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Heart Disease & Stroke Statistics 2023 Update

The **2023 Statistical Update** is a major source for monitoring cardiovascular health, risk factors, and disease in the US and global population. It is published annually in *Circulation* and can be accessed for free at AHAjournals.org/StatUpdate

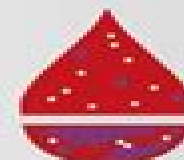


9.7 million
adults have undiagnosed diabetes

29.3 million
adults have diagnosed diabetes

115.9 million
adults have prediabetes
(based on 2017-2020 data)

25.5%
of US adults have high
LDL-C (≥ 130 mg/dL)
(according to 2017-2020 data)



 **224.4**
per 100,000
The age-adjusted US death rate attributable
to CVD (based on 2020 data)



On average, someone in the US
dies of CVD every
34 seconds
2944 US deaths from CVD
each day (based on 2020 data)



On average, someone in the US
dies of a stroke every
3 minutes and 17 seconds
439 US deaths from stroke
each day (based on 2020 data)

 **239.8**
per 100,000
The age-adjusted global death rate attributable
to CVD (based on 2020 data)

State Cardiovascular Disease Report

JE Gale



State Cardiovascular Disease Report:

Cardiovascular Diseases in the United States Iwao Milton Moriyama, Dean E. Krueger, Jeremiah Stamler, 1971
Cardiovascular diseases kill and disable more than a million Americans each year. The major types of this complex of diseases are coronary heart disease, hypertensive disease, cerebrovascular diseases, rheumatic heart disease, and congenital malformations of the circulatory system. Authors Moriyama, Krueger, and Stamler relate each of these types to etiology, age of patient at onset, clinical course, and socioeconomic impact on the population. For each type of cardiovascular disease, they analyze the quantitative data on the incidence, prevalence, and levels, and time trends of mortality, and on the demographic characteristics of persons affected. They also examine international differences in levels and trends in mortality and point out areas for further research. More than thirty-five figures, as well as extensive tables, document their text. **Public health reports**, 2001

Cardiovascular Disease Remains State/nation's Leading Cause of Death Georgia. Department of Human Resources. Office of Communications, American Heart Association. Southeast Affiliate, 2002
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Fat in the Fifties Nicolas Rasmussen, 2019-03-26 A riveting history of the rise and fall of the obesity epidemic during 1950s and 1960s
America Metropolitan Life Insurance Company identified obesity as the leading cause of premature death in the United

States in the 1930s but it wasn't until 1951 that the public health and medical communities finally recognized it as America's Number One Health Problem. The reason for MetLife's interest: They wanted their policyholders to live longer and continue paying their premiums. Early postwar America responded to the obesity emergency, but by the end of the 1960s the crisis waned and official rates of true obesity were reduced despite the fact that Americans were growing no thinner. What mid-century factors and forces established obesity as a politically meaningful and culturally resonant problem in the first place? And why did obesity fade from public and medical consciousness only a decade later? Based on archival records of health leaders as well as medical and popular literature, *Fat in the Fifties* is the first book to reconstruct the prewar origins, emergence, and surprising disappearance of obesity as a major public health problem. Author Nicolas Rasmussen explores the postwar shifts that drew attention to obesity as well as the varied approaches to its treatment, from thyroid hormones to psychoanalysis and weight loss groups. Rasmussen argues that the US government was driven by the new Cold War and the fear of atomic annihilation to heightened anxieties about national fitness. Informed by the latest psychiatric thinking, which diagnosed obesity as the result of oral fixation just like alcoholism, health professionals promoted a form of weight loss group therapy modeled on Alcoholics Anonymous. The intervention caught on like wildfire in 1950s suburbia. But the sense of crisis passed quickly, partly due to cultural changes associated with the later 1960s and partly due to scientific research, some of it sponsored by the sugar industry, emphasizing particular dietary fats rather than calorie intake. Through this riveting history of the rise and fall of the obesity epidemic, readers gain an understanding of how the American public health system, ambitious, strong, and second to none at the end of the Second World War, was constrained a decade later to focus mainly on nagging individuals to change their lifestyle choices. *Fat in the Fifties* is required reading for public health practitioners and researchers, physicians, historians of medicine, and anyone concerned about weight and weight loss. *Index-catalogue of the Library of the Surgeon General's Office, United States Army (Armed Forces Medical Library)*. Armed Forces Medical Library (U.S.), National Library of Medicine (U.S.), Library of the Surgeon-General's Office (U.S.), 1955. Collection of incunabula and early medical prints in the library of the Surgeon General's Office, U.S. Army. Ser 3 v 10 p 1415-1436.

The book delves into State Cardiovascular Disease Report. State Cardiovascular Disease Report is a vital topic that needs to be grasped by everyone, ranging from students and scholars to the general public. This book will furnish comprehensive and in-depth insights into State Cardiovascular Disease Report, encompassing both the fundamentals and more intricate discussions.

1. The book is structured into several chapters, namely:
 - Chapter 1: Introduction to State Cardiovascular Disease Report
 - Chapter 2: Essential Elements of State Cardiovascular Disease Report
 - Chapter 3: State Cardiovascular Disease Report in Everyday Life
 - Chapter 4: State Cardiovascular Disease Report in Specific Contexts
 - Chapter 5: Conclusion
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3. In chapter 2, the author will delve into the foundational concepts of State Cardiovascular Disease Report. The second chapter will elucidate the essential principles that must be understood to grasp State Cardiovascular Disease Report in its entirety.
4. In chapter 3, this book will examine the practical applications of State Cardiovascular Disease Report in daily life. The third chapter will showcase real-world examples of how State Cardiovascular Disease Report can be effectively utilized in everyday scenarios.
5. In chapter 4, the author will scrutinize the relevance of State Cardiovascular Disease Report in specific contexts. The fourth chapter will explore how State Cardiovascular Disease Report is applied in specialized fields, such as education, business, and technology.
6. In chapter 5, the author will draw a conclusion about State Cardiovascular Disease Report. The final chapter will summarize the key points that have been discussed throughout the book.

This book is crafted in an easy-to-understand language and is complemented by engaging illustrations. This book is highly recommended for anyone seeking to gain a comprehensive understanding of State Cardiovascular Disease Report.

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