## 12 <br> Heart Disease and Stroke

## Heart Disease

12-1 Coronary heart disease (CHD) deaths
12-2 Knowledge of symptoms of heart attack and importance of calling 911
12-3 Artery-opening therapy
12-4 Bystander response to cardiac arrest
12-5 Out-of-hospital emergency care
12-6 Heart failure hospitalizations
12-6a 65 to 74 years
12-6b $\quad 75$ to 84 years
12-6c $\quad 85$ years and older

## Stroke

12-7 Stroke deaths
12-8 Knowledge of early warning symptoms of stroke

## Blood Pressure

12-9 High blood pressure
12-10 High blood pressure control
12-11 Action to help control blood pressure
12-12 Blood pressure monitoring

## Cholesterol

12-13 Mean total blood cholesterol levels
12-14 High blood cholesterol levels
12-15 Blood cholesterol screening
12-16 LDL-cholesterol level in CHD patients

## Heart Disease

## 12-1. Reduce coronary heart disease deaths.

National Data Source National Vital Statistics System (NVSS), CDC, NCHS.

State Data Source

Healthy People 2000 Objective

Measure

Baseline
Numerator

Denominator
Population Targeted
Questions Used To Obtain the National Data

Expected Periodicity
Comments

National Vital Statistics System (NVSS), CDC, NCHS.
15.1 (Heart Disease and Stroke) (also, 1.1, 2.1, 3.1 ), age adjusted to the 2000 standard population.

Rate per 100,000 population (age adjusted-see Comments).

208 (1998).
Number of coronary heart disease-related deaths (ICD-9 codes 402, 410-414, 429.2).

Number of persons.
U.S. resident population.

Not applicable.

Annual.
Data are age adjusted to the 2000 standard population. Age-adjusted rates are weighted sums of age-specific rates. For information on age adjustment, see Part A, section 5.

This objective differs from Healthy People 2000 objective 15.1, which adjusted the death rates using the 1940 standard population. See Appendix C for comparison data.

See Part C for a description of NVSS and Appendix A for focus area contact information.


12-2. (Developmental) Increase the proportion of adults aged 20 years and older who are aware of the early warning symptoms and signs of a heart attack and the importance of accessing rapid emergency care by calling 911.

Comments

An operational definition could not be specified at the time of publication.

A proposed national data source is the National Health Interview Survey (NHIS), CDC, NCHS.

Proposed questions to be used to obtain the national data are scheduled to be included in the 2001 NHIS.

See Appendix A for focus area contact information.


12-3. (Developmental) Increase the proportion of eligible patients with heart attacks who receive artery-opening therapy within an hour of symptom onset.

Comments
An operational definition could not be specified at the time of publication.

A proposed national data source is the National Registry of Myocardial Infarction, National Acute Myocardial Infarction Project, HCFA.

See Appendix A for focus area contact information.


12-4. (Developmental) Increase the proportion of adults aged 20 years and older who call 911 and administer cardiopulmonary resuscitation (CPR) when they witness an out-of-hospital cardiac arrest.

Comments
An operational definition could not be specified at the time of publication.

A proposed national data source is the National Health Interview Survey (NHIS), CDC, NCHS.

Proposed questions to be used to obtain the national data are scheduled to be included in the 2001 NHIS.

See Appendix A for focus area contact information.

12-5. (Developmental) Increase the proportion of eligible persons with witnessed out-of-hospital cardiac arrest who receive their first therapeutic electrical shock within 6 minutes after collapse recognition.

Comments
An operational definition could not be specified at the time of publication.

A proposed national data source is the Medical Expenditure Panel Survey (MEPS), AHRQ (formerly AHCPR).

See Appendix A for focus area contact information.


12-6. Reduce hospitalizations of older adults with congestive heart failure as the principal diagnosis.

12-6a. Adults aged 65 to 74 years.
National Data Source National Hospital Discharge Survey (NHDS), CDC, NCHS.

State Data Source State hospital discharge data systems.
Healthy People 2000 Not applicable.
Objective
Measure
Baseline
Rate per 1,000 population.
13.2 (1997).

| Numerator | Number of discharges among adults aged 65 to 74 <br> years with a principal diagnosis of congestive heart <br> failure (ICD-9-CM code 428.0). |
| :--- | :--- |
| Denominator <br> Population Targeted <br> Questions Used To <br> Obtain the National <br> Data | U.S. civilian population. |
| Not applicable. |  |
| Expected Periodicity | Annual. |


| Comments | See Comments provided with objective 12-6a for <br> more information. |
| :--- | :--- |
|  |  |
| 12-6c. | Adults aged 85 years and older. |
| National Data Source | National Hospital Discharge Survey (NHDS), CDC, |
| NCHS. |  |

## Stroke

12-7. Reduce stroke deaths.
National Data Source National Vital Statistics System (NVSS), CDC, NCHS.

State Data Source
National Vital Statistics System (NVSS), CDC, NCHS.

Healthy People 2000
Objective
Measure

Baseline
Numerator
Denominator
Population Targeted
Questions Used To
Obtain the National
Data
Expected Periodicity
Comments
15.2 (Heart Disease and Stroke) (also 2.22, 3.18), age adjusted to the 2000 standard population.

Rate per 100,000 population (age adjusted-see Comments).

60 (1998).
Number of stroke deaths (ICD-9 codes 430-438).
Number of persons.
U.S. resident population.

Not applicable.

Annual.
Data are age adjusted to the 2000 standard population. Age-adjusted rates are weighted sums of age-specific rates. For information on age adjustment, see Part A, section 5.

This objective differs from Healthy People 2000 objective 15.2, which adjusted the death rates using the 1940 standard population. See Appendix C for comparison data.

See Part C for a description of NVSS and Appendix A for focus area contact information.

12-8. (Developmental) Increase the proportion of adults who are aware of the early warning symptoms and signs of a stroke.

## Comments

An operational definition could not be specified at the time of publication.

A proposed national data source is the National Health Interview Survey (NHIS), CDC, NCHS.

Proposed questions to be used to obtain the national data are scheduled to be included in the 2001 NHIS.

See Appendix A for focus area contact information.

| National Data Source | National Health and Nutrition Examination Survey (NHANES), CDC, NCHS. |
| :---: | :---: |
| State Data Source | Not identified. |
| Healthy People 2000 Objective | Not applicable. |
| Measure | Percent (age adjusted-see Comments). |
| Baseline | 28 (1988-94). |
| Numerator | Number of adults aged 20 years and older with high blood pressure. |
| Denominator | Number of adults aged 20 years and older. |
| Population Targeted | U.S. civilian, noninstitutionalized population. |
| Questions Used To Obtain the National Data | From the 1988-94 National Health and Nutrition Examination Survey: |
|  | > Are you now taking prescribed medicine? |
| Expected Periodicity | Annual, beginning with 1999 data. |
| Comments | Adults are defined as having high blood pressure if they either: (a) have a measurement of systolic blood pressure (SBP) > 140 mmHg or diastolic blood pressure (DBP) $>90 \mathrm{mmHg}$ or (b) report they are taking high blood pressure medicine. |
|  | Measurements were taken using a sphygmomanometer according to the standardized blood pressure measurement protocols recommended by the American Heart Association. ${ }^{1}$ |
|  | A detailed description of the procedures for blood pressure measurement in the NHANES has been published elsewhere. ${ }^{2,3}$ |
|  | Data are age adjusted to the 2000 standard population. Age-adjusted percents are weighted sums of age-specific percents. For information on age adjustment, see Part A, section 5. |

See Part C for a description of NHANES and Appendix A for focus area contact information.


12-10. Increase the proportion of adults with high blood
pressure whose blood pressure is under control.
National Data Source National Health and Nutrition Examination Survey (NHANES), CDC, NCHS.

State Data Source
Healthy People 2000 Objective

Measure
Baseline
Numerator

Denominator

Population Targeted
Questions Used To Obtain the National Data

Not identified.
15.4 (Heart Disease and Stroke) (also 2.26), age adjusted to the 2000 standard population.

Percent (age adjust-see Comments).
18 (1988-94).
Number of adults aged 18 years and older who have been told by a doctor or other health professional to take prescribed blood pressure medicine and are now taking it and whose systolic blood pressure is less than 140 mmHg and diastolic blood pressure is less than 90 mmHg .

Number of adults with high blood pressure aged 18 years and older.
U.S. civilian, noninstitutionalized population.

From the 1988-94 National Health and Nutrition Examination Survey:
> Because of your high blood pressure/hypertension, have you ever been told by a doctor or other health professional to take prescribed medicine?
> Are you now taking prescribed medicine?
Expected Periodicity Annual beginning with 1999 data.
Comments

## 12-11. Increase the proportion of adults with high blood pressure who are taking action (for example, losing weight, increasing physical activity, or reducing sodium intake) to help control their blood pressure.

| National Data Source | National Health Interview Survey (NHIS), CDC, NCHS. |
| :---: | :---: |
| State Data Source | Behavioral Risk Factor Surveillance System (BRFSS), CDC, NCCDPHP. |
| Healthy People 2000 Objective | Adapted from 15.5 (Heart Disease and Stroke). |
| Measure | Percent (age adjusted-see Comments). |
| Baseline | 82 (1998). |
| Numerator | Number of adults aged 18 years and older with high blood pressure who are dieting, reducing salt or sodium intake, exercising, reducing alcohol consumption or taking high blood pressure medications. |
| Denominator | Number of adults with high blood pressure aged 18 years and older. |
| Population Targeted | U.S. civilian, noninstitutionalized population. |
| Questions Used To Obtain the National Data | From the 1998 National Health Interview Survey: |

## [NUMERATOR:]

> Has a doctor or other health professional EVER advised you to go on a diet or change your eating habits to help lower your blood pressure?
[If yes:]

- Are you NOW following this advice?
> Has a doctor or other health professional EVER advised you to cut down on salt or sodium in your diet to help lower your blood pressure?
[lf yes:]
- Are you NOW following this advice?
> Has a doctor or other health professional EVER advised you to reduce alcohol consumption to help lower your blood pressure?
[If yes:]
    - Are you NOW following this advice?
> Has a doctor or other health professional EVER
advised you to exercise to help lower your blood
pressure?
[If yes:]
- Are you NOW following this advice?
> Was any medication EVER prescribed by a doctor to
help lower your blood pressure?
[lf yes:]
- Are you NOW following this advice?
[DENOMINATOR:]
> Were you told on two or more DIFFERENT visits that
you had hypertension, also called high blood
pressure?
[If yes:]
    - Was this only during pregnancy?


## Expected Periodicity

Comments

Periodic.
People with high blood pressure are defined as those who are told on two or more occasions by a physician or other health professional that they had high blood pressure. Pregnancy-related high blood pressure is excluded.

Adults are classified as taking action to control their blood pressure if they are now following advice on any of the actions listed above: diet/change eating habits, cut down on salt intake, reduce alcohol consumption, exercise, or take medication.

Data are age adjusted to the 2000 standard population. Age-adjusted percents are weighted sums of age-specific percents. For information on age adjustment, see Part A, section 5.

This objective is adapted from Healthy People 2000 objective 15.5 , which tracked the proportion of people with high blood pressure who were taking medication, dieting to lose weight, cutting down on salt, and exercising to help control their blood pressure. This measure tracks the proportion of adults with high blood pressure who are reducing alcohol consumption, in addition to the other actions, to help control their blood pressure; the measure is age adjusted to the 2000 standard population.

In Healthy People 2000, a person with high blood pressure was defined as "...EVER been told by a doctor or other health professional that you had hypertension, also called high blood pressure" while in Healthy People 2010, a person is defined as "...told on two or more DIFFERENT visits that you had high blood pressure."

See Part C for a description of NHIS and BRFSS, and Appendix A for focus area contact information.

## 12-12. Increase proportion of adults who have had their blood pressure measured within the preceding 2 years and can state whether their blood pressure was normal or high.

| National Data Source | National Health Interview Survey (NHIS), CDC, <br> NCHS. |
| :--- | :--- |
| State Data Source | Not identified. |
| Healthy People 2000 | 15.13 (Heart Disease and Stroke), age adjusted to <br> the 2000 standard population. |
| Objective | Percent (age adjusted-see Comments). |
| Measure | 90 (1998). |
| Baseline | Number of adults aged 18 years and older who had <br> their blood pressure measured within the preceding |
| Numerator | 2 years and can state level. |
| Number of adults aged 18 years and older. |  |

Population Targeted

## Questions Used To

 Obtain the National DataU.S. civilian, noninstitutionalized population.

From the 1998 National Health Interview Survey:
> About how long has it been since you had your blood pressure checked by a doctor or health professional?
0) Never
(Number)

| $\quad$ Days |
| :--- |
| Weeks$\quad$ Months |
| $\quad$ Years |

> At that time, did the doctor or health professional say your blood pressure was high, low, or normal?

1) Not told
2) High
3) Low
4) Normal
5) Borderline
6) Other - Specify $\qquad$

## Expected Periodicity

Comments

Periodic.
An adult was considered able to state their blood pressure level if they responded high, low, normal, or borderline (categories 2-5) to the second question above.

Data are age adjusted to the 2000 standard population. Age-adjusted percents are weighted sums of age-specific percents. For information on age adjustment, see Part A, section 5 .

See Part C for a description of NHIS and Appendix A for focus area contact information.

## Cholesterol

## 12-13. Reduce the mean total blood cholesterol levels among adults. <br> National Data Source National Health and Nutrition Examination Survey (NHANES), CDC, NCHS. <br> State Data Source Not identified.

Healthy People 2000
Objective
Measure
Baseline
Numerator

Denominator

Population Targeted
Questions Used To Obtain the National Data

Expected Periodicity
Comments
15.6 (Heart Disease and Stroke) (also 2.27), age adjusted to the 2000 standard population).

Mean (age adjusted-see Comments).
206 (1988-94).
Sum of all cholesterol values for adults aged 20 years and older.
Number of cholesterol measurements for adults aged 20 years and older.
U.S. civilian, noninstitutionalized population.

Not applicable.

Annual beginning with 1999 data.
Total cholesterol is a combination of high-density lipoproteins (HDL), low-density lipoproteins (LDL), and very-low density lipoproteins (VLDL).

Total blood cholesterol is measured enzymatically in a series of coupled reactions. A description of the laboratory procedures for the total cholesterol measurement in NHANES is published by NCHS., ${ }^{4,5}$

Data are age adjusted to the 2000 standard population. Age-adjusted percents are weighted sums of age-specific percents. For information on age adjustment, see Part A, section 5.

See Part C for a description of NHANES and Appendix A for focus area contact information.


## 12-14. Reduce the proportion of adults with high total blood cholesterol levels.

National Data Source National Health and Nutrition Examination Survey (NHANES), CDC, NCHS.

## State Data Source

Healthy People 2000 Objective

Not identified.
15.7 (Heart Disease and Stroke) (also 2.25), age adjusted to the 2000 standard population.

| Measure | Percent (age adjusted-see Comments). |
| :--- | :--- |
| Baseline | 21 (1988-94). |
| Numerator | Number of adults aged 20 years and older with total <br> blood cholesterol > $240 \mathrm{mg} / \mathrm{dL}$. |
| Denominator | Number of adults aged 20 years and older. |
| Population Targeted | U.S. civilian, noninstitutionalized population. |
| Questions Used To | Not applicable. |
| Obtain the National |  |
| Data |  |
| Expected Periodicity | Annual, beginning with 1999 data. |
| Comments | Total cholesterol is a combination of HDL, LDL, and <br> VLDL. |
|  | Total blood cholesterol is measured enzymatically in <br> a series of coupled reactions. A description of the <br> procedures for the total cholesterol measurement in |
| NHANES has been published by NCHS. ${ }^{4,5}$ |  |

Healthy People 2000
Objective
Measure
Baseline
Numerator

Denominator
Population Targeted
Questions Used To Obtain the National Data
15.14 (Heart Disease and Stroke), age adjusted to the 2000 standard population.

Percent (age adjusted—see Comments).
67 (1998).
Number of adults aged 18 years and older who have had their cholesterol checked within 5 years.

Number of adults aged 18 years and older.
U.S. civilian, noninstitutionalized population.

From the 1998 National Health Interview Survey:
> When was the last time that you had your blood cholesterol level checked by a doctor or health professional?
0) Never

1) A year ago or less
2) More than 1 year but not more than 2 years
3) More than 2 years but not more than 3 years
4) More than 3 years but not more than 5 years
5) Over 5 years

Periodic.
An adult was considered as having had their blood cholesterol checked within the preceding 5 years if they responded to any of the categories in 1 through 4 of the question above.

Data are age adjusted to the 2000 standard population. Age-adjusted percents are weighted sums of age-specific percents. For information on age adjustment, see Part A, section 5.

See Part C for a description of NHIS and BRFSS and Appendix $A$ for focus area contact information.


12-16. (Developmental) Increase the proportion of persons with coronary heart disease who have their LDL-cholesterol level treated to a goal of less than or equal to $100 \mathrm{mg} / \mathrm{dL}$.

Comments
An operational definition could not be specified at the time of publication.

A proposed data source is the National Health and Nutrition Examination Survey (NHANES), CDC, NCHS.

See Appendix A for focus area contact information.

## References

1. U.S. Department of Health and Human Services (HHS), National Center for Health Statistics (NCHS). Third National Health and Nutrition Examination Survey, 1998-1994, NHANES III Adult Household Questionnaire Data Files (CD-ROM). Public Use Data File Documentation No. 76200. Hyattsville, MD: Centers for Disease Control and Prevention (CDC), 1996.
2. HHS, NCHS. Third National Health and Nutrition Examination Survey, 1998-1994, NHANES III Examination Data Files (CD-ROM). Public Use Data File Documentation No. 76200. Hyattsville, MD: CDC, 1996.
3. Frohlich, E.D.; Grim, C.; Labarthe, D.R.; et al. Recommendations for human blood pressure determination by sphygmomanometer. Hypertension 11:210A-222A, 1988.
4. HHS, NCHS. Third National Health and Nutrition Examination Survey, 1998-1994, NHANES III Laboratory Data Files (CD-ROM). Public Use Data File Documentation No. 76200. Hyattsville, MD: CDC, 1996.
5. Gunter, E.W.; Lewis, B.G.; and Koncikowski, S.M. Laboratory Procedures Used for the Third National Health and Nutrition Examination Survey (NHANES III), 1988-94. HHS, Public Health Service, CDC, 1996.
