Pacific.

### **Stroke**

- The global prevalence of stroke in 2021 was 93.82 million people, whereas that of ischemic stroke was 69.94 million, that of intracerebral hemorrhage was 16.60 million, and that of subarachnoid hemorrhage was 7.85 million.
- Overall, in 2021, age-standardized stroke prevalence rates were highest for sub-Saharan Africa and east, southeast, and central Asia. Rates were the lowest for Australasia.
  - Age-standardized prevalence of ischemic stroke was highest for southern sub-Saharan Africa, followed by western sub-Saharan Africa and east and central Asia.
  - Age-standardized prevalence of intracerebral hemorrhage was highest for western sub-Saharan Africa, southeast Asia, Oceania, and high-income Asia Pacific.
  - Age-standardized prevalence of subarachnoid hemorrhage was highest for high-income Asia Pacific and Andean Latin America.

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- In 2021, there were 7.25 million deaths attributable to stroke worldwide. A total of 3.59 million individuals died of ischemic stroke, 3.31 million individuals died of intracerebral hemorrhage, and 0.35 million individuals died of subarachnoid hemorrhage.
- In 2021, age-standardized mortality attributable to stroke was highest for Oceania and southeast Asia. Rates were lowest for Australasia and western Europe.
  - Age-standardized mortality attributable to ischemic stroke was highest for eastern Europe, followed by north Africa and the Middle East and central Asia. Mortality was lowest for Australasia.
  - Age-standardized intracerebral hemorrhage mortality was highest for Oceania, followed by southeast and east Asia and central and eastern sub-Saharan Africa.
  - Age-standardized mortality estimated for subarachnoid hemorrhage was highest for Oceania followed by southeast Asia and Andean Latin America.

### High Blood Pressure

- Based on 2021 data, age-standardized mortality rates attributable to high systolic blood pressure were highest for central Asia, followed by eastern Europe, central sub-Saharan Africa, and north Africa and the Middle East. High systolic blood pressure was attributed to 10.85 million deaths in 2021.
- Between 1990 and 2015, the number of deaths related to systolic blood pressure  $\geq 140$  mm Hg did not increase in high-income countries (from 2.197 to 1.956 million deaths) but did increase in high-middle-income (from 1.288 to 2.176 million deaths), middle-income (from 1.044 to 2.253 million deaths), low-middle-income (from 0.512 to 1.151 million deaths), and low-income (from 0.146 to 0.293 million deaths) countries.

### High Blood Cholesterol and Other Lipids

- In 2021, high low-density lipoprotein cholesterol accounted for 3.65 million global deaths. The age-standardized global mortality rate in 2021 attributable to high low-density lipoprotein cholesterol was 43.67 per 100 000.
- In 2021, the age-standardized mortality rates (per 100 000) attributable to high low-density lipoprotein cholesterol were highest for eastern Europe followed by central Asia and north Africa and the Middle East.

### Smoking

- Tobacco caused an estimated 7.25 million deaths globally in 2021 (5.68 million males and 1.57 million females).
  - The most recent Global Burden of Disease study estimated that in 2021, smoking was the second-leading risk of years of life lost due to premature mortality (high systolic blood pressure was number 1), and smoking ranked fourth in risk factors for disability-adjusted life years globally.
- Based on 2021 data, east Asia and Oceania had the highest mortality rates attributable to tobacco. Mortality rates were lowest for Andean Latin America.

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### Physical Inactivity

- Mortality rates attributable to low physical activity amongst regions were highest for southern sub-Saharan Africa, north Africa and the Middle East, and Oceania in 2021. Mortality rates were lowest for high-income Asia Pacific and southern Latin America.
  - Low physical activity was associated with an estimated 0.66 million global deaths in 2021.

### Overweight and Obesity

- Based on 2021 data, age-standardized mortality rates attributable to high body mass index amongst regions were lowest for high-income Asia Pacific and highest for southern sub-Saharan Africa, north Africa and the Middle East, and Oceania.
- High body mass index was attributed to 3.71 million global deaths in 2021.

### Diabetes

- Based on 2021 global data, 525.65 million people (270.84 million males and 254.81 million females) had diabetes. The age-standardized prevalence of diabetes was 6123.59 per 100 000.
- The age-standardized prevalence of diabetes in 2021 amongst regions was estimated to be highest for Oceania, followed by north Africa and the Middle East, the Caribbean, and high-income North America.
- The global age-standardized mortality rate for high fasting plasma glucose in 2021 was 63.73 per 100 000. Age-standardized mortality rates attributable to high fasting plasma glucose in 2021 amongst regions were highest for Oceania followed by southern and central sub-Saharan Africa and north Africa and the Middle East.
- The global age-standardized mortality rate for diabetes in 2021 was 19.61 per 100 000. Age-standardized mortality attributable to diabetes was highest for Oceania, followed by southern sub-Saharan Africa. Rates were lowest for high-income Asia Pacific.

Fact sheets, infographics, and current/past Statistics Update publications can be downloaded from:

[Heart and Stroke Association Statistics](#) | [American Heart Association](#).

Many statistics in this fact sheet come from unpublished tabulations compiled for the Statistics Update 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 fact sheet, please review the full Heart Disease and Stroke Statistics document to determine data sources and original citations.

The American Heart Association requests that the full document be cited as follows:

Martin SS, Aday AW, Allen NB, Almarzooq ZI, Anderson CAM, Arora P, Avery CL, Baker-Smith CM, Bansal N, Beaton AZ, Commodore-Mensah Y, Currie ME, Elkind MSV, Fan W, Generoso G, Gibbs BB, Heard DG, Hiremath S, Johansen MC, Kazi DS, Ko D, Leppert MH, Magnani JW, Michos ED, Mussolino ME, Parikh NI, Perman SM, Rezk-Hanna M, Roth GA, Shah NS, Springer MV, St-Onge M-P, Thacker EL, Urbut SM, Van Spall HGC, Voeks JH, Whelton SP, Wong ND, Wong SS, Yaffe K, Palaniappan LP; on behalf of the American Heart Association Council on Epidemiology and Prevention Statistics Committee and Stroke Statistics Committee. 2025 Heart disease and stroke statistics: a report of US and global data from the American Heart Association. *Circulation*. Published online January 27, 2025.

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