



American
Heart
Association.

2022 Heart Disease & Stroke Statistical Update Fact Sheet Asian/Pacific Islander Race*

Cardiovascular Disease (CVD) (ICD-9 390 to 459; ICD-10 I00 to I99)

- Among non-Hispanic (NH) Asian adults 20 years of age and older between 2015 and 2018, 52.0% of males and 42.5% of females had CVD.
- In 2019, among NH Asian adults, CVD caused the deaths* of 12,939 males and 11,862 females.

Coronary Heart Disease (CHD) (ICD-9 410 to 414, 429.2; ICD-10 I20 to I25, includes MI ICD-10 I21 to I22)

- Among NH Asian adults 20 years of age and older using data from 2015 to 2018, 5.0% of males and 3.2% of females had CHD.
- Among NH Asian adults 20 years of age and older using data from 2015 to 2018, 2.7% of males and 0.7% of females previously had a myocardial infarction (heart attack).
- In 2019, among NH Asian adults, CHD caused the deaths* of 6,095 males and 4,119 females.
- In 2019, myocardial infarction caused the deaths* of 1,734 NH Asian males and 1,184 NH Asian females.

Stroke (ICD-9 430 to 438; ICD-10 I60 to I69)

- Among NH Asian adults between 2015 and 2018, 20 years of age and older, 1.4% of males and 1.0% of females previously had a stroke.
- In 2019, among NH Asian individuals, stroke caused the deaths* of 2,653 males and 3,282 females.

High Blood Pressure (HBP) (ICD-9 401 to 404; ICD-10 I10 to I15)

- Among NH Asian adults 20 years of age and older between 2015 and 2018, 51.0% of males and 42.1% of females had HBP (defined as systolic pressure of 140 mm Hg or higher or diastolic pressure of 90 mm Hg or higher or taking antihypertensive medicine or being told twice by a physician or other professional that you have hypertension).
- In 2019, HBP caused the deaths* of 1,490 NH Asian males and 1,688 NH Asian females.
- In 2018, Asian adults were less likely (21.9%) to have been told on ≥ 2 occasions that they had HBP than Black adults (32.2%), American Indian/Alaska Native adults (27.2%), White adults (23.9%), or Hispanic or Latino adults (23.7%).

* Due to inconsistencies in reporting, some statistics may be unreliable.
Unless otherwise noted, all statistics in this Fact Sheet pertain to the United States.

**For additional information, charts and tables, see
*Heart Disease & Stroke Statistics – 2022 Update***

Additional charts may be downloaded directly from the online publication or www.heart.org/statistics.

Many statistics in this At-a-Glance document come from unpublished tabulations compiled for this document and can be cited using the document citation listed below. The data sources used for the tabulations are listed in the full document. Additionally, some statistics come from published studies. If you are citing any of the statistics in this At-a-Glance document, please review the full Heart Disease and Stroke Statistics document to determine data sources and original citations.

The American Heart Association requests that this document be cited as follows:

Tsao CW, Aday AW, Almarzooq ZI, Alonso A, Beaton AZ, Bittencourt MS, Boehme AK, Buxton AE, Carson AP, Commodore-Mensah Y, Elkind MSV, Evenson KR, Eze-Nliam C, Ferguson JF, Generoso G, Ho JE, Kalani R, Khan SS, Kissela BM, Knutson KL, Levine DA, Lewis TT, Liu J, Loop MS, Ma J, Mussolino ME, Navaneethan SD, Perak AM, Poudel R, Rezk-Hanna M, Roth GA, Schroeder EB, Shah SH, Thacker EL, VanWagner LB, Virani SS, Voecks JH, Wang N-Y, Yaffe K, Martin SS; on behalf of the American Heart Association Council on Epidemiology and Prevention Statistics Committee and Stroke Statistics Subcommittee. Heart disease and stroke statistics—2022 update: a report from the American Heart Association [published online ahead of print Wednesday, January 26, 2022]. *Circulation*. doi: 10.1161/CIR.0000000000001052

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If you have questions about statistics or any points made in the Statistical Update, please contact the American Heart Association National Center, Office of Science & Medicine at statistics@heart.org. Please direct all media inquiries to News Media Relations at <http://newsroom.heart.org/newsmedia/contacts>.

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