

Cardiovascular Health

Key Findings

Major cardiovascular diseases (heart disease and stroke) accounted for 30% of all Sandusky County adult deaths from 2000-2002 (Source: ODH Information Warehouse). The 2005 Sandusky County health assessment found that 7% of adults had been diagnosed with angina (chest pain) or coronary heart disease and 5% have had a heart attack. Over one-third (37%) of Sandusky County adults have been diagnosed with high blood pressure and 33% have high blood cholesterol, two known risk factors for heart disease and stroke.

Sandusky County Leading Causes of Death 2000-2002

Total Deaths 1,785

- #1 Heart Disease (25% of all deaths)
- #2 Cancers (24%)
- #3 Chronic Lower Respiratory Diseases (5%)
- #3 Stroke (5%)
- #5 Diabetes (4%)

(Source: ODH Information Warehouse, updated 9-29-04)

Heart Disease and Stroke

- ◆ The 2005 health assessment project identified 7% of Sandusky County adults had been diagnosed with angina (chest pain) and/or coronary heart disease, increasing to 17% of those age 60 years and older.
- ◆ 5% of adults reported they had a heart attack or myocardial infarction and in 2000, the BRFSS reported an adult heart attack rate of 5% for Ohio. In Sandusky County, this number increases to 14% of those age 60 years of age and older, 9% of those with incomes less than \$25,000, and 7% of males.
- ◆ Only 3% of Sandusky County adults reported having had a stroke and in 2000, the Ohio rate reported by the BRFSS was 3%.
- ◆ 22% of adults were advised by their doctor to eat fewer high fat or high cholesterol foods and exercise more and 21% reported doing so.

High Blood Pressure (Hypertension)

- ◆ Over one-third (37%) of Sandusky County adults had been diagnosed with high blood pressure. The 2003 BRFSS reports hypertension prevalence rates of 26% for Ohio and 25% for the U.S. Sandusky County adults diagnosed with high blood pressure were more likely to:
 - Have been age 60 years or older (59%)
 - Have been classified as obese by Body Mass Index-BMI (43%)
 - Have rated their health as fair or poor (21%)
 - Have been diagnosed with angina and/or coronary heart disease (13%)
- ◆ 86% of adults have had their blood pressure taken by a health professional in the past year.

High Blood Cholesterol

- ◆ One-third (33%) of adults had been diagnosed with high blood cholesterol. Sandusky County adults with high blood cholesterol were more likely to:
 - Be age 60 years and older (52%)
 - Be classified as obese by BMI (38%)
 - Rate their health as fair or poor (18%)
 - Have been diagnosed with angina and/or coronary heart disease (15%)
- ◆ 43% of adults have had their cholesterol checked by a health professional in the past year.

Ohio Leading Causes of Death 2000-2002

- #1 Heart Disease (30% of all deaths)
- #2 Cancers (23%)
- #3 Stroke (7%)
- #4 Chronic Lower Respiratory Diseases (5%)
- #5 Diabetes (3%)

(Source: ODH Information Warehouse, updated 9-29-04)

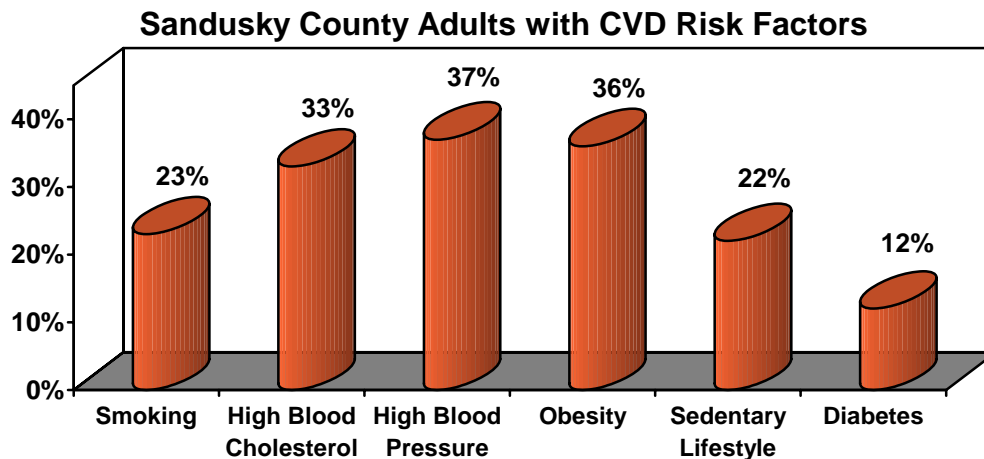
United States Leading Causes of Death 2002

- #1 Heart Disease (696,947 deaths)
- #2 Cancers (557, 271)
- #3 Stroke (162,672)
- #4 Chronic Lower Respiratory Diseases (124,816)
- #5 Unintentional Injury (106,742)

(Source: National Center for Health Statistics, data for 2002)

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The following graph demonstrates the percentage of Sandusky County adults who had major risk factors for developing cardiovascular disease (CVD). (Source: 2005 Sandusky County Health Assessment)



Risk Factors for Cardiovascular Disease That Can Be Modified or Treated:

Smoking – Smokers are 2 to 4 times more likely to develop heart disease than nonsmokers. For smokers the risk for sudden death related to heart disease is twice the risk for nonsmokers. Smokers are also ten times more likely to develop peripheral vascular disease than nonsmokers, a disease typically in the peripheral (surface) arteries of the legs in which fatty deposits narrow the arteries, decreasing circulation and development of leg ulcers. Environmental tobacco smoke (secondhand smoke) also increases risk of heart disease.

Diabetes Mellitus – 75% of people with diabetes die from some type of disease affecting blood vessels or the heart. Controlling blood sugar (glucose) is very important, although there remains an increased risk for heart disease even when blood glucose levels are managed.

Cholesterol – High blood cholesterol alone increases the risk for stroke and heart disease; however, the risk is even greater when high blood cholesterol is compounded with other risk factors such as smoking, sedentary lifestyle, and obesity.

High Blood Pressure – High blood pressure causes the heart to enlarge and weaken over time. Other risks associated with high blood pressure include stroke, heart attack, congestive heart failure, and kidney failure. When compounded with risk factors such as smoking, sedentary lifestyle, and obesity, the risk for heart attack and stroke dramatically increases.

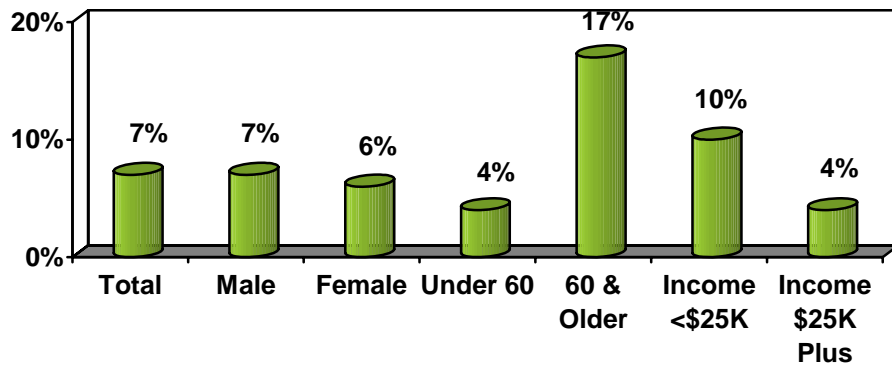
Physical Inactivity – Exercise can lower blood cholesterol and blood pressure, decrease the incidence of diabetes, and help with weight management. Vigorous exercise is most beneficial in preventing cardiovascular disease; however, moderate intensity is also beneficial if done long term.

Obesity and Overweight – Excess weight increases strain on the heart, which could lead to heart disease or stroke even with no other existing risk factors. Being overweight or obese affects blood cholesterol and blood pressure. It can increase the risk of developing diabetes and it may make this disease more difficult to control. (Source: American Heart Association, Risk Factors for Coronary Heart Disease, 2-9-05)

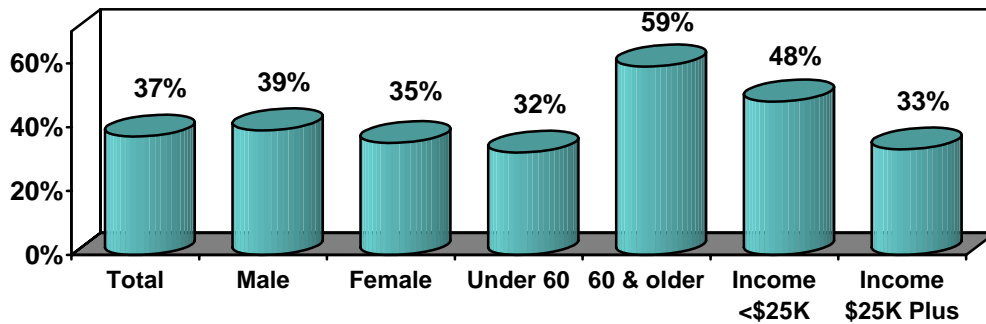
Cardiovascular Health

The following graphs show the number of Sandusky County adults who have been diagnosed with angina (chest pain) and/or coronary heart disease, high blood pressure or high blood cholesterol. Examples of how to interpret the information on the first graph include: 7% of all Sandusky County adults have been diagnosed with angina (chest pain) and/or coronary heart disease, 7% of all Sandusky County males, 6% of all females, 4% of those under 60 years, 17% of those 60 years and older, 10% of those with incomes less than \$25,000, and 4% of those with incomes of \$25,000 or more.

Angina (Chest Pain) and/or Coronary Heart Disease

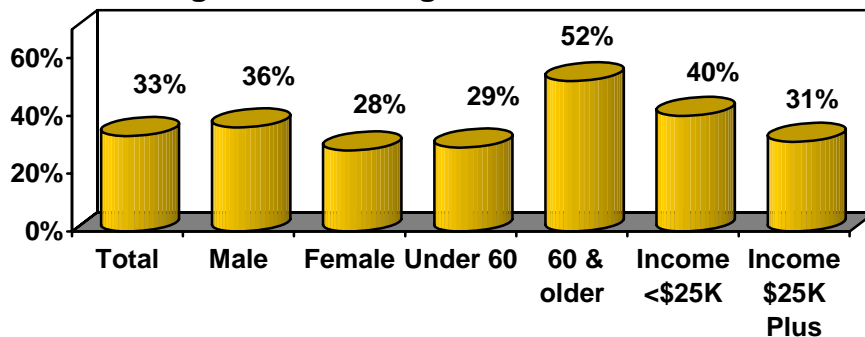


Diagnosed with High Blood Pressure*



**Does not include respondents who indicated high blood pressure during pregnancy only.*

Diagnosed with High Blood Cholesterol

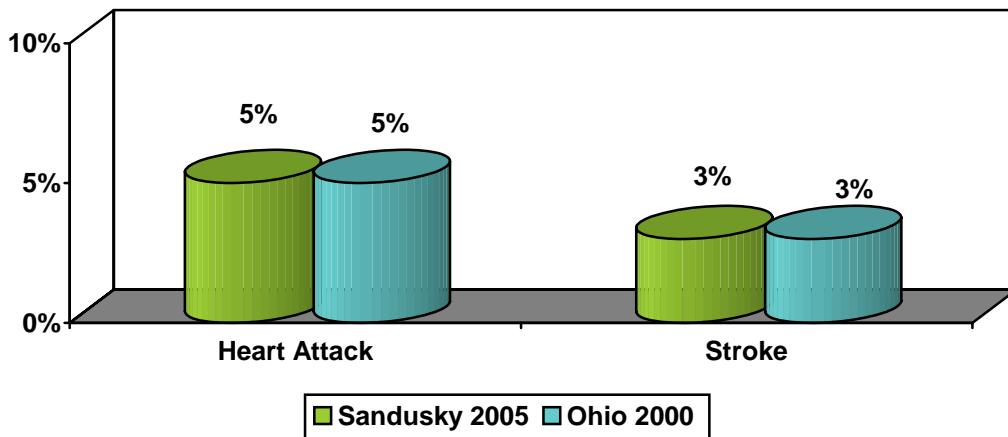


Cardiovascular Health

The following graphs show the Sandusky County and Ohio age-adjusted mortality rates per 100,000 population for heart disease and stroke by gender and race/ethnicity.

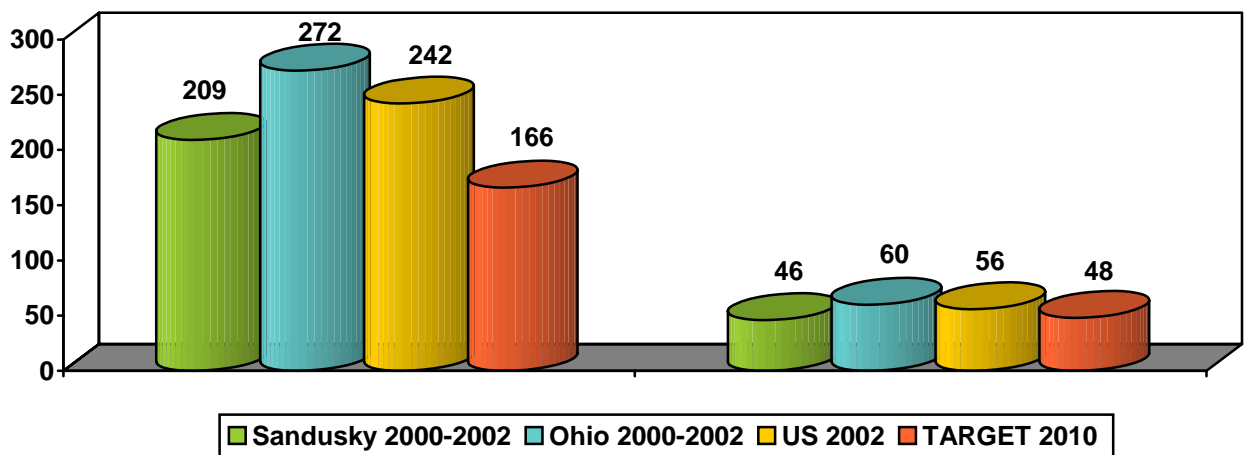
- When age differences are accounted for, the statistics indicate that from 2000-2002, the Sandusky County heart disease mortality rate was lower than both the U.S. figure and the figure for Ohio. The county heart disease mortality rate exceeded the Healthy People 2010 target by 26%.
- The Sandusky County age-adjusted stroke mortality rate for 2000-2002 was lower than both the U.S. and state figures, and was 4% lower than the Healthy People 2010 target rate.
- Disparities exist for heart disease mortality rates by gender and race in Sandusky County and Ohio.

Cardiovascular Disease Prevalence



(Source: 2005 Sandusky Health Assessment and the BRFSS)

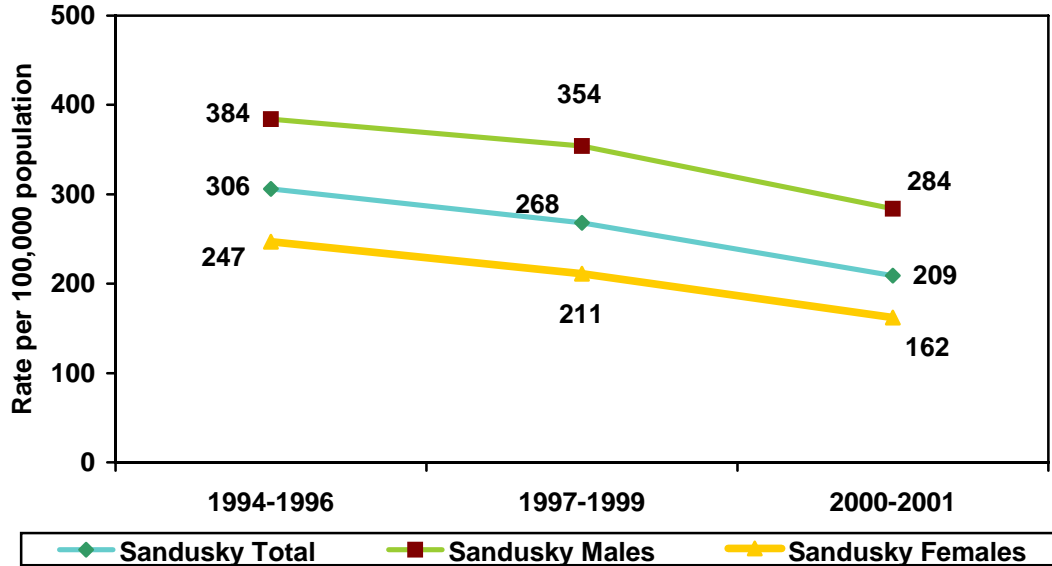
Age-Adjusted Heart Disease and Stroke Mortality Rates



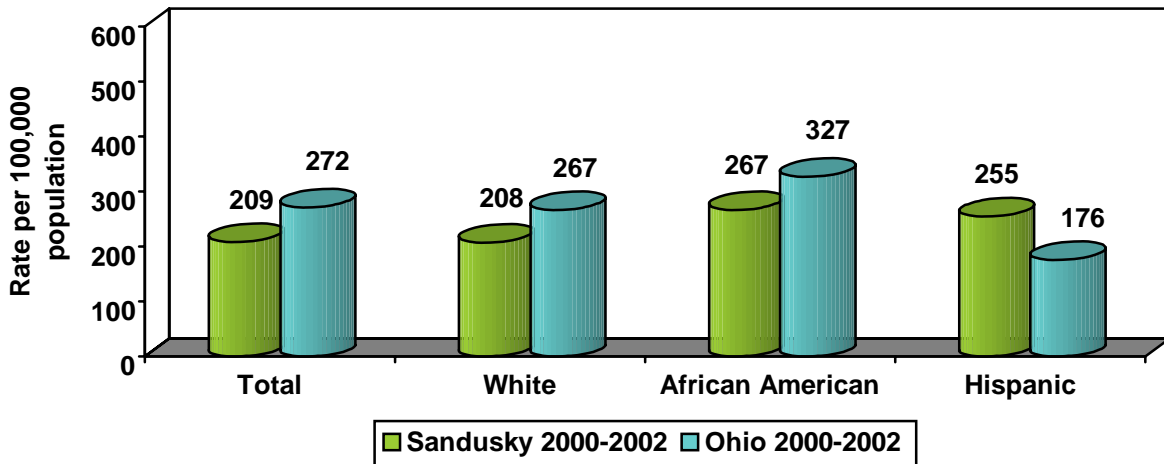
*Graph reports age-adjusted rates/100,000 population, 2000 standard
The Healthy People 2010 Target goal is reported for Coronary Artery Disease
(Source: ODH Information Warehouse, updated 9-29-04, Healthy People 2010, and the CDC FASTATS)*

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Sandusky County Age-Adjusted Heart Disease Mortality Rates by Gender



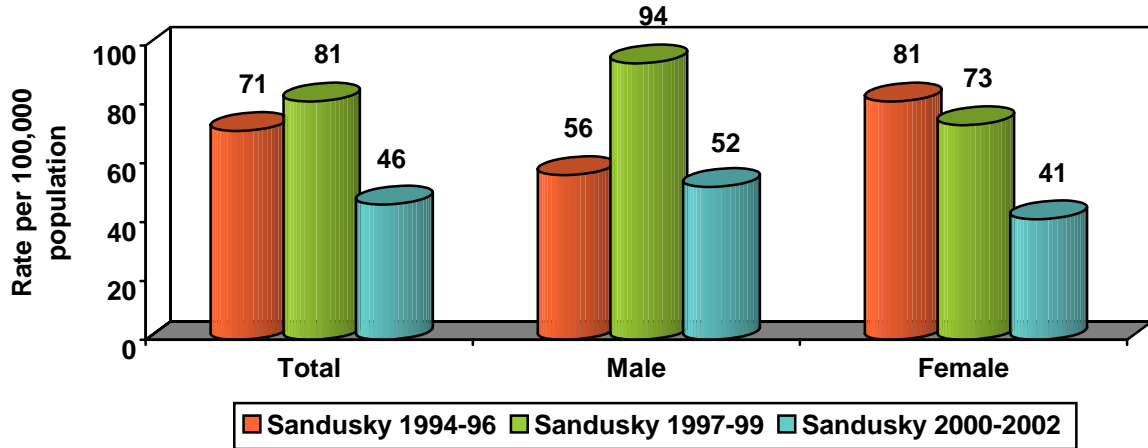
Age-Adjusted Heart Disease Mortality Rates by Race/Ethnicity



(Source for graphs: ODH Information Warehouse, updated 9-29-04)

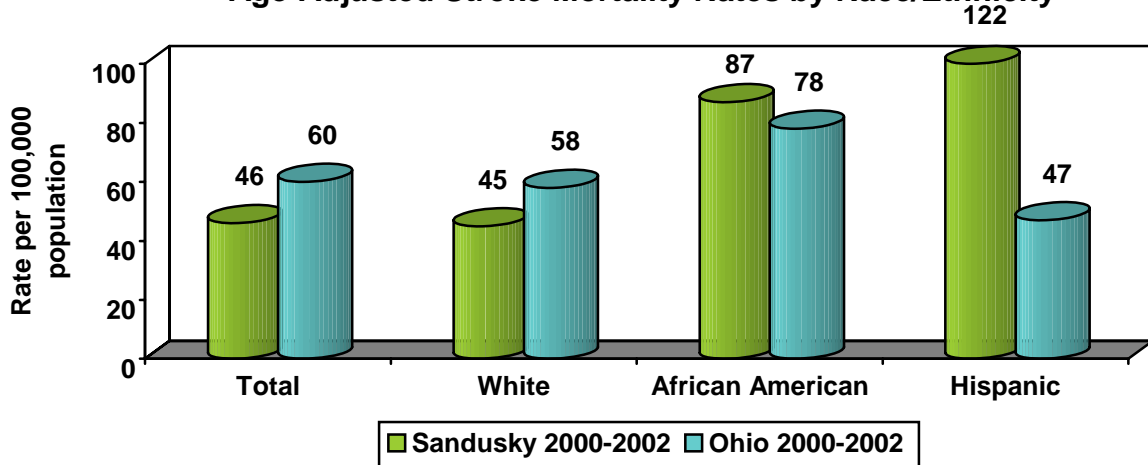
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Age-Adjusted Stroke Mortality Rates by Gender



(Source: ODH Information Warehouse, updated 9-29-04)

Age-Adjusted Stroke Mortality Rates by Race/Ethnicity



The Sandusky County African American rate was calculated with three deaths and the Hispanic rate was calculated with five deaths. These rates should be used with caution.

(Source: ODH Information Warehouse, updated 9-29-04)

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Healthy People 2010 Objectives

High Blood Pressure

Objective	Target	U.S. Baseline	Sandusky Survey Population Baseline (2005)
Reduce proportion of adults with high blood pressure	16%	28%* Adults age 20 and older (1988-94)	37%
Increase proportion of adults with high blood pressure whose BP is under control	50%	18% Adults age 18 and up (1988-94)	N/A
Increase proportion of adults who had BP measured within the preceding 2 years and can state whether BP is normal or higher	95%	90% Adults age 18 and up (1998)	N/A
Increase proportion of adults with high BP who are taking action (i.e., losing weight, increased exercise, decreased sodium intake) to control BP	95%	82% Adults age 18 and up (1988)	N/A

** All U.S. figures age-adjusted to 2000 population standard.*

Blood Cholesterol

Objective	Target	U.S. Baseline	Sandusky Survey Population Baseline (2005)
Decrease proportion of adults with high total blood cholesterol (TBC)	17%	21%* Adults age 20 & up with TBC>240 mg/dl (1988-94)	33%
Decrease mean total blood cholesterol levels among adults	199 mg/dl	206 mg/dl Adults age 20 and up (1988-94)	N/A
Increase proportion of adults who had their blood cholesterol checked within the preceding 5 years	80%	68% Adults age 18 and up (1998)	N/A

** All U.S. figures age-adjusted to 2000 population standard.*