Americans Are Getting Heart-Healthier: Coronary Heart Disease Decreasing in the U.S. Significant improvements seen across multiple sociodemographic groups, according to a new study in the American Journal of Preventive Medicine

Ann Arbor, MI, June 14, 2016 – Coronary heart disease (CHD) is one of the leading causes of death in the United States. A new study evaluating recent trends in the prevalence of CHD in the U.S. population aged 40 years and older showed that CHD rates have decreased significantly, from 10.3% in 2001-2002 to 8.0% in 2011-2012. These results are reported in the American Journal of Preventive Medicine.

Much of the morbidity and mortality of CHD, encompassing angina, myocardial infarction (MI), and related disorders of the coronary arteries, are attributable to treatable risk factors such as hypertension, dyslipidemia, smoking, diabetes, obesity, and overweight. Results of this study indicated that improvements in the management of CHD risk factors have most likely contributed to the overall reduction in CHD, since the decrease was observed mainly among persons without established coronary heart disease risk factors.

The prevalence of smoking has significantly decreased from 2001 to 2012. Although the prevalence of high blood pressure and abnormal cholesterol has not changed in the last 12 years, control rates among individuals with hypertension and hypercholesterolemia have significantly improved. While obesity and diabetes rates have risen during this time period, overall control of glucose levels in the general population has improved significantly.

“The decreasing prevalence of CHD (including angina and MI) might result from a combination of prevention efforts and improvements in the management of risk factors,” explained lead investigator Sung Sug (Sarah) Yoon, PhD, RN, who was affiliated with the National Center for Health Statistics, CDC when the study was conducted. “Reasons for a reduction in the prevalence of CHD, angina, and MI in the lower CHD–risk groups could relate to general trends in lifestyle changes, such as improved diet, increased level of physical activity, or other factors such as prophylactic aspirin use among U.S. adults. Furthermore, anti-smoking prevention efforts have resulted in a decreased prevalence of cigarette smoking, which may have contributed to the decrease in CHD prevalence.”

Using the most recently available data from the National Health and Nutrition Examination Survey (NHANES), researchers estimated recent U.S. trends in the prevalence of CHD overall, and MI and angina specifically, and discussed these trends in relation to demographic characteristics and selected CHD risk factors. The analysis was based on data for six two-year NHANES survey cycles beginning in 2001 and concluding with 2012, and included results from 21,472 adults 40 years of age or older.
While the overall prevalence of CHD for all adults 40 years of age or older decreased from 10.3% to 8.0%, there was no significant change in CHD prevalence among adults aged 40–59 years. This was balanced by a significant decreasing trend among individuals 60 or older from 19.5% in 2001–2002 to 14.9% in 2011–2012. Women experienced a significant decreasing trend in CHD prevalence from 8.5% in 2001–2002 to 6.2% in 2011–2012.

CHD significantly decreased among non-Hispanic white and non-Hispanic black adults but showed no change for Mexican American adults. Significant declines in CHD prevalence were also seen among adults who did not complete high school, adults with more than a high school education, and adults who had health insurance.

The overall prevalence of coronary heart disease including angina and myocardial infarction decreased significantly over the 12-year survey period. However, this reduction was seen mainly among persons without established coronary heart disease risk factors. There was no change in coronary heart disease prevalence among those with specific coronary heart disease risk factors.

NOTES FOR EDITORS


Full text of this article is available to credentialed journalists upon request; contact Angela J. Beck at +1 734-764-8775 or ajpmmedia@elsevier.com. Journalists wishing to interview the authors should contact Sung Sug (Sarah) Yoon, PhD, RN, Healthcare Delivery and Methodologies IRG, Division of AIDS, Behavioral, and Population Sciences, Center for Scientific Review, NIH, at sarah.yoon@nih.gov.

ABOUT THE AMERICAN JOURNAL OF PREVENTIVE MEDICINE

The American Journal of Preventive Medicine (www.ajpmonline.org) is the official journal of The American College of Preventive Medicine (www.acpm.org) and the Association for Prevention Teaching and Research (http://www.aptrweb.org/). It publishes articles in the areas of prevention research, teaching, practice and policy. Original research is published on interventions aimed at the prevention of chronic and acute disease and the promotion of individual and community health. The journal features papers that address the primary and secondary prevention of important clinical, behavioral and public health issues such as injury and violence, infectious disease, women's health, smoking, sedentary behaviors and physical activity, nutrition, diabetes, obesity, and alcohol and drug abuse. Papers also address educational initiatives aimed at improving the ability of health professionals to provide effective clinical prevention and public health services. The journal also publishes official policy statements from the two co-sponsoring organizations, health services research pertinent to prevention and public health, review articles, media reviews, and editorials.

The American Journal of Preventive Medicine, with an Impact Factor of 4.465, is ranked 14th in Public, Environmental, and Occupational Health titles and 16th in General & Internal Medicine titles for total number of citations according to the 2015 Journal Citation Reports® published by Thomson Reuters, 2016.

ABOUT ELSEVIER

Elsevier (www.elsevier.com) is a world-leading provider of information solutions that enhance the performance of science, health, and technology professionals, empowering them to make better decisions, deliver better care, and sometimes make groundbreaking discoveries that advance the
boundaries of knowledge and human progress. Elsevier provides web-based, digital solutions — among them ScienceDirect (www.sciencedirect.com), Scopus (www.scopus.com), Elsevier Research Intelligence (www.elsevier.com/research-intelligence), and ClinicalKey (www.clinicalkey.com) — and publishes over 2,500 journals, including The Lancet (www.thelancet.com) and Cell (www.cell.com), and more than 35,000 book titles, including a number of iconic reference works. Elsevier is part of RELX Group (www.relx.com), a world-leading provider of information and analytics for professional and business customers across industries. www.elsevier.com