

BRFSS Fact Sheet

Coronary Heart Disease



Tennessee
Department of Health

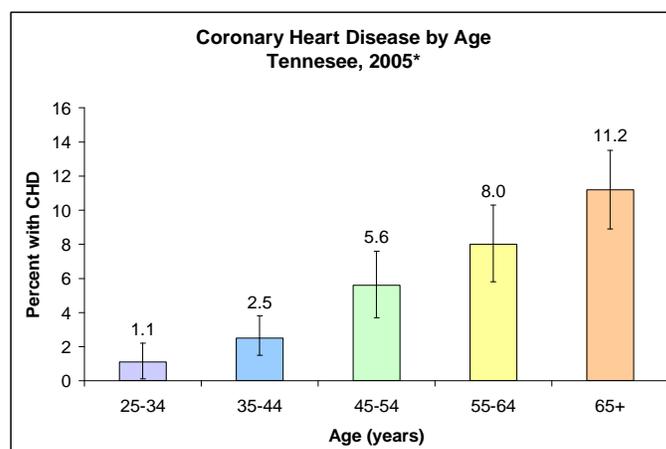
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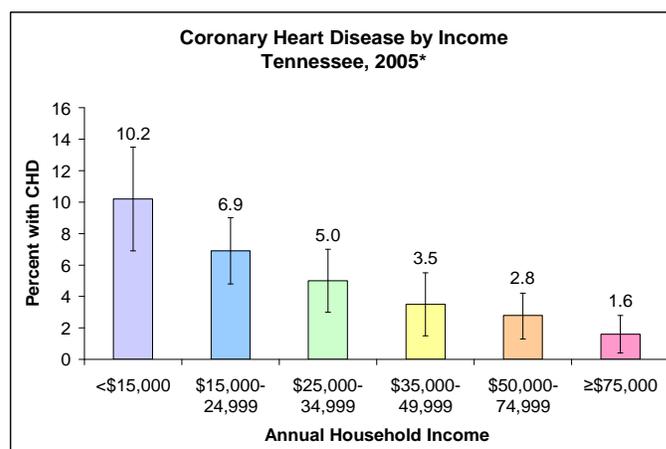
Coronary heart disease (CHD) affects approximately 13 million Americans, and despite decades of declining heart disease mortality rates, it remains the number one cause of death in the U.S. and Tennessee.¹ According to the American Heart Association, someone dies of this disease every sixty seconds in the U.S.¹ One of the Healthy People 2010 objectives is to reduce CHD deaths to 166/100,000 population.² Reducing risk factors for CHD (overweight/obesity, high cholesterol, high blood pressure, diabetes, sedentary lifestyle, and smoking) is important for reaching this goal and for increasing the quality and years of healthy life for all Tennesseans.

- In 2005, 4.7% of adult Tennesseans reported that they had been told by a health care provider that they have coronary heart disease.
- Heart attacks are a serious form of CHD and occur when narrowed blood vessels slow or stop the flow of blood to the heart. Among persons with CHD, 41.4% reported that they had had a heart attack.
- The percentage of persons with CHD was highest among white males (6.1% ± 1.5)*, followed by white females (4.3% ± 1.0), black females (3.6% ± 2.1) and black males (1.6% ± 1.3).†

- The prevalence of CHD increased with increasing age, from 1.1% in 25 to 34 year olds to 11.2% in those 65 years and older.



- The prevalence of CHD increased with decreasing annual household income, from 1.6% among those with an income of \$75,000 or more to 10.2% among those with an income of less than \$15,000.



Definition:

Coronary Heart Disease: A type heart disease characterized by narrowing of the blood vessels supplying blood and oxygen to the heart.

References:

1. American Heart Association. *Heart Disease and Stroke Statistics – 2006 Update*. Dallas, TX: AHA; 2006
2. U.S. Department of Health and Human Services. *Healthy People 2010: Understanding and Improving Health*. 2nd ed. Washington, DC: U.S. Government Printing Office, November 2000.

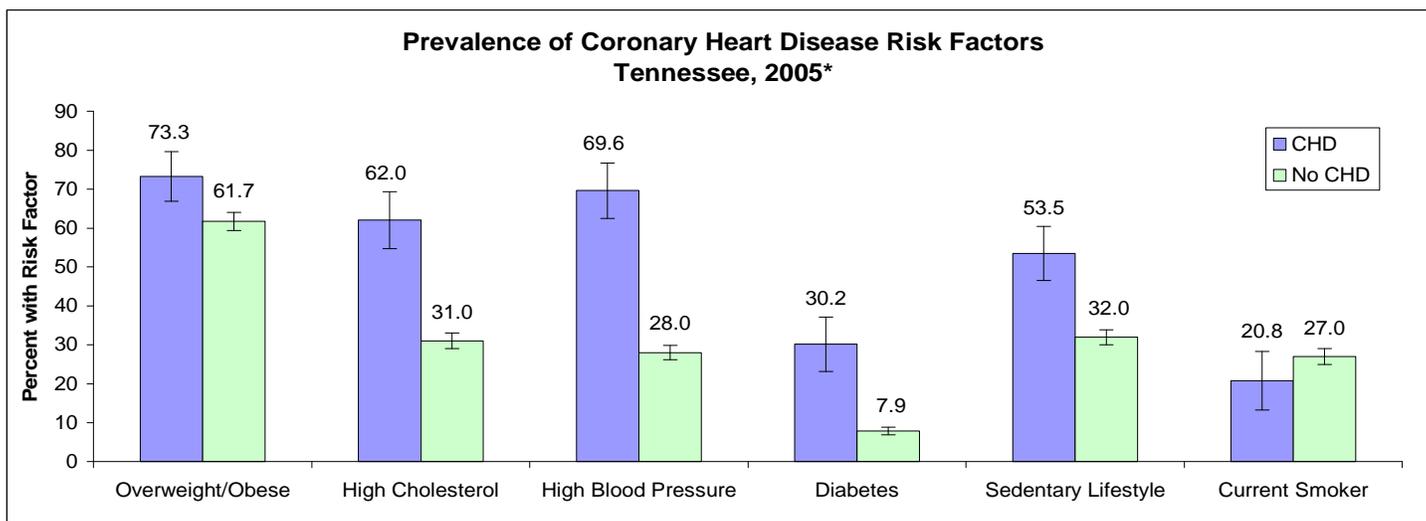
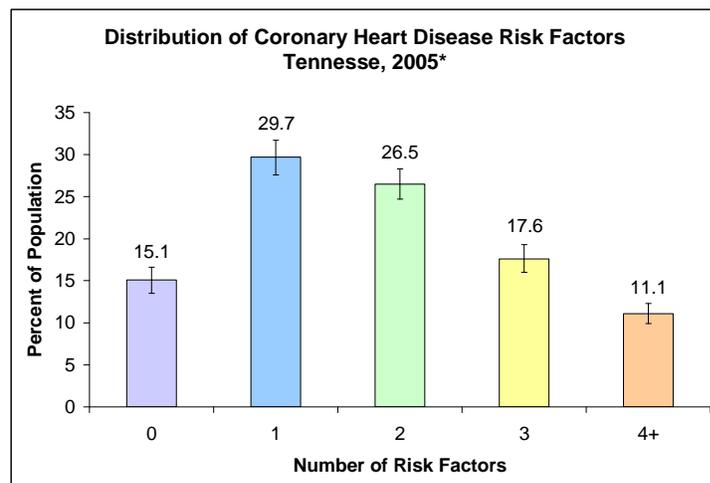
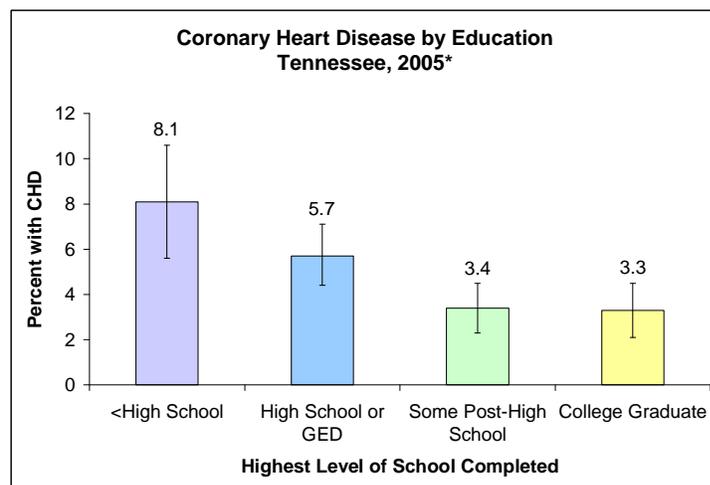
Prepared by the Tennessee Department of Health; Office of Policy, Planning and Assessment; Surveillance, Epidemiology and Evaluation section based on 2005 TN Behavioral Risk Factor Surveillance System data.

- The prevalence of CHD increased with decreasing education, from 3.3% among college graduates to 8.1% among those with less than a high school degree.

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- Among the total population, only 15.1% of adults had *none* of the following modifiable CHD risk factors: overweight/obesity, high cholesterol, high blood pressure, diabetes, sedentary lifestyle, and smoking. 29.7% had one risk factor, and 55.2% had 2 or more risk factors.
- Persons with coronary heart disease were more likely than those without the disease to be overweight/obese (73.3% vs. 61.7%, respectively) and to have a sedentary lifestyle (53.5% vs. 32.0%, respectively).
- High cholesterol and high blood pressure were 2 and 2.5 times as common in persons with CHD as in those without the disease. Diabetes was almost 4 times as common in those with CHD as in those without it.
- Although smoking is an important risk factor for CHD, the prevalence of smoking was not found to be higher in persons with versus those without the disease.



*The number above each column indicates the value for that column. Error bars represent 95% confidence intervals, as do ranges for percentages given in the text.

[†]Other surveys have found higher rates of CHD, especially among blacks. For example, the National Health and Nutrition Examination Survey found that the prevalence of CHD in 2003 was 8.9% in white males, 5.4% in white females, 7.5% in black females and 7.4% in black males.¹