Asian & Pacific Islanders and Cardiovascular Diseases

Cardiovascular Disease (CVD) (ICD 10 codes I00-I99, Q20-Q28) (ICD 9 codes 390-459, 745-747) & Coronary Heart Disease (CHD) (ICD 10 codes I20-I25) (ICD 9 codes 410-414, 429.2)

- Among Asians, 6.1% have heart disease, 3.7% have CHD, 21.0% have hypertension, and 1.9% have had a stroke.
- In 2011, 17,050 deaths among Asians and Pacific Islanders were due to CVD; 7,828 due to CHD; and 2,476 due to myocardial infarction.

Stroke (ICD/10 codes I60-I69) (ICD 9 codes 430-438)

- Among Asians and Pacific Islanders adults, 1.9% have had a stroke.
- In 2011, 3,937 Asians and Pacific Islanders died from stroke.
- In 2002, death certificate data showed that the mean age at stroke death was 79.6 years; however, blacks, American Indian/Alaska Natives, and Asian/Pacific Islanders had younger mean ages than whites.

High Blood Pressure (ICD 10 codes I10-I15) (ICD 9 codes 401-404)

- 21.0% of Asians have high blood pressure, which led to 1,667 deaths among Asians in 2011.

Smoking

- In 2013, 14.7% of Asian men were current smokers; 4.8% of women.

Physical Inactivity

- In 2013, only 18.2% of Asian adults met the 2008 Federal Physical Activity Guidelines.

Overweight and Obesity

- Data from 2011 show that among low-income preschool children, American Indians/Alaskan Natives have an obesity rate of 17.7%, whereas rates are 14.7% for Hispanics, 10.6% for non-Hispanic blacks, 10.3% for non-Hispanic whites, and 9.3% for Asian/Pacific Islanders.
- In 2011-2012, among children age 2 to 5 years, 1.9% of Asian boys and 4.7% of Asian girls were obese. Among children age 6 to 11 years, 13.2% of Asian boys and 3.7% of Asian girls were obese. Among youths age 12 to 19 years, obesity was prevalent in 14.8% of Asian boys and 7.3 of Asian girls.
Asian/Pacific Islanders & CVD - 2015 Statistical Fact Sheet

- Among adults 18 years and older in 2013, blacks (27.6%), American Indians or Alaska Natives (23.2%), and whites (35.8%) were less likely than Asians (57.4%) to be at a healthy weight. Blacks (36.3%) and American Indians or Alaska Natives (46.5%) were more likely to be obese than were whites (27.9%) and Asians (10.8%).

**Diabetes Mellitus (DM) (ICD/10 codes E10-E14) (ICD/9 code 250)**
- In 2011, 2,035 Asian or Pacific Islanders died from DM.
- Children who develop type 2 DM are typically overweight or obese and have a family history of the disease. Most are American Indian, black, Asian, or Hispanic/Latino.
- 2010 to 2012 national survey data for people >20 years of age indicate that 7.6% of non-Hispanic whites, 9.0% of Asian Americans, 12.8% of Hispanics, 13.2% of non-Hispanic blacks, and 15.9% of American Indians/Alaska Natives had diagnosed DM.
- In 2010 to 2012, compared with non-Hispanic white adults, the risk of diagnosed DM was 18% higher among Asian Americans, 66% higher among Hispanics/Latinos, and 77% higher among non-Hispanic blacks.
- The prevalence of DM was more than twice as high for Asian Indian adults (14%) compared with Chinese (6%) or Japanese adults (5%).
- According to NHIS data from 1997 to 2008, the prevalence of DM was higher among Asian Americans (4.3% to 8.2%) than whites (3.8% to 6.0%), despite lower BMI levels (23.6 vs. 26.1) among Asians.

For additional information, charts and tables, see Heart Disease & Stroke Statistics - 2015 Update.

Additional charts may be downloaded directly from the online publication at: http://circ.ahajournals.org/content/131/4/e29.full.pdf+html Or at: www.heart.org/statistics

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

If you have questions about statistics or any points made in the 2015 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 inquiries@heart.org or 214-706-1173.