Historical Timeline of the American Heart Association

1915 – A new organization to fight heart disease
Physicians and social workers convene in New York City to search for answers about the mysteries of heart disease, forming the Association for the Prevention and Relief of Heart Disease. The organization was the predecessor of the American Heart Association.

1924 – The American Heart Association is born
Six physicians form the American Heart Association as a scientific society. On March 14, the Certificate of Incorporation in New York state is drawn up. June 10 marks the official founding of the AHA when, at a meeting in Chicago, the Association elects its board of directors and officers.

1925 – Scientific Sessions debuts
The AHA holds its first Scientific Sessions meeting, in Atlantic City, New Jersey, on May 26. It has been held every year except when it was suspended due to World War II. The gathering became the largest annual cardiovascular meeting in the U.S. and a leading international destination for the cardiovascular health community.

1925 – First journal publishes
The first AHA journal, American Heart Journal, debuts. Dr. Lewis A. Conner, who had served as president of the AHA in 1924-25, was its first editor. American Heart Journal was the official publication of the American Heart Association until 1950, when Circulation, the Association’s flagship journal, was created. Although American Heart Journal is no longer an AHA journal, it is still in publication.

1926 – Criteria for detecting heart disease established
The AHA approves a Nomenclature for Cardiac Diagnosis, which is published in the American Heart Journal. Within two years, the first edition of “Criteria for the Classification and Diagnosis of Heart Disease” is published.

1935 – Scientists and brain health care professionals volunteer their expertise
The first scientific council, the Council on Circulation, is formed as the Section for the Study of the Peripheral Circulation. Today, the AHA has 16 scientific councils, each unique, that support and foster health science through the lens of professionals from an array of specialties and classifications. Council members participate in the discovery and dissemination of science.
1944 – Saving the lives of ‘blue babies’
Collaborating with pediatric cardiologist and future AHA President Helen Taussig, cardiac surgeon Alfred Blalock connects oxygen-rich and oxygen-deprived blood vessels in a child with Tetralogy of Fallot. With this heart defect, some oxygen-poor blood is pumped to the body instead of to the lungs due to a hole within the heart, leaving children with blue-tinted skin due to a chronic lack of oxygen. The so-called Blalock-Taussig bypass is lifesaving.

1947 – Reaching out for public support
The AHA’s first public education heart fund campaign is announced to celebrate National Heart Week the following February.

1948 – Tapping the volunteer spirit
Dramatically broadening its scope in the fight against heart disease, the AHA reorganizes, becoming a national voluntary health agency. Support for the mission became more visible, with fundraising activities taking hold in communities and businesses. A windfall of more than $1.5 million from a nationwide radio contest called “Walking Man” stimulates program and organizational expansion.

1948 – First funding for researchers
The AHA awards its first research grant, to Dr. Albert Szent-Györgyi, a 1937 Nobel Prize winner. He emigrated from communist Hungary to the U.S. the year before, where he set up a laboratory and continued his work on muscle research in Woods Hole, Massachusetts. He also won a grant in 1950. The grants help fund studies about the energy that muscles, such as the heart, need to contract. In all, the AHA has funded 15 Nobel Prize winners, including 10 whose AHA-funded work led to the Nobel Prize.

1949 – Research explores diuretics to help control blood pressure
AHA funding enables Dr. Alfred Farah to examine whether a group of chemical compounds work as diuretics. Diuretics, also called “water pills,” help rid the body of excess sodium and water. They are used to treat heart failure and help control blood pressure.

1949 – Millions for the mission
The first national fundraising campaign raises nearly $2.7 million — a record first-year collection for a campaign of this kind — to support the AHA’s lifesaving mission.

1949 – An old drug has a new use
Dr. William Schwartz receives AHA funding and discovers that sulfanilamide, a drug used to treat bacterial infections, acts as a diuretic in people with congestive heart failure. Diuretics, which help move extra fluid and salt out of the body, remain one of the best medicines for high blood pressure and heart failure.

1950 – Flagship journal launches

The AHA’s scientific journal Circulation begins publishing. The journal is “addressed to all those interested in the cardiovascular system in health and disease — the research scientist, the specialist, the practicing physician.”

1955 – The heart of a leader

President Dwight D. Eisenhower’s heart attack raises public consciousness of heart disease. He is treated by AHA co-founder Dr. Paul Dudley White, who received the Presidential Medal of Freedom for this work.

1956 – A dietary fat-cholesterol link

Dr. Ancel Keys, with AHA support, first links dietary fat with cholesterol. This discovery spurs the AHA to assume a leading role in urging Americans to change their eating habits.

1956 – The power of electricity

For the first time in human medicine, an external defibrillator successfully restores a steady rhythm to a quivering heart. (Dr. Paul Zoll leads the study with funding from the AHA.) The next year, electrical engineers Dr. William Kouwenhoven and doctoral student Guy Knickerbocker unveil the first portable external defibrillator.

1956 – Linking smoking to heart disease

The AHA publishes its first scientific statement on smoking and heart disease, concluding more evidence is needed to definitively link tobacco smoking to increased deaths from heart disease.

1957 – First pacemaker implanted

The first battery-operated, wearable pacemaker is implanted in a patient. The research leading to this discovery, pioneered by Dr. William Weirich and funded by the AHA, led to the development of the fully implanted pacemakers used today.

1957 – Blood pressure-lowering drug discovered

Dr. Edward Freis, funded by the AHA, determines chlorothiazide is effective in reducing blood pressure.
1958 – Helping blood flow
Radioactive potassium and rubidium are used to measure regional blood flow in research led by Dr. Lewis Sapirstein and supported by the AHA. The findings help advance knowledge of blood flow throughout the entire circulatory system.

1958 – Oxygen demand linked to chest pain from poor blood flow
Through his research, funded by the AHA, Dr. Louis N. Katz determines that the heart’s demand for oxygen is specifically tied to blood flow to the heart muscle. The finding helps explain chest pain caused by inadequate blood flow through the arteries.

1958 – Famous American painter supports the AHA through his art
Norman Rockwell dedicates his painting of The Family Doctor to the 1958 Heart Fund. The painting was used in the Heart Fund’s official poster that was on display across the country during Heart Month.

1960 – Implantable pacemakers make way
Dr. William Chardack, who received funding from the AHA, reports the first successful surgeries for completely implantable pacemakers. The production of implantable pacemakers quickly gets underway.

1960 – The beginning of artificial heart valve replacements
The first successful artificial heart valve replacement is performed by Dr. Albert Starr, who received support from the AHA to develop the mechanical heart valve with hydraulic engineer Lowell Edwards. The Starr-Edwards valve is still used today, along with other artificial heart valves, improving countless lives.

1960 – Specialized heart cells discovered
Dr. Brian Hoffman, whose work is supported by the AHA, publishes a new account of specialized heart tissues that control cardiac excitability.

1960 – The first official CPR training
The AHA starts a program to acquaint physicians with closed-chest cardiac resuscitation, which becomes the forerunner of CPR training for the public.

1961 – Saving lives with CPR
Aided by AHA funding, Dr. William Kouwenhoven, Guy Knickerbocker and Dr. James Jude show how combining mouth-to-mouth breathing with chest compressions creates cardiopulmonary resuscitation, the lifesaving actions of CPR. We now know that immediate bystander CPR can double or triple the odds of surviving cardiac arrest.

1961 – Spotlighting a healthier diet
The AHA issues its first dietary guideline that recommends replacing saturated fats — found in red meat, cheese, butter and other animal products — with unsaturated fats.
Saturated fats are shown to contribute to LDL cholesterol, which increases the risk for heart disease.

1961 – Tackling tobacco use
The AHA is one of four health organizations who write to President John F. Kennedy calling for a national commission on smoking. Later, the organization is invited to help nominate members of the commission that in 1964 issued the landmark report to the surgeon general on smoking and health.

1961 – Surgery in microscopic detail
Dr. Julius Jacobson performs surgery with the aid of a microscope. With AHA funding, he becomes a pioneer in microsurgery, which leads to advances in coronary artery surgery, neurosurgery, plastic surgery, limb reimplantation, gynecology, orthopedic surgery and tumor surgery.

1963 – Power of the presidency
President Lyndon B. Johnson proclaims February American Heart Month, starting in 1964. He declares that “over one-half of the 10 million Americans afflicted by the cardiovascular diseases are stricken during their most productive years, thereby causing a staggering physical and economic loss to the nation.”

1963 – CPR becomes more than word of mouth
Dr. Leonard Scherlis establishes the AHA’s CPR Committee. That same year, the AHA formally endorses CPR.

1964 – AHA’s first female career investigator
Biochemist Mildred Cohn is the first woman funded as a career investigator by the AHA. She receives the Association’s support for the remaining 14 years of her research career. Her work contributed to the development of the MRI, one of the most sophisticated imaging methods used today.

1964 – Gathering to focus on stroke
The First National Stroke Congress, co-sponsored by the AHA, is held in Chicago “to spearhead an expanded attack on the problem.”
1964 – The federal government warns Americans on the hazards of smoking
The U.S. Surgeon General releases the first report on smoking and health, which transforms the way Americans view tobacco. Several decades prior, the AHA, among other public health organizations and medical professionals, raised concerns that tobacco was the cause of serious health issues.

1965 – Pediatric pioneer takes AHA reins
Dr. Helen Taussig becomes the first woman president of the American Heart Association. Taussig is considered the founder of pediatric cardiology, and with surgeon Dr. Alfred Blalock and laboratory technician Vivien Thomas, pioneered the "blue baby" operation that helped establish the field of pediatric cardiac surgery.

1966 – New techniques correct newborn defects
A project funded by the AHA leads to a technique developed by Dr. Willian Rashkind to correct septal defects in newborns, showing that major heart procedures can be performed with a catheter.

1966 – A 20-year study shows risks of high blood pressure
Dr. Maurice Sokolow, who received AHA funding, announces the results of a 20-year study showing that hypertension can decrease life expectancy. The research also finds persistently elevated blood pressure increases the risk of complications, including heart enlargement and eye abnormalities.

1967 – Attacking a global menace
The AHA helps plan and participate in the World Conference on Smoking and Health, held in New York City. Dr. Luther Terry, who as surgeon general was a driving force in the 1964 report describing the many dangers of smoking, was a featured speaker. “We know that the rising number of deaths from heart disease among men and women, in the prime of life, is related to cigarette smoking,” Terry said. “Let this conference be the starting point for a concerted worldwide attack on this menace.”

1968 – A new drug lowers cholesterol
Dr. William Conner, with AHA support, shows that cholestyramine, which is still used today, can lower cholesterol in the blood.

1969 – Taking a closer look at health inequities
The AHA forms a Task Force on Programming in poverty areas where the impact of some diseases is disproportionately severe, including high blood pressure within the Black population. The task force is set up to determine what new programs are needed and to set priorities for the Association.
1969 – Cigarette ads are banned across the air waves
The AHA issues a statement on cigarette labeling and advertising legislation. That same year, legislation bans cigarette advertising on television and the radio.

1970 – The public gets educated on heart attack warning signs
The AHA runs its first public education campaign on early warning signs of heart attack, spreading lifesaving messages to help people pay attention and act.

1971 – A Nobel for cyclic AMP
Dr. Earl Sutherland is awarded the Nobel Prize in physiology or medicine for earlier work identifying a molecule called cyclic AMP (or adenosine monophosphate). This small molecule is found inside cells and plays a central role in myriad cellular functions, contributing to disorders as diverse as heart failure and cancer. Sutherland was awarded AHA career investigator funding in 1967.

1971 – The connection between kidneys and blood pressure
Funded by the AHA, Dr. Arthur Guyton provides evidence of the overriding dominance of the kidneys in long-term regulation of blood pressure and in hypertension. He was funded by the National Research Program.

1973 – What’s cooking at the AHA
“The American Heart Association Cookbook,” the first of many AHA cookbooks, is published, giving consumers across the nation a trusted resource to follow a heart-healthy diet. It has been in print for over 50 years, with more than 3 million copies sold.

1973 – Focusing on underrepresented groups
AHA President Dr. Paul N. Yu forms the Working Group on Minority Involvement. Three years later, the working group joins the AHA’s Poverty Planning and Development Fund Committee to expand programs that meet special needs.

1975 – A move to the middle
The AHA moves its national headquarters from New York City to Dallas, establishing a more central location with modern facilities.

1976 – International Stroke Conference launches
The first International Stroke Conference is held in Dallas. Over the years, it develops into the most well-attended cerebrovascular meeting for scientists and health care professionals.
1977 – No smoke and mirrors here

The AHA releases a scientific statement that definitely links the effects of smoking to heart disease. It strongly advises health care professionals to assess the smoking status of all patients as well as counsel and intervene with cessation options for those who are smokers.

1978 – Jump right in

The AHA begins its first in-school education and fundraising program in Milwaukee, focused on using jump-roping to teach kids about exercise, heart health and raising funds that help the AHA save and improve lives. The Jump Rope for Heart program spread nationwide and eventually led to the formation of Kids Heart Challenge, in which some 21,000 schools across America participate.

1981 – Higher-profile advocacy

After years of engaging with U.S. presidents and federal agencies, the AHA establishes a permanent advocacy office in Washington, D.C. Full-time staff focuses on enacting tobacco-control policies and increasing federal research funding at the National Institutes of Health. Subsequently, AHA advocacy priorities expand to include affordable health care; better air quality; increasing opportunities for physical activity and access to healthy foods; and strengthening the public health infrastructure and systems of care.

1984 – Packaging the perils of smoking

The Coalition on Smoking OR Health is instrumental in the passage of laws requiring stronger, rotating warning labels on cigarette packages and advertisements. (The AHA and two other major voluntary health organizations take a leadership role in establishing this national coalition to implement priority recommendations on public policy on smoking.) The first such labels appear in 1985.

1985 – Celebrating fundamental cholesterol findings

Drs. Joseph L. Goldstein and Michael S. Brown, both of whom received AHA support early in their careers, win the Nobel Prize for physiology or medicine for their research on the role of low-density lipoprotein receptors in controlling blood cholesterol levels. (They won the 1984 AHA Research Achievement Award for the same cholesterol-related discovery.)
1986 – Funding for the future
As a result of a partnership between the Henrietta B. and Frederick H. Bugher Foundation and the AHA, the AHA-Bugher Foundation Centers for Molecular Biology in the Cardiovascular System were established. The Association administered six centers from 1986-96, using a $9.4 million contribution from the Bugher Foundation. About 120 clinically trained fellows learned molecular biology techniques through the efforts of these six centers. This success leads to later Bugher grant programs for the investigation, prevention and treatment of stroke. By 2023, gifts from the foundation to the AHA had exceeded $50 million.

1986 – Leaning in on limiting fat
A revised AHA diet statement emphasizing a diet limiting saturated fat and total fat generates public health interest in improving dietary habits and influencing food industry changes.

1987 – Statins get their start
Lovastatin, a cholesterol-lowering drug, is released into the market after the Food and Drug Administration approved its use in 1984. Scientists with research roots in the AHA made significant contributions to lovastatin testing.

1988 – Smoke-free flights take off
The AHA helps drive efforts to ban smoking on commercial airline flights, starting with a temporary ban on short domestic flights and eventually covering all flights to, from or within the U.S.

1990 – First drug approved for infants with heart, lung defects
Developed by AHA career investigator Dr. John Clements, Exosurf Neonatal, the first synthetic lung surfactant to treat respiratory distress syndrome (RDS) is approved by the FDA. The syndrome is a life-threatening condition for premature infants with heart and lung defects.

1990 – First AHA cookbook on reducing sodium
The AHA publishes “Low-Salt Cookbook,” which has been in continuous print for more than 30 years, with more than a million copies sold.

1990 – Facts about your food
The AHA provides feedback on the Nutrition Labeling and Education Act. In 1993, the federal government, with AHA input, implements a standardized Nutrition Facts label.
Since then, consumers have been able to easily find nutritional information on most packaged foods.

**1991 – Board’s first female chairperson**

Anne Golden, a longtime public school leader in Walla Walla, Washington, becomes the first woman to chair the AHA board of directors. Golden spearheads the organization’s Women and Heart Disease initiative nationwide, is instrumental in AHA efforts focused on children’s heart health and is a Basic Life Support instructor/trainer.

**1991 – Step-by-step fundraising**

Heart Walk fundraising events are piloted in St. Louis; San Jose, California; Los Angeles; Alexandria, Virginia; New Haven, Connecticut; and Dallas. Their success leads to Heart Walks being established nationwide the following year. Annual walks are now held in 250 U.S. communities, bringing together more than 1 million people on a mission to end heart disease and stroke.

**1992 – A historic presidential appointment**

Dr. Edward S. Cooper becomes the first Black president of the AHA. During his term Cooper is a vigorous advocate for stroke issues.

**1992 – Vital messages on smoke, inactivity**

The AHA publishes two important scientific statements: its first on the harmful effects of environmental tobacco smoke and a second recognizing physical inactivity as a major risk factor for coronary heart disease.

**1992 – An international CPR collaboration**

The American Heart Association helps found the International Liaison Committee on Resuscitation (ILCOR), providing a forum for scientific evaluation and collaboration among principal resuscitation organizations worldwide.

**1992 – Prize-winning protein research**

Drs. Edwin Krebs and Edmond Fischer win the Nobel Prize in physiology or medicine for their discovery of how proteins are switched on to perform functions within cells. Dr. Krebs, whose research had funding support from the AHA, received the Association’s Research Achievement Award in 1987.
1994 – School meals get healthier
The Healthy Meals for Healthy Americans Act is passed, requiring schools to serve meals that meet dietary guidelines for Americans, including limits on total fats and saturated fats. The AHA promotes its Hearty School Lunch Program, a set of resources to prepare heart-healthy school meals, to help school food services follow federal government dietary guidelines.

1995 – Clearing the smoke for kids
The Campaign for Tobacco-Free Kids, supported by the AHA, is founded in September. This campaign advanced the cause for the next generation and became the hub for the movement. A month prior, President William J. Clinton holds a press conference on protecting children from tobacco where he stated that, by executive order, he would restrict the advertising, promotion, distribution and marketing of cigarettes to teenagers. He also notes this decision was based on the best available scientific evidence available, including the findings of the AHA, among other major health organizations.

1995 – Is this food healthy? Check.
The AHA’s Food Certification program launches the Heart-Check mark, the red heart with the white check mark that helps shoppers easily identify heart-healthy foods.

1996 – Health on and off the field
The AHA issues the nation’s first guidelines for identifying athletes at risk of sudden cardiac death.

1998 – Elevating the fight against stroke
The AHA’s Stroke Division is formed. The next year it’s renamed the American Stroke Association, a Division of the American Heart Association. “The new name demonstrates that the AHA’s passion in the fight against death and disability from stroke is as strong as its fight against death and disability from heart disease,” then-AHA President Dr. Valentin Fuster writes in the AHA journal Stroke.

1998 – A broader picture of risk
In a call to action to the medical and research community and the public, the AHA classifies obesity as a major, modifiable risk factor for coronary heart disease. The next year, in a statement for health care professionals, the AHA labels diabetes mellitus as a major risk factor for cardiovascular disease, declaring that it may be appropriate to say “diabetes is a cardiovascular disease.”
1998 – A goal of national impact

The AHA establishes a 10-year impact goal for the nation: to reduce coronary heart disease, stroke and risk factors by 25% by 2008. (The target date is later changed to 2010 to better dovetail with measurement data from the national Healthy People 2010 initiative.) The initiative reports that from 1999 through 2007, coronary heart deaths declined by 35% and stroke deaths by 32%.

1998 – Nitric oxide findings yield Nobel Prize

Drs. Robert F. Furchgott, Louis J. Ignarro and Ferid Murad are awarded the Nobel Prize in physiology or medicine for their insights on nitric oxide, a gas that dilates blood vessels by relaxing their smooth muscles. Furchgott received AHA funding in 1952-54, and Ignarro was the 1998 recipient of the AHA’s Basic Research Prize.

1998 – A new law is passed that focuses on women and their health

The AHA’s work is a catalyst for the Women’s Health Research and Prevention Amendments of 1998 to be signed into law. Its purpose is to advance women’s health by strengthening national efforts to improve research and screening for diseases, including cardiovascular diseases, with particular impact on women.

2000 – Setting CPR standards

The AHA journal Circulation publishes the International Guidelines 2000 for CPR and Emergency Cardiovascular Care, a scientific consensus of the AHA and resuscitation councils from around the world, setting a new global standard for proper treatment of cardiac arrest emergencies.

2000 – Ensuring evidence-based care

The Get With The Guidelines® quality improvement initiative launches and soon becomes a critical strategy for reducing health disparities. Today, Get With The Guidelines and other AHA quality improvement programs help health care professionals follow the latest evidence-based treatment guidelines, standards and procedures for patient treatment in coronary artery disease, heart failure, stroke, resuscitation and atrial fibrillation. The programs also are a foundation for health care certifications for hospitals, individuals and post-acute/outpatient care. As of 2023, Get With The Guidelines programs encompass more than 2,800 hospitals and 14 million patients.

2000 – Promoting essential survival gear

With AHA support, the Cardiac Arrest Survival Act is signed into law. The legislation directs the federal government to issue guidelines for placing automated external defibrillators in federal buildings. It also extends the “Good Samaritan” protections to those using and purchasing AEDs.
2000 – Traveling safely to school
The federal government pilots two Safe Routes to School projects as part of the transportation reauthorization. SRTS is a program that promotes walking and bicycling to school through infrastructure improvements. Subsequent transportation reauthorizations in 2005, 2012 and 2015 expand the program and increase funding. The AHA supports and promotes SRTS to help build active communities.

2001 – New research on mechanical pumps, heart failure
AHA-funded researcher Christine Moravec reports that mechanical pumps called left ventricular assist devices can reverse diminished heart muscle performance in people with heart failure who are awaiting transplantation. The study is among the first to look at recovery mechanisms that control the heart’s ability to contract during stress.

2003 – Making stents more effective
The Food and Drug Administration approves the first drug-coated stent to keep blocked arteries open. The stents, developed by Dr. Andrew Marks, a researcher funded by the AHA in the 1990s, release medication that prevents new blockages by inhibiting the growth of vascular smooth muscle cells at the stent site.

2003 – Recognizing a fluid discovery
Dr. Peter Agre is co-awarded the Nobel Prize in chemistry for his discovery of aquaporins, proteins that govern the movement of water in and out of cells. His work leads to new research examining brain swelling after a stroke and water retention in heart failure. Agre was funded as an AHA established investigator in 1987-92.

2003 – The AHA goes international
AHA opens its first office in Puerto Rico, serving Latin America, the Caribbean, Spain and Portugal. Offices in Belgium, Hong Kong and Dubai follow.

2003 – A collaborative relationship fosters safer and more healthful employees
The AHA’s Emergency Cardiovascular Care (ECC) enters an alliance with the federal Occupational Safety and Health Administration that includes providing OSHA with materials to promote awareness about risk prevention and reduction of heart disease and stroke, including jointly developing workplace programs.

2003 – A new first in saving lives through training
Heartsaver First Aid course is introduced in February. More than 250,000 people are trained within the first five months.
2004 – The leading threat to women
The Go Red for Women® campaign launches, raising awareness that heart disease is women’s No. 1 killer and urging action to prevent it. National Wear Red Day®, the first Friday in February, unites people in an annual effort to raise awareness about heart disease in women.

2004 – The AHA and ADA cook up something new
The American Heart Association and the American Diabetes Association publish “Diabetes & Heart Healthy Cookbook,” their first collaborative cookbook.

2005 – Teaming up to fight childhood obesity
The AHA and the Clinton Foundation establish the Alliance for a Healthier Generation to fight the childhood obesity epidemic by engaging with industry leaders, educators, parents, health care professionals and kids.

2005 – The AHA contributes to health care relief in wake of natural disaster
The American Cancer Society, the American Diabetes Association and the American Heart Association jointly contribute $1 million to the Bush-Clinton Katrina Fund to help get hospitals, health care systems and the patient support services in the devastated areas up and running again.

2005 – The AHA weighs in with its first weight-loss book
The AHA publishes “No-Fad Diet,” which includes a step-by-step personal plan for healthy weight loss and nearly 200 recipes.

2006 – Addressing disparities in stroke risk
The American Stroke Association launches Power to End Stroke®, raising awareness that Black people face double the risk of stroke, compared with their white peers, and that they can take action to prevent it. The ASA’s current outreach initiative, Together to End Stroke® — which aims to educate consumers that stroke is largely preventable, treatable and beatable — begins in 2013.
2006 – Swapping sugary drinks in schools for healthier choices
The Alliance for a Healthier Generation — a partnership between the American Heart Association and the Clinton Foundation — announces an agreement with the beverage industry to remove less nutritious drinks from school vending machines and replace them with healthier options.

2007 – Streamlining systems of care
Mission: Lifeline® launches, improving patient outcomes after heart attacks by coordinating and accelerating emergency response systems and facilities providing treatment.

2007 – Discoveries in gene targeting recognized
Dr. Mario Capecchi shares the Nobel Prize in physiology or medicine for his discoveries in gene targeting. Gene targeting is used in research for heart disease, high blood pressure, cancer and other conditions. Dr. Capecchi received AHA established investigator funding in 1969–73.

2007 – A helping hand for healthy schools
The Alliance for a Healthier Generation, a joint initiative of the AHA and the Clinton Foundation, receives a $20 million grant from the Robert Wood Johnson Foundation. The grant expands the alliance’s new Healthy Schools Program promoting healthier foods and beverages in schools and more physical activity among students and educators. The program expansion reaches thousands of schools in states with the highest obesity rates.

2007 – Getting people moving
The AHA and the American College of Sports Medicine publish updated recommendations on physical activity for all healthy adults in the AHA journal Circulation. The following year, the federal government issues the first comprehensive guidelines on physical activity.

2007 – Funding and fats
Funding from the AHA enables Dr. Stephen Young to identify a new molecule that may help regulate the delivery of fats to cells for energy and storage. The finding could lead to a better understanding of how we use fats from the foods we eat.

2007 – Building healthier lives
The AHA approves a new mission statement: Building healthier lives, free of cardiovascular diseases and stroke.
2008 – Simpler CPR for bystanders
The AHA releases new recommendations that bystanders who are untrained, unwilling or unable can use Hands-Only CPR to help an adult or teen who collapses suddenly, delaying rescue breaths until help arrives. The change reflects findings from multiple studies from Dr. Gordon Ewy and colleagues showing that uninterrupted, high-quality chest compressions without rescue breaths can be lifesaving in the first minutes of a sudden cardiac arrest.

2008 – A glowing genetic tag
Dr. Martin Chalfie shares the Nobel Prize in chemistry for developing green fluorescent protein as a genetic tag to see inside living cells, including heart cells, to better understand how the cells are made and how they work. The AHA funded Chalfie earlier in his career with a British-American Research Fellowship in 1977.

2008 – New journals make their debut
AHA launches six spinoffs of the journal Circulation to provide scientifically specialized information. The journals are:
- Circulation: Cardiovascular Genetics
- Circulation: Arrhythmia and Electrophysiology
- Circulation: Heart Failure
- Circulation: Cardiovascular Intervention
- Circulation: Cardiovascular Quality and Outcomes
- Circulation: Cardiovascular Imaging

2008 – Cooking for two gets easier
"Diabetes & Heart Healthy Meals for Two," a new AHA cookbook, publishes in cooperation with the American Diabetes Association.

2009 – New reins on tobacco
The AHA helps lead the way in the passage of the Family Smoking Prevention and Tobacco Control Act. The law grants the Food and Drug Administration the authority to regulate cigarettes and other tobacco products; bans candy- and fruit-flavored cigarettes; prohibits tobacco companies from making false or misleading claims that a tobacco product is less harmful than others; and requires large, graphic warning labels on cigarette packages.
2009 – AHA’s first woman CEO
Nancy Brown succeeds M. Cass Wheeler as CEO of the American Heart Association. She is the first woman to be the AHA’s chief executive officer. Wheeler led the AHA from 1997 through 2008, and his predecessor, Dudley H. Hafner, was CEO from 1980 to 1997.

2010 – Expanding care, protecting patients
The Patient Protection and Affordable Care Act is signed into law and includes many patient-centered provisions advocated for by the AHA. The law bans denying coverage or charging higher premiums to patients with preexisting medical conditions; expands coverage to millions of uninsured Americans; requires Medicare and most private health plans to cover preventive services with no cost-sharing; creates the Prevention and Public Health Fund; and includes the Congenital Heart Futures Act, among many provisions.

2010 – A simple plan for heart health
AHA science experts and volunteers create the first-ever definition of ideal cardiovascular health and launch Life’s Simple 7™, an easy way for people to assess and improve their cardiovascular health.

2010 – Nourishing bodies and minds
With the AHA’s strong support, the Healthy, Hunger-Free Kids Act is signed into law, empowering the U.S. Department of Agriculture to update the nutrition standards for school meals and establish standards for all other foods sold in schools throughout the school day.

2010 – An ambitious goal
The AHA announces a major goal to improve the cardiovascular health of all Americans by 20% while reducing deaths from cardiovascular disease and stroke 20% by 2020. Early in the decade, death rates significantly declined, but progress stalled as rates of health conditions such as obesity worsened. The outcomes revealed widening health disparities within the U.S. population, which are now a significant focus of the AHA.

2011 – Schooling teens in CPR
The AHA issues a science advisory recommending CPR training as mandatory for high school graduation. With AHA lobbying, 40 states and the District of Columbia have passed such measures.
2011 – Immune system findings hailed
Dr. Ralph Steinman shares the 2011 Nobel Prize in physiology or medicine for his discovery of how the immune system responds to infection. Steinman, whose work has provided critical insights in heart transplantation, received AHA funding as an established investigator in the 1980s.

2011 – Shaking the salt habit
An AHA presidential advisory issues a call to action for nearly all Americans to reduce their sodium intake as a critical health factor in preventing heart disease, stroke and kidney disease.

2012 – Receptor research recognized
Dr. Robert Lefkowitz is co-recipient of the Nobel Prize in chemistry for studies of G-protein-coupled receptors. Such studies have been instrumental in developing more effective drugs to treat cardiovascular disease and other illnesses. Dr. Lefkowitz received AHA research funding in the 1970s and won the 2009 AHA Research Achievement Award.

2012 – Speedier delivery of science information
The Journal of the American Heart Association (JAHA) is introduced. As an open access journal, JAHA’s content is rapidly and freely available, accelerating the translation of strong science into effective practice.

2013 – Tackling an epidemic in kids
Voices for Healthy Kids, a collaboration between the Robert Wood Johnson Foundation and the AHA, forms to help reverse the nation’s childhood obesity epidemic.

2013 – Pressing for precision medicine
With $30 million in funding over five years, the AHA establishes the Cardiovascular Genome-Phenome Study to accelerate groundbreaking research into personalized medicine. The project is an innovative collaborative among the AHA, Boston University and University of Mississippi Medical Center. Boston University is the academic coordinating center home of the Framingham Heart Study, and the University of Mississippi Medical Center is the coordinating center home of the Jackson Heart Study. The Jackson Heart Study also involves Jackson State University and Tougaloo College as partner institutions. The initiative becomes the AHA Institute for Precision Cardiovascular Medicine.
2013 – Spotlight on health equity in communities
The AHA introduces its EmPOWERED to Serve™ platform, designed to nurture and amplify community-based solutions to societal challenges that diminish residents’ health and quality of life.

2013 – Studying tobacco products, informing regulation
The AHA receives a $19.6 million, five-year grant from the National Institutes of Health and the Food and Drug Administration to support research into tobacco products. This leads to the formation of the AHA Tobacco Regulation and Addiction Center (A-TRAC), made up of the AHA and eight leading academic institutions to aid the development and evaluation of tobacco product regulation by the FDA.

2014 – More research into children’s hearts
The Children’s Heart Foundation partners with the American Heart Association to establish the AHA/CHF Congenital Heart Defect Research Awards. A total of $22.5 million would be awarded to support investigators who are actively conducting basic, clinical, population or translational research directly related to congenital heart defects.

2016 – A bold new research initiative
The AHA launches One Brave Idea™, an unprecedented research initiative awarding a total of $75 million to one team focused on a game-changing approach to combat heart disease. It’s funded by the AHA, Verily and AstraZeneca, with additional support in 2018 from Quest Diagnostics. In 2016, Dr. Calum MacRae is selected — from a pool of 349 applicants in 22 countries — to lead One Brave Idea. He was chosen for his vision to identify coronary heart disease at the earliest stages.

2016 – Kids are too sweet
The AHA releases its first-ever scientific statement recommending sugar limits for kids. It states that children and teens should consume less than 6 teaspoons of added sugars a day and drink no more than 8 ounces of sugary beverages a week. It also recommends that children under 2 years of age avoid added sugars.

2017 – Empowering innovators
The AHA launches the EmPOWERED to Serve Urban Health Accelerator™ to identify and support innovative health solutions that address social determinants of health in urban communities. The following year, it becomes the EmPOWERED to Serve Business Accelerator™ targeting entrepreneurs, businesses and nonprofits who are making an health impact in their communities.
2018 – Maintaining optimal CPR skills
The AHA and Laerdal Medical establish RQI Partners, a subsidiary partnership transforming the way health professionals maintain their CPR training to ensure their resuscitation skills remain optimal. At the end of RQI Partners’ fifth year, more than 3 million health professionals used its solutions annually across the U.S. and internationally.

2018 – Local challenges, local solutions
The AHA’s Social Impact Fund is established to support local entrepreneurs, small businesses and organizations in under-resourced communities scale up their sustainable solutions addressing social determinants of health.

2018 – Stroke care near and far
Congress approves AHA-supported provisions requiring Medicare to pay for telehealth consultations for stroke regardless of where a patient lives, opening new avenues to vital care that become indispensable less than two years later as the COVID-19 pandemic dawns.

2018 – A world of longer, healthier lives
The AHA debuts a new logo and mission statement: To be a relentless force for a world of longer, healthier lives.

2018 – Cardiac rehab becomes more widely available
The Improving Access to Cardiac and Pulmonary Rehabilitation Act is signed. This law removes an outdated requirement and gives more patients an opportunity to participate in cardiac rehabilitation programs. These changes mean better health for individuals, families, and communities struggling with cardiovascular disease. The same year, the AHA publishes a comprehensive report on the performance and quality measures that can assess and improve the quality of care for patients eligible for cardiac rehabilitation.

2019 – Expanding patient access to cardiac rehab services
New legislation is introduced in Congress — a result of joint efforts between the AHA and others — that will take an important step towards addressing heart disease in the U.S. The Increasing Access to Quality Cardiac Rehabilitation Care Act of 2019 expands patient access to important cardiovascular rehabilitation services, which have been shown to reduce cardiovascular disease-related death and hospital readmissions. This legislation builds upon the success of the Improving Access to Cardiac and Pulmonary Rehabilitation Act of 2018.
2019 – Nutrition in Native communities

The Shakopee Mdewakanton Sioux Community and the AHA launch a new health initiative with the American Indian Cancer Foundation. The Fertile Ground Advocacy Campaign, which promotes planning of health and nutrition policy work benefiting Native American communities, builds on a collaboration announced in 2015 to create a framework to improve nutrition in Native communities.

2019 – Discoveries made on how cells sense oxygen

Supported by the AHA since 1993 and the recipient of five AHA research grants, Dr. Gregg L. Semenza was co-awarded the 2019 Nobel Prize in physiology or medicine for discovery on how cells sense and acclimate to the availability of oxygen. His collaborative work paved the way for promising new strategies to fight cardiovascular disease and other serious conditions.

2019 – Countering the rise of e-cigarettes

The AHA unveils a multimillion-dollar initiative to discourage children and young adults from vaping. This includes nearly $17 million in grants to accelerate research on nicotine addiction among youth, plus research on cessation and a campaign called “Quit Lying” to call out false information promoted by the e-cigarette industry.

2020 – Expanding local investments

The AHA launches the Bernard J. Tyson Impact Fund in honor of the late AHA board of directors and CEO Roundtable member. Tyson, a leader committed to health equity, was CEO and chairperson of Kaiser Permanente. The Tyson fund focuses on investments supporting evidence-based, locally led solutions to break down social and economic barriers to health equity.

2020 – Structural racism’s impact on health

An AHA presidential advisory issues a call to action on structural racism as a fundamental driver of health disparities.

2020 – Pivoting for the pandemic

The AHA quickly responds to the COVID-19 pandemic with measures including:

- Establishing a $2.5 million rapid-research fund to fast-track scientific research to better understand COVID-19 and its interaction with cardiovascular and cerebrovascular diseases.
- Leveraging its Get With The Guidelines® data infrastructure for hospital quality improvement to launch a COVID-19 CVD Registry.
- Accelerating vaccines and therapies research with Lawrence Livermore National Laboratory to fight COVID-19, among other collaborations between the two organizations.
- Developing digital health solutions for people at home during lockdown.

2020 – Calling out health disparities
An AHA presidential advisory addresses inequities in rural health, calling for action to change unacceptably poor outcomes, and structural racism as a fundamental driver of health disparities.

2020 – Commitments toward health equity
The AHA establishes “10 Commitments” to address barriers to health including adverse social determinants of health, unique rural health issues and structural racism. The commitments are to be achieved by 2024, the AHA’s 100th anniversary, and address key AHA impact areas. These include research, community work, health care access and quality, unhealthy targeting by industry of disadvantaged communities, diversification of the AHA workforce and more.

2020 – Protection from unexpected bills
Advocacy from the AHA helps push Congress to pass the No Surprises Act, a bipartisan bill that protects patients from unexpected charges for out-of-network medical services by shielding them from payment disputes between providers and insurers.

2022 – E-cigarettes and youth
An AHA scientific statement is released, urging action be taken to reduce or prevent e-cigarette use among adolescents to lower lifetime risk of cardiovascular disease.

2022 – Systems change in rural health
Helping to cement the AHA’s commitment to better cardiovascular care in rural populations, the national service agency AmeriCorps provides a grant of $8.6 million for a new AHA rural health initiative, HeartCorps. In addition:

- The AHA announces it will grant up to 700 rural hospitals access to Get With The Guidelines® resources to promote consistent, timely, evidence-based care for coronary artery disease, heart failure and stroke.
- The Association begins seeking proposals for $20 million in research projects for its Health Equity Research Network on Improving Access to Care and Other Health Inequities in Rural America.
2022 – A prescription for vitality
The AHA and The Rockefeller Foundation announce Food Is Medicine, a multiyear research initiative to accelerate a future in which millions of patients benefit from a more holistic approach to diet and health; health care practitioners know how such programs can help prevent and manage chronic disease; and health care payors have adequate evidence to support reimbursing these programs.

2022 – Billions invested in science
The AHA reaches a milestone of more than $5 billion invested in scientific research since 1949, building upon our work as the largest nongovernmental funder of cardiovascular and cerebrovascular research in the U.S.

2022 – An essential eighth
Life’s Simple 7™ is expanded to become Life’s Essential 8™, adding sleep health as a critical factor in cardiovascular wellness.

2022 – First AHA report released on corporate citizenship
The AHA board of directors approves the Association’s environmental, social and governance criteria and key metrics. Later this same year, the organization publishes its first ESG report, highlighting key ways the organization is impacting the environment, the communities where it works, and the ethics and sustainability of how the AHA does business.

2023 – Our nation of lifesavers
Buffalo Bills safety Damar Hamlin suffers a cardiac arrest on the field during Monday Night Football. His inspiring story of survival raises awareness about the importance of knowing CPR and having AEDs in public places, and leads to an AHA movement to create a Nation of Lifesavers through expanded training across the U.S.

2023 – New type of heart disease is identified
An AHA presidential advisory defines a new medical condition called cardiovascular-kidney-metabolic syndrome (CKM) that identifies the link among obesity, diabetes, heart disease and kidney disease.
2024 – Health and hope

Celebrating 100 years of saving and improving lives, the AHA launches new strategies to build on that success for the next century with this vision statement as its guide: *Advancing health and hope for everyone, everywhere.*