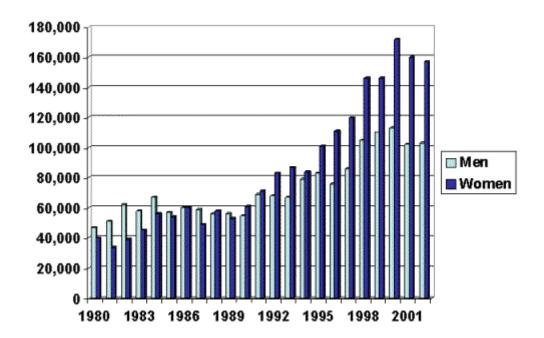
Annual number of hospitalizations among persons with pulmonary hypertension, United States, 1980–2000



Source: CDC, National Hospital Discharge Survey.

Facts on Pulmonary Hypertension

- Pulmonary hypertension is a rare lung disorder in which the blood pressure in the pulmonary artery rises far above normal levels, usually with no apparent reason.
- Symptoms include chronic fatigue, shortness of breath (dyspnea), chest pain (angina), palpitations, fainting, swollen ankles and legs (edema), and fluid in the abdomen (ascites). These are also symptoms for other diseases such as congestive heart failure; therefore, physicians should rule out other diseases before making a diagnosis of pulmonary hypertension.
- Pulmonary hypertension may develop after pregnancy, valvular heart diseases, chronic thromboembolic disease, lung diseases, liver diseases, sleep-disordered breathing and hypoxemia, lupus, scleroderma, rheumatoid arthritis, vasculitis, or human immunodeficiency virus (HIV) infection.
- In 2002, there were 15,668 deaths and 260,000 hospital visits among persons with pulmonary hypertension.
- Among 807,000 patients hospitalized with pulmonary hypertension as one of the diagnoses between 2000 and 2002, 61% were women and 34% were younger than age 65.

- It is unclear whether pulmonary hypertension is truly rare or whether pulmonary hypertension is undetected and under–reported. At present there are no statistical data to determine how many people currently have pulmonary hypertension in the United States or how many new cases are diagnosed each year.
- Increases in hospitalizations for persons with pulmonary hypertension and increases in death rates for women, African–Americans, and the elderly with pulmonary hypertension during the past two decades may reflect an increase in physician awareness of the disease rather than a growing epidemic of pulmonary hypertension.
- During the past decade, advances have occurred in knowledge about the evaluation and diagnosis of several different types of pulmonary hypertension and in the treatment of pulmonary arterial hypertension.

CDC's Public Health Efforts

CDC currently funds health departments in 32 states and the District of Columbia to develop effective strategies to reduce the burden of cardiovascular diseases and related risk factors with an overarching emphasis on heart healthy policies and physical and social environmental changes. Through these state programs, CDC aims to reduce disparities in treatment, risk factors, and disease; delay the onset of disease; postpone death from cardiovascular disease; and reduce disabling conditions. For more information on CDC's State Heart Disease and Stroke Prevention Program, please visit our Web site at http://www.cdc.gov/cvh/state_program/index.htm.

For More Information

More information on pulmonary hypertension can be obtained from the following CDC partners:

- Pulmonary Hypertension Association*
- American Heart Association*
- National Heart, Lung, and Blood Institute*

References

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