



The **BURDEN**
of
CHRONIC DISEASES
and their risk factors

National and State Perspectives



2004
DEPARTMENT OF HEALTH AND HUMAN SERVICES

**For more information or additional copies of this document, please contact the
Centers for Disease Control and Prevention,
National Center for Chronic Disease Prevention and Health Promotion, Mail Stop K-40,
4770 Buford Highway NE, Atlanta, GA 30341-3717; (770) 488-5706.
ccdinfo@cdc.gov • <http://www.cdc.gov/nccdphp>**

The Burden of Chronic Diseases and Their Risk Factors

National and State Perspectives

February 2004



**U. S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR DISEASE CONTROL AND PREVENTION
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National and State Perspectives

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The Burden of Chronic Disease and Their Risk Factors

National and State Perspectives

Preface

Chronic diseases such as heart disease, cancer, and diabetes are leading causes of disability and death in the United States. Every year, chronic diseases claim the lives of more than 1.7 million Americans. These diseases are responsible for 7 of every 10 deaths in the United States. Chronic diseases cause major limitations in daily living for more than 1 of every 10 Americans, or 25 million people. These diseases account for more than 70% of the \$1 trillion spent on health care each year in the United States.

Although chronic diseases are among the most prevalent and costly health problems, they are also among the most preventable. Effective measures exist today to prevent or delay much of the chronic disease burden and curtail its devastating consequences.

Chronic diseases are not prevented by vaccines or generally cured by medication, nor do they just disappear. To a large degree, the major chronic disease killers—heart disease, cancer, stroke, chronic obstructive pulmonary disease, and diabetes—are an extension of what people do, or not do, as they go about the business of daily living. Health-damaging behaviors—in particular tobacco use, lack of physical activity, and poor nutrition—are major contributors to heart disease and cancer, our nation’s leading killers. A single behavior—tobacco use—is responsible for over 80% of deaths each year from chronic obstructive pulmonary disease, the nations’ fourth leading cause of death. Clearly, promoting healthy behavior choices, through education and through community policies and practices, is essential to reducing the burden of chronic diseases.

In addition, we have the tools in hand to detect certain chronic diseases in their early stages, when treatment is most effective. Regular screening can detect cancers of the breast, cervix, colon, and rectum and is also critical for preventing the debilitating complications of diabetes, including blindness, kidney disease, and lower-extremity amputations. Screening and appropriate follow-up for high blood pressure and elevated cholesterol can save the lives of those at risk for cardiovascular disease. Access to high-quality and affordable prevention measures for all Americans is essential if we are to save lives and reduce medical care costs.

As the nation’s prevention agency, the Centers for Disease Control and Prevention (CDC), in collaboration with its many partners (e.g., the states, voluntary and professional organizations, academic institutions, and other federal agencies), works to ensure that advances in basic scientific and behavioral research are put into practice to benefit all Americans. The framework for CDC’s efforts to prevent chronic diseases includes promoting healthy behaviors, expanding the use of early detection practices, reaching young people with important health messages, improving the health of communities, and supporting state-based public health interventions. Underpinning this framework is surveillance—the gathering of data to determine the extent of behavioral risks, to monitor the progress of prevention efforts, and, ultimately, to make timely and effective public health decisions. The framework has been shown to be effective and, in many cases, cost-effective in reducing the chronic disease burden.

The Burden of Chronic Diseases and Their Risk Factors: National and State Perspectives—formerly known as *Chronic Diseases and Their Risk Factors: The Nation’s Leading Causes of Death*—provides updated information on the burden of chronic diseases and their risk factors in the 50 states and the District of Columbia. The document is divided into five sections. The first

section provides a national perspective on chronic diseases as major causes of death in the United States. In the second section, state-specific data on rates of death due to heart disease, cancer, stroke, and diabetes allow for easy state-by-state comparisons. The third section provides information on the prevalence of the major risk factors for chronic diseases (tobacco use, lack of physical activity, poor nutrition, obesity, high blood pressure, and high blood cholesterol) and on the use of or access to preventive services (mammography screening, sigmoidoscopy, fecal occult blood test, and health care coverage.) The fourth section provides profiles of chronic diseases, risk factors, and preventive services in each state. The fifth section provides information on the prevalence and cost of arthritis and other rheumatic conditions. The appendix contains technical notes that include information about the 2001 National Center for Health Statistics data used in this report. Mortality data are classified by the Tenth Revision of the International Classification of Diseases (ICD-10) and are age adjusted to the year 2000 U.S. standard population. The appendix also contains a table that provides information on funding that CDC's National Center for Chronic Disease Prevention and Health Promotion provides to states for programs that target chronic diseases and their risk factors.

This document is intended to aid policy makers, the public health community, and all others interested in addressing the burden of chronic disease in the United States. Another generation of Americans need not suffer unnecessarily or die prematurely when so much is already known about how to prevent disability and death from chronic diseases.

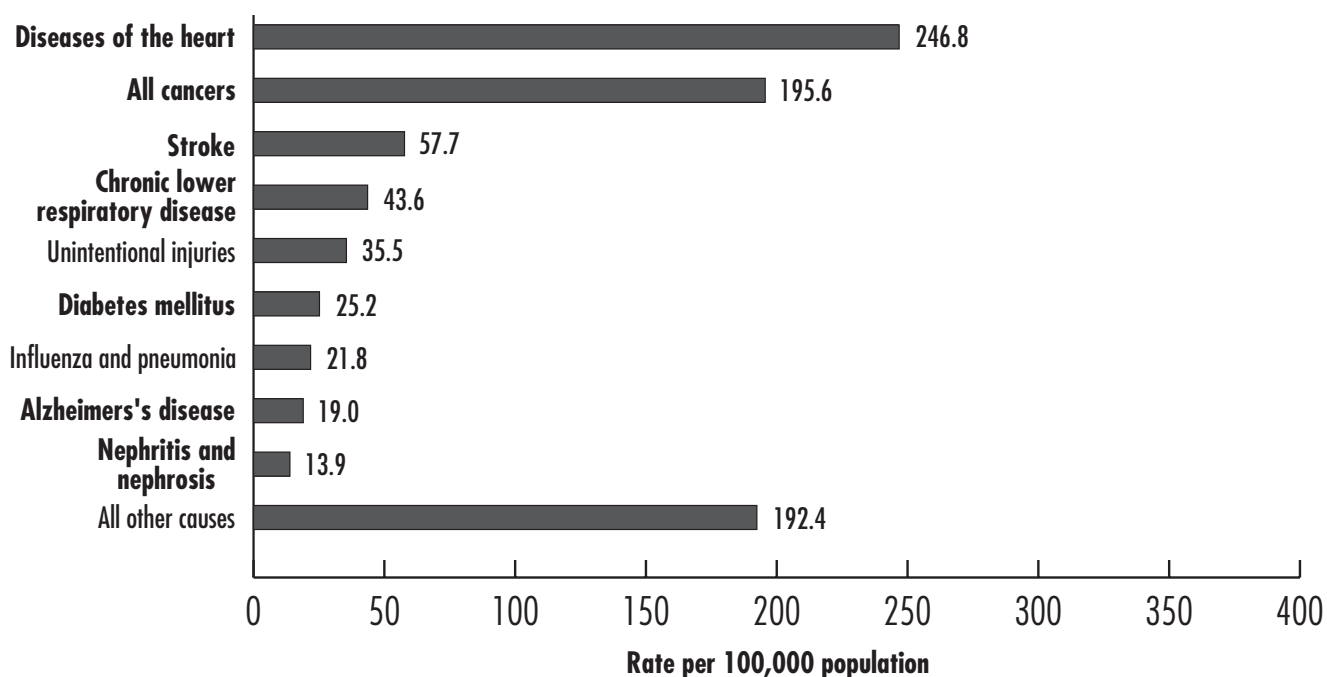
Section I

The Burden of Chronic Diseases as Causes of Death, United States

United States: Burden of Chronic Diseases

- Five chronic diseases—heart disease, cancers, stroke, chronic obstructive pulmonary diseases, and diabetes—account for more than two-thirds of all deaths in the United States.
- Heart disease, cancer and stroke together account for almost 60% of all deaths in the United States.
- Chronic lower respiratory disease, which comprises bronchitis, emphysema, asthma, and chronic airway obstruction, is the fourth most common cause of death, and diabetes is the sixth most common.
- Nephritis and nephrosis, the ninth leading cause of death, cover a variety of kidney diseases.
- Health care for people with chronic diseases accounts for 75% of the nation's total health care costs.

Most Common Causes of Death, United States, 2001*



*Rates are age adjusted to 2000 total U.S. population. Boldface type indicates chronic disease or condition.

Deaths Due to Five Leading Chronic Disease Killers as a Percentage of All Deaths, United States, 2001

Cause of Death	Number of Deaths	Percent
Five Leading Chronic Disease Killers	1,611,833	66.7
Diseases of the heart	700,142	29.0
All cancers	553,768	22.9
Stroke	163,538	6.8
Chronic lower respiratory disease	123,013	5.1
Diabetes	71,372	3.0
Other	804,592	33.3
Total	2,416,425	100.0

Total Deaths and Deaths Due to Five Leading Chronic Disease Killers,* by State, 2001

State	Total Number of Deaths	Number of Deaths Due to Five Chronic Diseases*	Of All Deaths, Percentage Due to Five Chronic Diseases*
Alabama	45,316	29,554	65.2
Alaska	2,974	1,677	56.4
Arizona	41,058	25,768	62.8
Arkansas	27,759	18,735	67.5
California	234,044	159,606	68.2
Colorado	28,294	16,766	59.3
Connecticut	29,827	19,923	66.8
Delaware	7,112	4,726	66.5
District of Columbia	5,951	3,712	62.4
Florida	167,269	113,718	68.0
Georgia	64,485	40,180	62.3
Hawaii	8,394	5,553	66.2
Idaho	9,753	6,262	64.2
Illinois	105,430	70,866	67.2
Indiana	55,198	37,203	67.4
Iowa	27,791	19,133	68.8
Kansas	24,647	16,177	65.6
Kentucky	39,861	27,087	68.0
Louisiana	41,757	27,126	65.0
Maine	12,421	8,337	67.1
Maryland	43,839	28,879	65.9
Massachusetts	56,754	36,661	64.6
Michigan	86,424	59,089	68.4
Minnesota	37,735	23,576	62.5
Mississippi	28,259	18,937	67.0
Missouri	54,982	37,211	67.7
Montana	8,265	5,316	64.3
Nebraska	15,174	9,951	65.6
Nevada	16,285	10,579	65.0
New Hampshire	9,815	6,773	69.0
New Jersey	74,710	50,343	67.4
New Mexico	14,129	8,460	59.9
New York	159,240	112,074	70.4
North Carolina	70,934	45,953	64.8
North Dakota	6,048	4,102	67.8
Ohio	108,027	73,779	68.3
Oklahoma	34,682	23,622	68.1
Oregon	30,158	19,457	64.5
Pennsylvania	129,729	87,642	67.6
Rhode Island	10,021	6,864	68.5
South Carolina	36,612	23,394	63.9
South Dakota	6,923	4,639	67.0
Tennessee	55,151	36,641	66.4
Texas	152,779	100,494	65.8
Utah	12,662	7,113	56.2
Vermont	5,201	3,461	66.5
Virginia	56,280	36,744	65.3
Washington	44,642	29,885	66.9
West Virginia	20,967	14,357	68.5
Wisconsin	46,628	31,170	66.8
Wyoming	4,029	2,558	63.5
United States	2,416,425	1,611,833	66.7

* Diseases of the heart, all cancers, stroke, chronic lower respiratory disease, and diabetes.

Section II

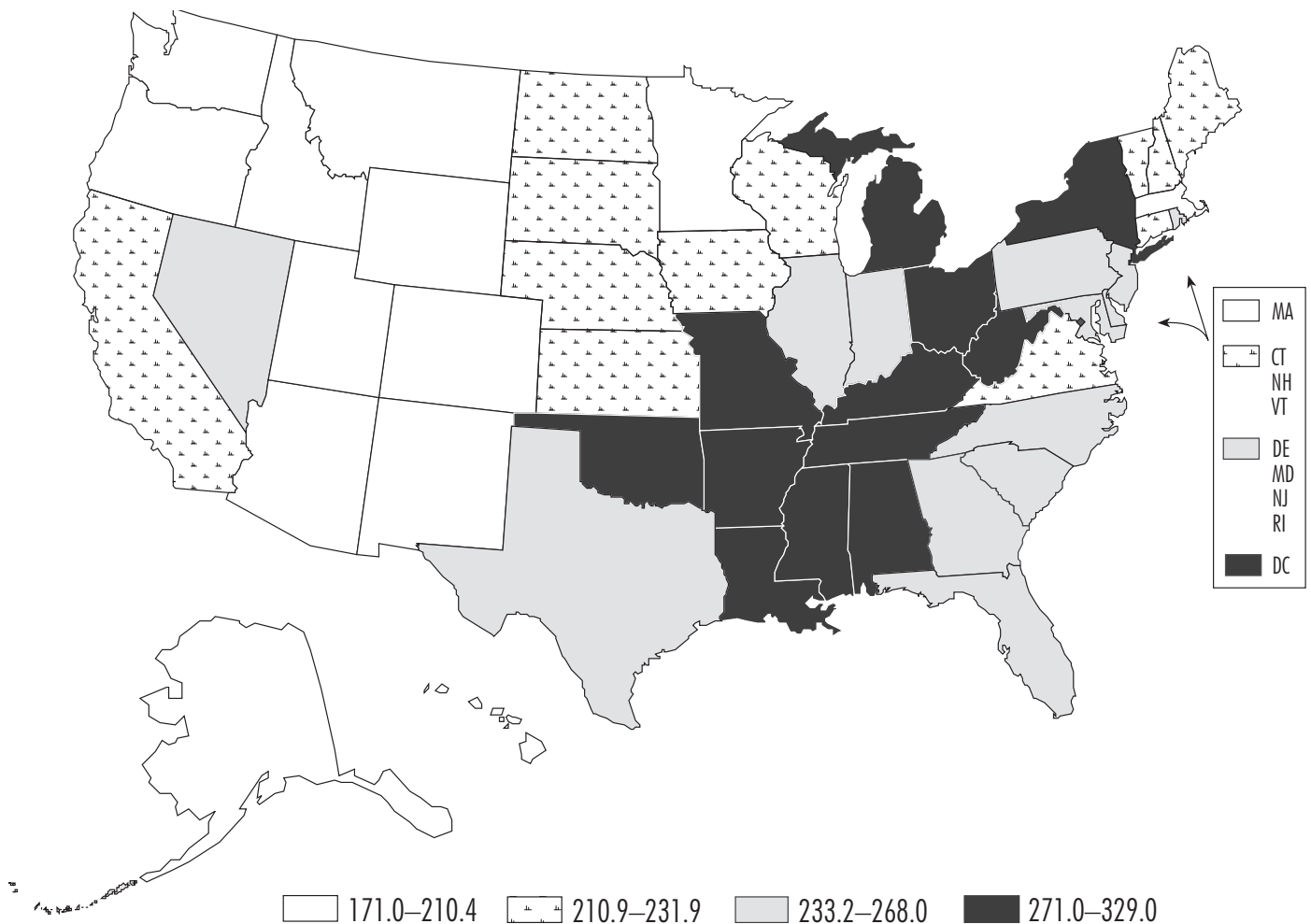
The Burden of Heart Disease, Stroke, Cancer, and Diabetes, United States

Diseases of the Heart

Heart disease is the nation's leading cause of death. Much of the burden of heart disease could be eliminated by reducing the prevalence rates of its major risk factors: high blood pressure, high blood cholesterol, tobacco use, diabetes, physical inactivity, and poor nutrition. Modest reductions in the rates of one or more of these risk factors can have a large public health impact. Heart disease can also be prevented or controlled through governmental policies (such as restricting access to tobacco) and through environmental changes (such as providing better access to healthy foods and opportunities for physical activity).

- Heart disease, which killed more than 700,000 Americans in 2001, accounted for 29% of all deaths in the United States.
- In 2001, the rate of death from heart disease was 31% higher among blacks than whites and 49% higher among men than women.
- In 2001, heart disease cost the nation \$193.8 billion.
- About 66% of heart attack patients do not make a complete recovery.
- About 42% of people who experience a heart attack in a given year will die from it.

Diseases of the Heart: 2001 Death Rate*



*Deaths per 100,000, age adjusted to 2000 total U.S. population. ICD-10 codes: I00–I09, I11, I13, I20–I51.

Deaths Due to Diseases of the Heart, by Sex, 2001

State	Total		Male		Female	
	Number	Rate*	Number	Rate*	Number	Rate*
Alabama	13,207	289.3	6,367	359.4	6,840	237.5
Alaska	603	187.7	368	240.6	235	143.9
Arizona	10,582	204.5	5,645	254.6	4,937	163.2
Arkansas	8,263	279.1	4,025	340.1	4,238	229.0
California	68,226	230.4	33,400	278.5	34,826	192.5
Colorado	6,292	181.0	3,137	220.7	3,155	149.6
Connecticut	8,582	216.4	4,020	269.4	4,562	176.9
Delaware	2,033	257.2	979	309.7	1,054	216.4
District of Columbia	1,754	308.5	800	368.9	954	262.1
Florida	50,621	233.2	25,481	285.3	25,140	190.2
Georgia	17,476	268.0	8,497	332.7	8,979	221.1
Hawaii	2,310	179.5	1,307	227.6	1,003	139.5
Idaho	2,489	205.1	1,327	261.3	1,162	160.8
Illinois	30,990	251.5	14,566	308.3	16,424	208.9
Indiana	15,682	258.0	7,638	324.2	8,044	208.9
Iowa	8,250	224.0	3,930	287.1	4,320	177.5
Kansas	6,716	224.0	3,136	276.0	3,580	184.5
Kentucky	11,808	294.0	5,723	363.8	6,085	241.8
Louisiana	11,474	280.1	5,671	348.2	5,803	228.6
Maine	3,272	218.8	1,542	265.1	1,730	181.2
Maryland	12,309	251.6	5,929	306.1	6,380	210.4
Massachusetts	15,143	210.4	6,979	262.5	8,164	171.7
Michigan	26,896	273.8	12,986	335.8	13,910	226.8
Minnesota	8,760	171.0	4,519	229.9	4,241	129.1
Mississippi	9,049	329.0	4,064	382.6	4,985	286.2
Missouri	16,633	271.9	7,826	334.7	8,807	224.2
Montana	1,970	197.9	1,043	251.4	927	154.1
Nebraska	4,150	210.9	1,934	261.5	2,216	171.5
Nevada	4,392	257.1	2,524	312.6	1,868	204.0
New Hampshire	2,835	230.9	1,394	288.7	1,441	185.4
New Jersey	22,698	250.8	10,476	305.2	12,222	209.8
New Mexico	3,423	203.4	1,811	253.7	1,612	161.4
New York	56,633	282.2	25,423	340.2	31,210	240.1
North Carolina	18,789	244.0	9,327	309.7	9,462	195.9
North Dakota	1,700	210.9	887	282.3	813	154.8
Ohio	32,453	271.0	15,548	336.7	16,905	222.2
Oklahoma	10,840	298.1	5,222	366.0	5,618	245.5
Oregon	7,075	191.6	3,621	242.3	3,454	152.4
Pennsylvania	39,436	257.8	18,516	322.1	20,920	210.7
Rhode Island	3,076	240.5	1,378	297.3	1,698	198.2
South Carolina	9,470	245.5	4,841	312.3	4,629	195.2
South Dakota	1,985	218.1	1,038	291.7	947	159.7
Tennessee	15,688	278.2	7,561	343.3	8,127	229.5
Texas	43,192	255.1	21,499	313.2	21,693	210.1
Utah	2,895	185.2	1,452	220.0	1,443	156.0
Vermont	1,429	221.4	695	282.5	734	178.8
Virginia	14,913	231.9	7,226	284.7	7,687	192.5
Washington	11,281	201.2	5,798	253.9	5,483	160.4
West Virginia	6,325	296.0	3,018	362.7	3,307	245.3
Wisconsin	13,023	222.2	6,455	284.9	6,568	174.5
Wyoming	985	209.5	499	255.1	486	172.4
United States	700,076¹	246.8	339,048	303.6	361,028	203.2

* Deaths per 100,000, age adjusted to 2000 total US population. ¹Total is slightly less than that in table on page 3 because it does not include decedents with unknown age.

Deaths Due to Diseases of the Heart, by Race and Ethnicity, 2001

State	White		Black		Asian/Pacific Islander		American Indian/ Alaska Native		Hispanic	
	Number	Rate*	Number	Rate*	Number	Rate*	Number	Rate*	Number	Rate*
Alabama	10,130	282.8	3,029	327.0	—	—	—	—	27	87.3
Alaska	442	182.0	—	—	—	—	115	239.5	—	—
Arizona	9,125	205.4	245	275.1	56	100.0	235	197.2	921	196.4
Arkansas	7,144	275.5	1,094	345.3	—	—	—	—	—	—
California	51,672	243.1	5,275	339.1	4,103	146.3	218	156.5	6,958	178.4
Colorado	5,526	181.6	205	227.2	48	100.7	25	160.5	488	163.9
Connecticut	7,871	215.6	477	245.3	35	96.9	—	—	190	159.5
Delaware	1,706	252.1	303	305.0	—	—	—	—	—	—
District of Columbia	369	216.9	1,362	366.8	—	—	—	—	—	—
Florida	41,067	229.2	4,680	322.3	161	103.6	28	73.6	4,685	213.9
Georgia	12,786	258.5	4,493	319.4	76	114.1	—	—	107	114.5
Hawaii	550	173.9	—	—	1,650	179.4	—	—	93	284.6
Idaho	2,422	206.4	—	—	—	—	—	—	36	147.7
Illinois	25,606	245.8	4,418	337.4	312	132.5	—	—	639	144.1
Indiana	14,460	256.6	1,124	313.6	—	—	—	—	77	114.4
Iowa	8,067	223.0	115	352.2	—	—	—	—	43	186.8
Kansas	6,318	224.5	275	273.2	—	—	34	254.7	80	144.8
Kentucky	11,006	293.0	737	333.1	—	—	—	—	44	225.7
Louisiana	8,031	268.0	3,283	327.2	35	134.4	—	—	106	149.7
Maine	3,252	219.5	—	—	—	—	—	—	—	—
Maryland	9,213	244.6	2,900	304.9	121	106.6	—	—	61	75.3
Massachusetts	14,365	212.9	494	230.3	94	82.3	—	—	175	128.9
Michigan	22,778	263.2	3,728	371.9	66	99.9	130	408.4	194	173.6
Minnesota	8,479	170.6	133	188.6	46	80.4	56	207.9	46	144.0
Mississippi	6,155	311.9	2,850	383.3	—	—	—	—	—	—
Missouri	15,000	267.8	1,502	334.7	30	99.1	23	124.3	78	176.7
Montana	1,899	197.5	—	—	—	—	53	203.9	—	—
Nebraska	3,987	210.1	109	282.9	—	—	26	370.4	22	92.9
Nevada	3,827	266.5	288	357.9	95	154.7	28	193.0	154	133.4
New Hampshire	2,806	231.6	—	—	—	—	—	—	—	—
New Jersey	19,359	254.0	2,308	294.2	243	107.2	—	—	778	163.1
New Mexico	2,258	208.5	59	261.2	—	—	150	185.9	942	193.7
New York	45,829	285.3	6,872	323.3	916	147.4	52	111.7	2,964	214.9
North Carolina	14,757	236.8	3,782	289.8	37	74.7	164	278.9	49	62.6
North Dakota	1,653	208.6	—	—	—	—	40	318.4	—	—
Ohio	29,037	267.1	3,229	328.1	57	94.5	—	—	118	135.2
Oklahoma	9,745	302.3	624	354.7	25	142.9	357	198.3	89	181.8
Oregon	6,838	194.3	84	254.0	59	97.3	51	193.0	43	63.5
Pennsylvania	36,090	255.5	2,973	302.0	111	106.3	—	—	253	182.0
Rhode Island	2,964	244.5	69	283.1	—	—	—	—	27	101.9
South Carolina	6,829	235.6	2,600	287.3	24	132.1	—	—	—	—
South Dakota	1,886	212.9	—	—	—	—	92	353.2	—	—
Tennessee	13,408	272.2	2,222	343.3	27	97.8	—	—	23	61.7
Texas	31,375	257.1	5,400	349.6	284	114.6	30	61.2	6,103	212.3
Utah	2,767	187.6	23	332.7	27	133.7	—	—	61	115.0
Vermont	1,423	223.0	—	—	—	—	—	—	—	—
Virginia	11,708	226.3	2,969	287.5	125	97.6	—	—	97	108.3
Washington	10,533	204.0	254	270.1	231	114.5	115	231.1	148	137.8
West Virginia	6,132	297.6	187	321.3	—	—	—	—	—	—
Wisconsin	12,499	221.7	395	279.2	33	110.3	54	204.0	42	82.7
Wyoming	933	209.0	—	—	—	—	—	—	28	187.8
United States	584,082	245.6	77,226	321.3	9,326	137.4	2,358	178.9	27,084	188.4

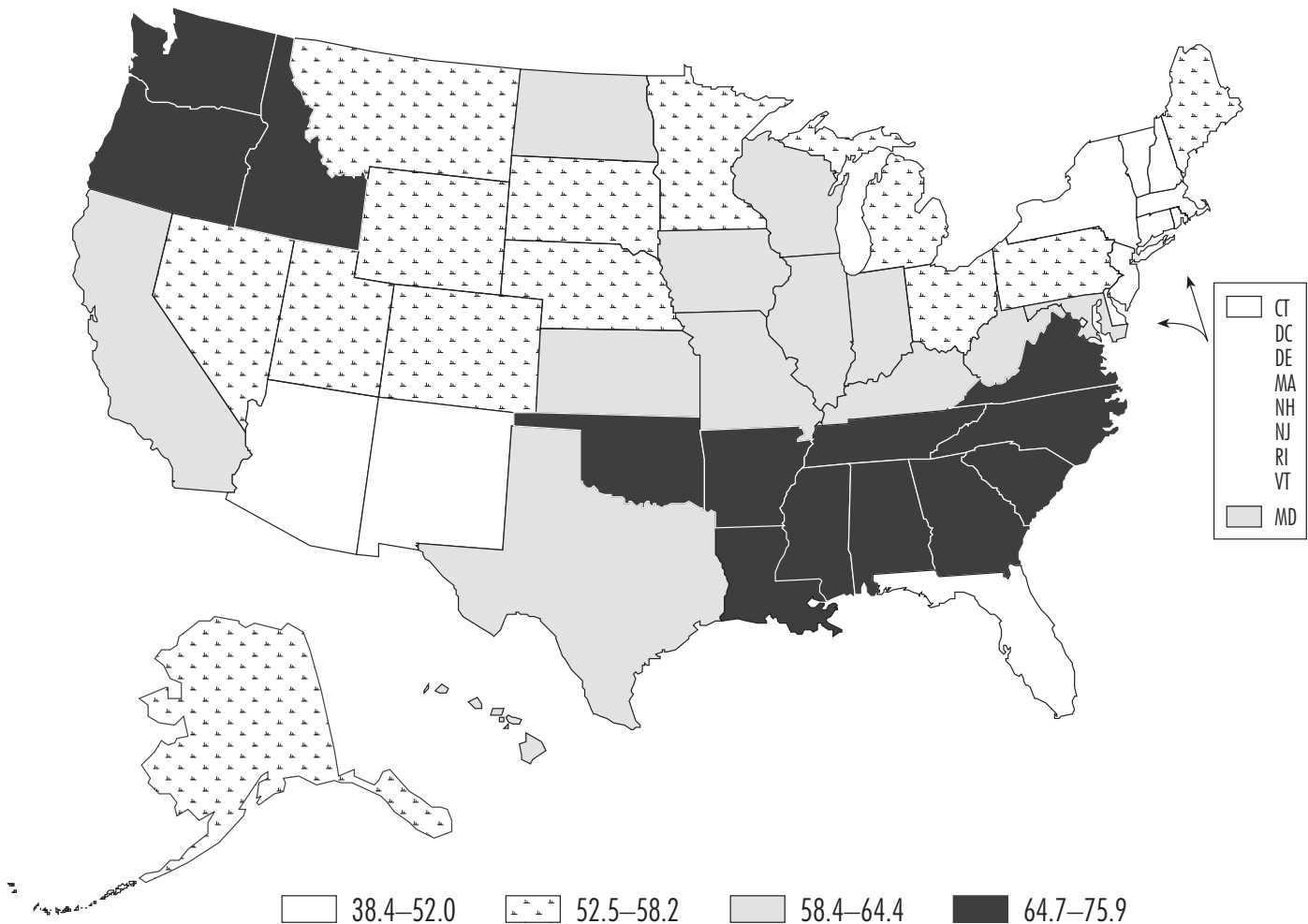
* Deaths per 100,000, age adjusted to 2000 total US population. Dashes indicate too few deaths (20 or fewer) to calculate a stable estimate.

Stroke

Stroke, or cerebrovascular disease, is the third leading cause of death and a major cause of disability in the United States. The major risk factors for stroke are high blood pressure, high blood cholesterol, tobacco use, heart disease, diabetes, physical inactivity, and poor nutrition. Preventing stroke and controlling its risk factors are essential to reducing health care costs and improving the quality of life among older Americans. A person's chance of having a stroke more than doubles for each decade of life after age 55.

- Each year, about 700,000 Americans have a stroke. On average, a stroke occurs every 45 seconds.
- In 2001, stroke accounted for more than 163,500 deaths.
- In 2001, rates of death from stroke were 43% higher among blacks than whites.
- Each year, about 40,000 more women than men have a stroke.
- In a recent study, only 17% of the public recognized enough of the major warning signs of stroke to call 911.
- Emergency therapy, if applied within 3 hours, can drastically reduce disabilities from certain kinds of strokes.

Stroke: 2001 Death Rate*



*Deaths per 100,000, age adjusted to 2000 total U.S. population. ICD-10 codes: I60–I69.

Deaths Due to Stroke, by Sex, 2001

State	Total		Male		Female	
	Number	Rate*	Number	Rate*	Number	Rate*
Alabama	2,998	66.0	1,146	67.0	1,852	64.1
Alaska	158	57.4	68	58.0	90	57.0
Arizona	2,480	48.2	1,046	48.9	1,434	47.2
Arkansas	2,256	75.9	840	74.5	1,416	76.5
California	18,088	61.2	7,313	62.5	10,775	59.6
Colorado	1,825	53.9	657	50.1	1,168	55.4
Connecticut	2,003	49.6	702	48.2	1,301	49.4
Delaware	383	49.2	157	53.6	226	46.1
District of Columbia	265	46.4	99	47.6	166	46.0
Florida	10,413	47.6	4,227	47.5	6,186	47.0
Georgia	4,312	67.4	1,681	69.8	2,631	64.7
Hawaii	766	59.8	359	63.8	407	56.2
Idaho	781	64.7	289	59.2	492	67.6
Illinois	7,230	58.4	2,690	58.9	4,540	56.7
Indiana	3,877	63.8	1,473	65.4	2,404	61.4
Iowa	2,218	58.8	807	59.5	1,411	57.1
Kansas	1,848	60.3	674	60.8	1,174	59.3
Kentucky	2,557	64.4	912	61.5	1,645	64.8
Louisiana	2,638	64.8	1,048	66.2	1,590	62.7
Maine	822	54.7	355	63.3	467	47.9
Maryland	2,881	59.6	1,117	60.8	1,764	57.9
Massachusetts	3,535	48.6	1,325	51.4	2,210	46.1
Michigan	5,701	58.2	2,218	59.8	3,483	56.4
Minnesota	2,727	52.5	1,044	55.1	1,683	50.1
Mississippi	1,935	70.5	779	75.3	1,156	66.8
Missouri	3,796	61.6	1,443	63.8	2,353	59.1
Montana	578	57.7	213	54.1	365	59.2
Nebraska	1,130	57.3	457	63.1	673	54.1
Nevada	913	55.1	405	54.5	508	55.2
New Hampshire	633	52.0	230	49.9	403	52.0
New Jersey	4,006	44.2	1,605	47.1	2,401	41.5
New Mexico	824	49.6	303	45.3	521	52.3
New York	7,706	38.4	3,008	40.5	4,698	36.6
North Carolina	5,401	71.3	2,066	74.0	3,335	68.5
North Dakota	507	60.4	206	66.0	301	56.6
Ohio	6,891	57.4	2,553	57.5	4,338	56.6
Oklahoma	2,384	65.6	903	66.0	1,481	64.6
Oregon	2,588	69.5	1,025	70.9	1,563	68.1
Pennsylvania	8,619	55.5	3,168	56.3	5,451	54.4
Rhode Island	613	47.4	251	54.2	362	42.3
South Carolina	2,832	75.0	1,101	76.4	1,731	72.6
South Dakota	490	52.5	195	55.3	295	50.6
Tennessee	4,037	72.3	1,466	71.0	2,571	72.0
Texas	10,612	63.8	4,050	62.8	6,562	63.4
Utah	870	56.4	314	50.4	556	60.0
Vermont	323	50.2	107	45.8	216	52.3
Virginia	4,129	65.4	1,567	66.3	2,562	63.8
Washington	3,765	67.2	1,457	67.0	2,308	66.5
West Virginia	1,272	59.4	492	60.6	780	56.9
Wisconsin	3,658	61.7	1,464	66.7	2,194	57.7
Wyoming	260	56.1	98	53.7	162	58.6
United States	163,534¹	57.7	63,173	58.6	100,361	56.2

* Deaths per 100,000, age adjusted to 2000 total US population. ¹Total is slightly less than that in table on page 3 because it does not include decedents with unknown age.

Deaths Due to Stroke, by Race and Ethnicity, 2001

State	White		Black		Asian/Pacific Islander		American Indian/ Alaska Native		Hispanic	
	Number	Rate*	Number	Rate*	Number	Rate*	Number	Rate*	Number	Rate*
Alabama	2,216	62.1	766	83.8	—	—	—	—	—	—
Alaska	107	52.7	—	—	—	—	37	79.3	—	—
Arizona	2,090	46.7	66	80.3	26	46.0	60	49.2	238	52.5
Arkansas	1,929	73.9	322	100.6	—	—	—	—	—	—
California	13,031	60.6	1,337	88.2	1,638	57.8	50	37.7	2,032	51.3
Colorado	1,589	53.2	61	70.6	25	52.3	—	—	147	53.9
Connecticut	1,842	49.1	117	65.7	—	—	—	—	35	33.1
Delaware	314	46.7	62	66.6	—	—	—	—	—	—
District of Columbia	72	41.2	187	50.5	—	—	—	—	—	—
Florida	8,357	45.7	1,218	85.9	46	30.0	—	—	786	35.6
Georgia	3,024	62.3	1,238	88.7	21	29.0	—	—	24	28.8
Hawaii	151	48.3	—	—	587	63.4	—	—	26	87.3
Idaho	763	65.1	—	—	—	—	—	—	—	—
Illinois	5,991	56.4	971	76.0	96	43.4	—	—	171	38.6
Indiana	3,559	62.9	284	81.6	—	—	—	—	26	39.7
Iowa	2,165	58.3	24	83.3	—	—	—	—	21	88.7
Kansas	1,728	59.7	83	83.9	—	—	—	—	25	44.1
Kentucky	2,349	63.2	200	92.4	—	—	—	—	—	—
Louisiana	1,748	58.6	847	84.5	—	—	—	—	31	48.1
Maine	816	54.8	—	—	—	—	—	—	—	—
Maryland	2,164	57.4	655	69.8	46	39.1	—	—	—	—
Massachusetts	3,324	48.4	125	59.7	37	31.5	—	—	48	33.7
Michigan	4,890	56.3	719	72.6	31	45.8	—	—	48	44.9
Minnesota	2,628	51.9	40	73.1	36	72.3	—	—	—	—
Mississippi	1,262	64.1	666	90.0	—	—	—	—	—	—
Missouri	3,409	60.2	346	77.2	—	—	—	—	21	46.3
Montana	561	57.6	—	—	—	—	—	—	—	—
Nebraska	1,072	56.2	39	100.1	—	—	—	—	—	—
Nevada	763	54.6	69	89.2	28	34.6	—	—	47	39.4
New Hampshire	629	52.3	—	—	—	—	—	—	—	—
New Jersey	3,210	41.9	525	67.5	86	36.3	—	—	182	35.2
New Mexico	540	49.6	—	—	—	—	31	41.5	233	48.6
New York	6,212	38.5	902	41.3	169	25.7	—	—	411	27.3
North Carolina	4,072	66.2	1,247	97.2	21	45.9	45	84.6	—	—
North Dakota	497	59.9	—	—	—	—	—	—	—	—
Ohio	6,121	56.0	713	74.6	24	30.1	—	—	32	39.0
Oklahoma	2,105	64.8	153	91.0	—	—	100	59.9	—	—
Oregon	2,481	69.6	42	130.8	28	51.4	—	—	—	—
Pennsylvania	7,773	54.0	731	75.4	47	44.1	—	—	63	48.0
Rhode Island	580	46.9	—	—	—	—	—	—	—	—
South Carolina	1,882	66.5	937	105.7	—	—	—	—	—	—
South Dakota	467	51.2	—	—	—	—	—	—	—	—
Tennessee	3,397	69.5	620	99.0	—	—	—	—	—	—
Texas	7,600	62.4	1,404	94.6	103	44.4	—	—	1,498	52.3
Utah	825	56.4	—	—	—	—	—	—	23	48.1
Vermont	323	50.8	—	—	—	—	—	—	—	—
Virginia	3,119	61.1	922	91.5	50	35.4	—	—	34	34.4
Washington	3,467	66.6	77	83.2	137	68.8	42	99.5	42	39.3
West Virginia	1,223	59.2	46	77.6	—	—	—	—	—	—
Wisconsin	3,492	60.9	107	77.6	37	115.7	—	—	—	—
Wyoming	249	56.5	—	—	—	—	—	—	—	—
United States	134,178	55.9	18,914	80.0	3,463	51.2	563	46.1	6,416	44.0

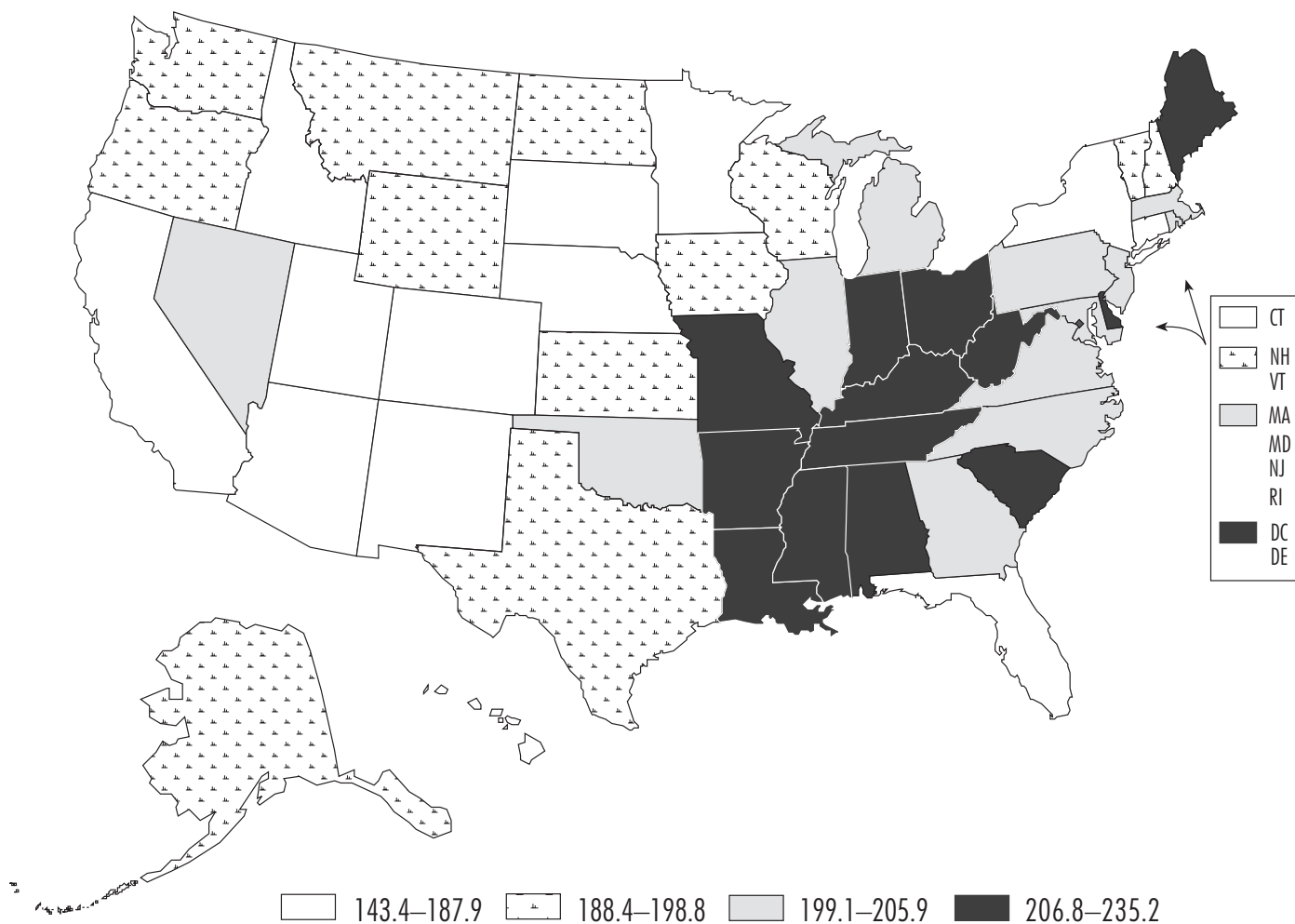
* Deaths per 100,000, age adjusted to 2000 total US population. Dashes indicate too few deaths (20 or fewer) to calculate a stable estimate.

All Cancers

Cancer is the second most common cause of death in the United States. The National Cancer Institute estimates that approximately 9.6 million Americans with a history of cancer were alive in January 2000. Cancer is largely controllable through prevention, early detection (for some cancers), and treatment. Reducing the nation's cancer burden requires reducing the prevalence of behavioral and environmental factors that increase cancer risk. It also requires ensuring that cancer screening services and high-quality treatment are available and accessible, particularly to medically underserved populations.

- Almost one in every four deaths in the United States is from cancer; an estimated 563,700 Americans will die of cancer in 2004.
- According to the National Institutes of Health, in 2003 cancer cost this nation \$189.5 billion in health care expenditures and lost productivity.
- All cancers caused by cigarette smoking could be prevented. At least 30% of all cancer deaths that occur in the United States are due to smoking.
- According to the American Cancer Society, about one-third of cancer deaths that occur in the United States each year are due to poor nutrition, physical inactivity, obesity, or other lifestyle factors and thus could also be prevented.

All Cancers: 2001 Death Rate*



*Deaths per 100,000, age adjusted to 2000 total U.S. population. ICD-10 codes: C00–C97.

Deaths Due to All Cancers, by Sex, 2001

State	Total		Male		Female	
	Number	Rate*	Number	Rate*	Number	Rate*
Alabama	9,801	212.2	5,251	280.2	4,550	169.5
Alaska	689	192.6	374	227.8	315	165.8
Arizona	9,142	172.9	4,735	202.5	4,407	151.5
Arkansas	6,091	208.0	3,333	271.2	2,758	165.8
California	53,923	179.2	27,288	212.8	26,635	156.7
Colorado	6,145	169.6	3,050	200.4	3,095	150.7
Connecticut	7,093	187.2	3,435	222.4	3,658	165.8
Delaware	1,786	219.3	914	267.1	872	187.1
District of Columbia	1,327	235.2	679	307.9	648	191.6
Florida	39,088	187.2	21,061	229.8	18,027	155.3
Georgia	13,818	202.0	7,287	261.5	6,531	164.0
Hawaii	2,024	155.9	1,132	192.1	892	126.9
Idaho	2,093	172.1	1,112	206.2	981	146.9
Illinois	24,778	204.4	12,730	257.1	12,048	171.2
Indiana	12,831	211.6	6,791	271.9	6,040	172.9
Iowa	6,404	188.7	3,265	232.9	3,139	160.7
Kansas	5,448	193.3	2,885	245.9	2,563	158.5
Kentucky	9,358	227.9	5,063	297.6	4,295	182.0
Louisiana	9,517	227.4	5,149	300.4	4,368	180.2
Maine	3,045	207.3	1,609	262.7	1,436	170.5
Maryland	10,322	204.6	5,269	253.4	5,053	173.0
Massachusetts	13,750	199.3	6,783	244.8	6,967	171.5
Michigan	19,689	199.1	10,224	247.8	9,465	167.7
Minnesota	8,967	183.1	4,648	227.1	4,319	154.5
Mississippi	5,958	216.3	3,340	296.8	2,618	163.8
Missouri	12,365	206.8	6,330	255.8	6,035	175.0
Montana	1,956	198.8	1,046	244.9	910	166.1
Nebraska	3,389	185.0	1,740	227.2	1,649	156.7
Nevada	3,814	205.9	2,069	245.0	1,745	176.4
New Hampshire	2,398	193.9	1,241	238.7	1,157	164.7
New Jersey	18,164	203.2	8,928	245.7	9,236	176.9
New Mexico	2,900	167.0	1,564	206.1	1,336	138.3
New York	36,975	187.7	18,183	228.3	18,792	162.9
North Carolina	16,065	202.5	8,493	262.3	7,572	164.6
North Dakota	1,391	188.4	750	238.0	641	155.5
Ohio	24,804	207.8	12,808	261.4	11,996	173.5
Oklahoma	7,411	205.2	3,917	258.1	3,494	170.3
Oregon	7,057	196.1	3,648	236.0	3,409	169.7
Pennsylvania	29,913	203.3	15,091	251.3	14,822	173.2
Rhode Island	2,398	200.6	1,219	253.9	1,179	167.7
South Carolina	8,272	206.8	4,586	278.7	3,686	159.7
South Dakota	1,590	187.9	882	243.9	708	147.8
Tennessee	12,229	212.5	6,592	278.8	5,637	169.3
Texas	33,488	191.1	17,781	240.8	15,707	157.2
Utah	2,313	143.4	1,262	181.0	1,051	117.2
Vermont	1,249	194.8	644	244.3	605	165.2
Virginia	13,345	199.9	6,824	248.9	6,521	169.3
Washington	10,802	193.3	5,578	232.6	5,224	166.2
West Virginia	4,685	218.7	2,400	267.9	2,285	186.0
Wisconsin	10,777	190.9	5,591	237.1	5,186	160.4
Wyoming	923	192.9	494	235.7	429	162.3
United States	553,760[†]	195.6	287,068	242.8	266,692	164.5

* Deaths per 100,000, age adjusted to 2000 total US population. [†]Total is slightly less than that in table on page 3 because it does not include decedents with unknown age.

Deaths Due to All Cancers, by Race and Ethnicity, 2001

State	White		Black		Asian/Pacific Islander		American Indian/ Alaska Native		Hispanic	
	Number	Rate*	Number	Rate*	Number	Rate*	Number	Rate*	Number	Rate*
Alabama	7,408	203.6	2,350	255.3	—	—	—	—	—	—
Alaska	501	183.4	21	233.4	21	145.6	138	262.0	—	—
Arizona	7,845	177.3	209	214.4	83	134.9	190	139.9	815	148.7
Arkansas	5,294	206.5	763	243.4	—	—	—	—	—	—
California	39,289	194.3	4,065	245.2	4,171	127.4	177	116.2	6,221	128.3
Colorado	5,326	171.0	227	235.6	70	112.8	—	—	504	149.4
Connecticut	6,484	190.5	429	207.3	30	68.8	—	—	137	105.6
Delaware	1,502	218.1	258	250.4	—	—	—	—	—	—
District of Columbia	308	197.2	998	270.2	—	—	—	—	—	—
Florida	32,386	194.5	3,406	216.3	155	76.1	31	78.8	3,110	131.8
Georgia	10,158	197.1	3,463	235.6	94	106.1	—	—	86	73.7
Hawaii	540	164.6	—	—	1,383	151.8	—	—	83	239.4
Idaho	2,026	173.8	—	—	—	—	—	—	32	102.8
Illinois	20,166	203.5	3,692	271.9	283	93.4	—	—	623	113.9
Indiana	11,715	210.2	989	268.4	—	—	—	—	96	119.1
Iowa	6,253	188.7	92	278.1	25	145.4	—	—	28	109.9
Kansas	5,013	192.2	292	286.5	—	—	40	256.0	85	136.2
Kentucky	8,683	226.2	605	275.6	22	144.5	—	—	46	220.1
Louisiana	6,571	216.4	2,800	272.4	42	107.1	—	—	95	128.7
Maine	3,010	207.3	—	—	—	—	—	—	—	—
Maryland	7,543	200.4	2,527	245.1	164	114.1	23	226.1	65	66.0
Massachusetts	12,911	202.7	495	214.0	146	101.3	—	—	188	118.6
Michigan	16,780	195.2	2,553	242.9	97	97.7	94	268.2	165	127.4
Minnesota	8,620	182.9	157	241.4	86	143.6	63	233.9	41	98.5
Mississippi	4,042	203.7	1,884	255.4	—	—	—	—	—	—
Missouri	10,994	203.2	1,223	264.7	38	91.8	24	110.4	86	164.5
Montana	1,850	195.8	—	—	—	—	82	320.7	—	—
Nebraska	3,219	184.5	113	283.5	—	—	—	—	30	115.7
Nevada	3,345	217.7	225	251.0	95	124.7	—	—	132	88.3
New Hampshire	2,374	195.3	—	—	—	—	—	—	—	—
New Jersey	15,066	208.9	2,107	248.3	291	97.7	—	—	688	113.0
New Mexico	1,890	175.2	57	248.6	—	—	155	169.5	781	147.7
New York	29,135	194.6	4,936	214.8	791	99.8	35	75.6	2,078	124.3
North Carolina	12,509	195.8	3,340	248.4	61	105.4	113	169.1	42	48.7
North Dakota	1,343	186.6	—	—	—	—	43	344.5	—	—
Ohio	21,943	204.7	2,655	262.5	80	110.9	—	—	116	118.1
Oklahoma	6,577	208.9	435	244.5	27	110.9	304	156.1	68	121.5
Oregon	6,771	199.8	72	213.5	91	130.7	43	166.7	80	106.2
Pennsylvania	26,878	200.5	2,653	263.5	131	93.4	—	—	245	146.7
Rhode Island	2,272	203.6	71	236.0	—	—	—	—	35	98.8
South Carolina	5,980	197.8	2,236	241.8	26	101.0	—	—	25	61.9
South Dakota	1,514	186.1	—	—	—	—	67	244.2	—	—
Tennessee	10,347	206.3	1,797	274.2	36	117.5	—	—	38	85.9
Texas	23,997	196.5	4,164	260.2	334	102.7	25	45.3	4,968	149.6
Utah	2,158	143.3	—	—	42	160.4	—	—	77	128.2
Vermont	1,242	196.3	—	—	—	—	—	—	—	—
Virginia	10,311	193.9	2,687	251.4	202	120.0	—	—	136	111.2
Washington	9,967	196.9	244	233.3	338	139.5	99	181.8	154	113.9
West Virginia	4,534	219.4	141	251.9	—	—	—	—	—	—
Wisconsin	10,250	190.7	383	253.2	50	124.5	55	210.0	39	57.9
Wyoming	877	194.2	—	—	—	—	—	—	26	156.3
United States	457,717	197.6	61,870	247.4	9,690	119.6	2,112	147.8	22,371	131.0

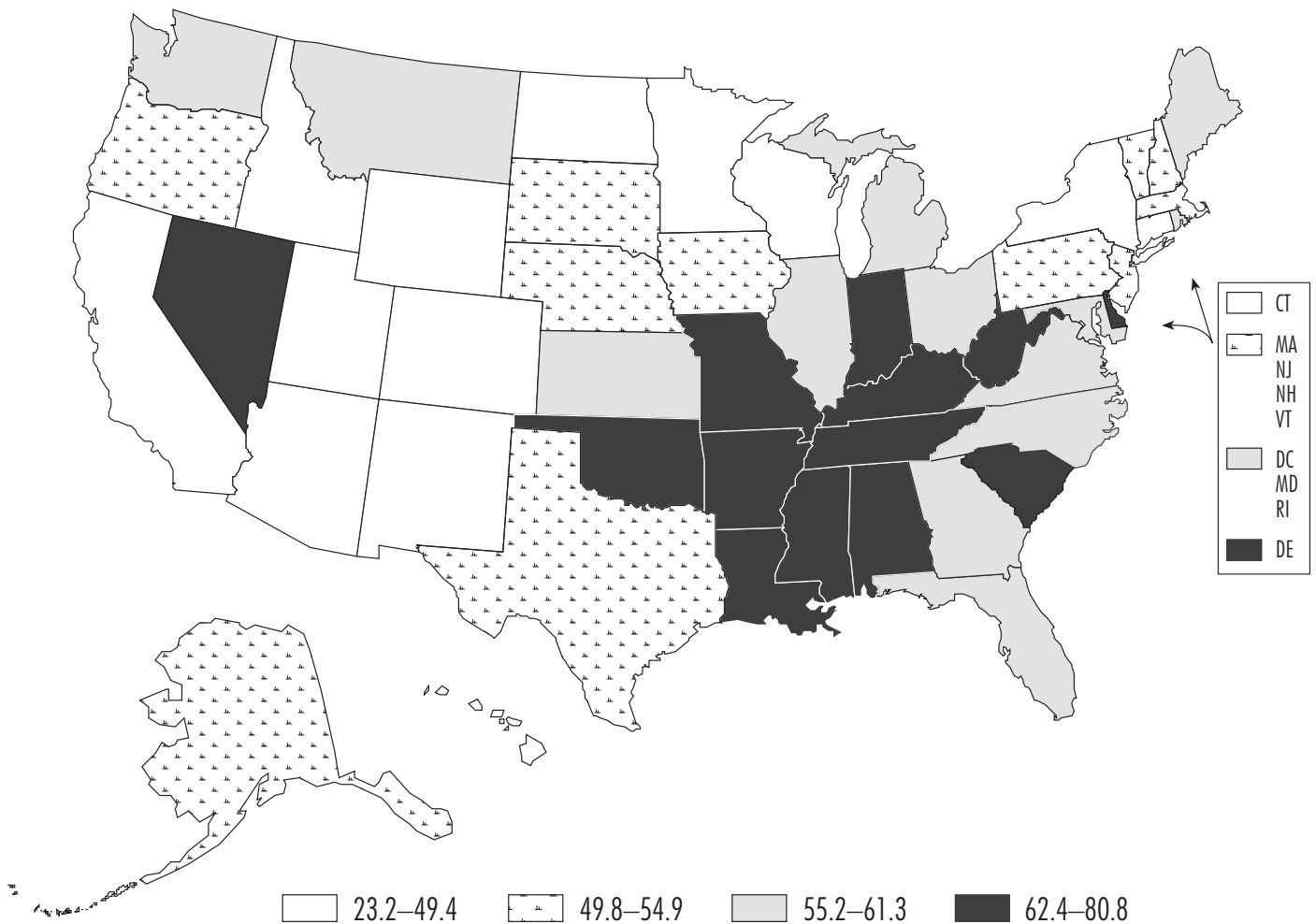
* Deaths per 100,000, age adjusted to 2000 total US population. Dashes indicate too few deaths (20 or fewer) to calculate a stable estimate.

Lung Cancer

Lung cancer is the leading cause of cancer-related deaths in the United States. According to the American Cancer Society, a single behavior—cigarette smoking—is responsible for more than 8 of every 10 cases of lung cancer. Preventing and reducing cigarette smoking are key to reducing illness and death from lung cancer.

- Lung cancer accounts for 28% of all cancer deaths. More than 155,900 people died of lung cancer in 2001.
- Lung cancer is the leading cause of cancer death among men; 58% of lung cancer deaths are among men.
- African Americans have the highest rate of death from lung cancer, and Hispanics have the lowest.
- Lung cancer is also the leading cause of cancer death among women; it surpassed breast cancer in 1987.
- The American Cancer Society estimates that more than 160,400 new cases of lung cancer will be diagnosed in 2004.

Lung Cancer: 2001 Death Rate*



*Deaths per 100,000, age adjusted to 2000 total U.S. population. ICD-10 codes: C34.

Deaths Due to Lung Cancer, by Sex, 2001

State	Total		Male		Female	
	Number	Rate*	Number	Rate*	Number	Rate*
Alabama	2,912	62.5	1,852	95.8	1,060	39.7
Alaska	197	54.4	109	64.2	88	46.6
Arizona	2,440	45.6	1,337	55.6	1,103	37.6
Arkansas	2,003	68.1	1,295	102.5	708	42.7
California	13,992	46.9	7,578	58.9	6,414	38.2
Colorado	1,483	41.5	788	51.5	695	34.7
Connecticut	1,846	49.4	968	61.9	878	41.2
Delaware	521	63.5	275	78.4	246	53.0
District of Columbia	314	55.8	186	82.7	128	37.8
Florida	11,793	56.2	6,763	72.8	5,030	42.9
Georgia	4,191	61.2	2,599	91.1	1,592	40.7
Hawaii	475	36.5	287	48.4	188	26.4
Idaho	537	44.5	311	57.0	226	34.2
Illinois	6,793	56.5	3,960	78.8	2,833	41.0
Indiana	3,935	65.0	2,382	93.4	1,553	45.3
Iowa	1,712	51.5	998	70.3	714	38.1
Kansas	1,555	56.2	914	77.1	641	41.2
Kentucky	3,340	80.8	2,089	120.0	1,251	53.5
Louisiana	2,890	68.7	1,782	100.6	1,108	45.9
Maine	860	58.6	492	79.1	368	44.7
Maryland	2,889	57.2	1,618	75.8	1,271	44.0
Massachusetts	3,693	54.2	1,922	68.3	1,771	45.0
Michigan	5,642	57.0	3,182	75.4	2,460	44.3
Minnesota	2,270	47.2	1,271	60.8	999	37.1
Mississippi	1,904	69.0	1,240	107.3	664	41.9
Missouri	3,755	63.0	2,236	88.3	1,519	45.1
Montana	577	58.9	321	73.4	256	48.2
Nebraska	945	52.7	561	72.1	384	38.2
Nevada	1,200	63.5	668	76.2	532	53.2
New Hampshire	648	52.6	341	64.3	307	44.5
New Jersey	4,698	52.7	2,605	70.3	2,093	40.6
New Mexico	657	37.6	384	49.6	273	28.4
New York	9,517	48.5	5,206	64.4	4,311	37.9
North Carolina	4,901	61.3	3,024	90.6	1,877	41.1
North Dakota	348	48.8	206	65.2	142	35.9
Ohio	7,186	60.2	4,261	84.9	2,925	42.9
Oklahoma	2,317	63.9	1,402	90.3	915	45.1
Oregon	1,955	54.9	1,041	66.4	914	46.5
Pennsylvania	8,037	54.9	4,698	76.7	3,339	39.7
Rhode Island	648	55.2	373	76.6	275	40.5
South Carolina	2,540	62.4	1,631	94.1	909	39.5
South Dakota	411	49.8	262	71.9	149	33.0
Tennessee	3,988	68.8	2,553	104.1	1,435	43.4
Texas	9,395	53.8	5,620	74.9	3,775	38.3
Utah	371	23.2	244	34.0	127	14.5
Vermont	345	53.8	211	77.2	134	37.3
Virginia	3,764	56.2	2,119	75.1	1,645	43.1
Washington	3,049	55.2	1,643	68.0	1,406	45.9
West Virginia	1,555	72.0	867	94.2	688	55.8
Wisconsin	2,743	49.2	1,554	64.9	1,189	37.9
Wyoming	232	48.4	134	62.8	98	37.5
United States	155,969	55.2	90,363	74.9	65,606	41.0

* Deaths per 100,000, age adjusted to 2000 total US population.

Deaths Due to Lung Cancer, by Race and Ethnicity, 2001

State	White		Black		Asian/Pacific Islander		American Indian/ Alaska Native		Hispanic	
	Number	Rate*	Number	Rate*	Number	Rate*	Number	Rate*	Number	Rate*
Alabama	2,348	63.7	547	59.8	—	—	—	—	—	—
Alaska	150	53.4	—	—	—	—	36	72.4	—	—
Arizona	2,207	48.9	55	56.6	23	38.9	—	—	141	27.9
Arkansas	1,809	69.9	186	61.0	—	—	—	—	—	—
California	10,891	54.0	1,074	64.9	1,022	32.0	52	33.9	953	21.7
Colorado	1,317	42.7	63	65.2	—	—	—	—	84	26.9
Connecticut	1,691	50.5	112	53.8	—	—	—	—	34	29.1
Delaware	441	63.4	75	73.2	—	—	—	—	—	—
District of Columbia	72	45.2	239	64.7	—	—	—	—	—	—
Florida	10,303	61.6	815	51.7	34	18.9	—	—	636	26.7
Georgia	3,334	64.1	829	56.8	—	—	—	—	—	—
Hawaii	123	37.3	—	—	325	35.3	—	—	21	57.0
Idaho	530	45.7	—	—	—	—	—	—	—	—
Illinois	5,672	57.8	972	71.3	49	18.6	—	—	93	19.8
Indiana	3,630	65.3	283	77.1	—	—	—	—	—	—
Iowa	1,672	51.5	29	89.2	—	—	—	—	—	—
Kansas	1,431	55.9	89	87.4	—	—	—	—	—	—
Kentucky	3,135	81.0	189	87.4	—	—	—	—	—	—
Louisiana	2,092	68.3	771	74.6	—	—	—	—	—	—
Maine	854	58.9	—	—	—	—	—	—	—	—
Maryland	2,193	58.2	657	63.3	26	19.1	—	—	—	—
Massachusetts	3,500	55.7	117	50.0	42	30.2	—	—	34	24.4
Michigan	4,813	56.0	736	69.7	21	25.0	37	110.4	35	31.1
Minnesota	2,171	46.9	41	67.6	—	—	29	94.4	—	—
Mississippi	1,417	70.6	484	66.8	—	—	—	—	—	—
Missouri	3,374	62.6	347	75.1	—	—	—	—	—	—
Montana	541	57.6	—	—	—	—	31	119.4	—	—
Nebraska	898	52.7	30	79.1	—	—	—	—	—	—
Nevada	1,090	69.1	64	72.2	23	29.7	—	—	—	—
New Hampshire	644	53.2	—	—	—	—	—	—	—	—
New Jersey	3,979	55.5	547	63.6	50	18.2	—	—	119	20.5
New Mexico	492	45.0	—	—	—	—	—	—	141	26.9
New York	7,860	52.9	1,097	47.2	173	23.5	—	—	381	22.9
North Carolina	3,999	61.9	842	62.5	—	—	38	55.5	—	—
North Dakota	330	47.5	—	—	—	—	—	—	—	—
Ohio	6,420	59.9	724	71.1	21	31.8	—	—	—	—
Oklahoma	2,115	66.8	105	59.7	—	—	81	43.6	—	—
Oregon	1,888	56.3	21	62.1	—	—	—	—	—	—
Pennsylvania	7,217	54.1	747	73.6	23	16.8	—	—	50	31.8
Rhode Island	616	56.3	—	—	—	—	—	—	—	—
South Carolina	1,986	64.3	539	57.2	—	—	—	—	—	—
South Dakota	391	49.4	—	—	—	—	—	—	—	—
Tennessee	3,486	68.8	489	75.6	—	—	—	—	—	—
Texas	7,402	60.4	1,117	70.3	81	28.6	—	—	790	25.3
Utah	353	23.6	—	—	—	—	—	—	—	—
Vermont	345	54.5	—	—	—	—	—	—	—	—
Virginia	3,054	57.1	647	60.6	35	24.3	—	—	26	25.7
Washington	2,863	57.1	61	63.5	74	33.9	29	51.2	22	18.5
West Virginia	1,518	72.8	35	63.8	—	—	—	—	—	—
Wisconsin	2,596	48.9	118	79.0	—	—	—	—	—	—
Wyoming	225	49.6	—	—	—	—	—	—	—	—
United States	133,478	57.7	15,941	63.6	2,196	28.3	542	39.0	3,812	23.6

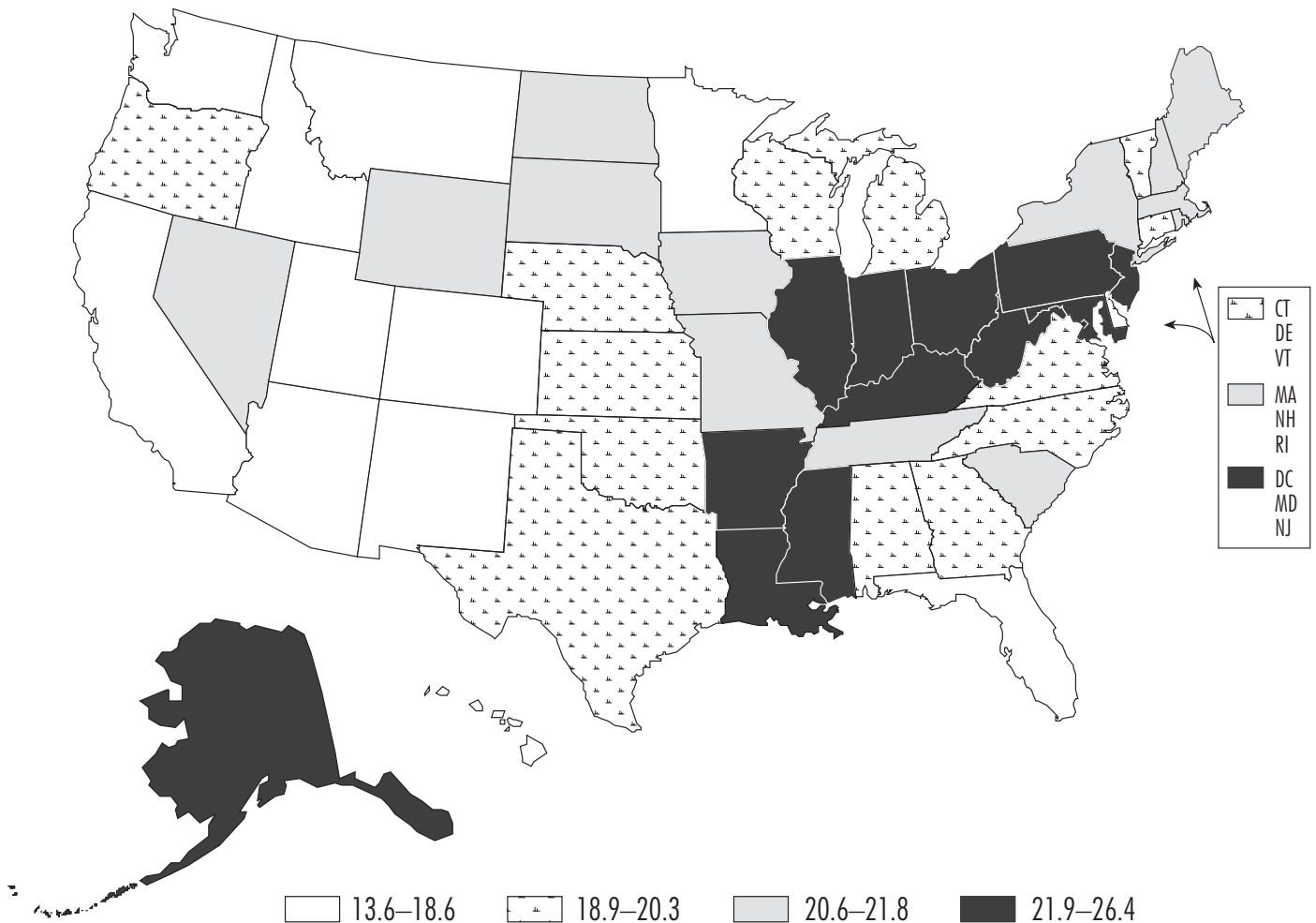
* Deaths per 100,000, age adjusted to 2000 total US population. Dashes indicate too few deaths (20 or fewer) to calculate a stable estimate.

Colorectal Cancer

Colorectal cancer is the second leading cause of cancer-related deaths in the United States, those who accounting for 10% of all cancer deaths. The risk of developing colorectal cancer increases with age. Adults who are aged 50 or older, have inflammatory bowel disease, those who are overweight or physically inactive and those who have a personal or family history of colorectal polyps or colorectal cancer are at higher risk. Additionally, low fruit and vegetable intake, a low-fiber diet, alcohol consumption, and tobacco use may contribute to a person’s risk for colorectal cancer. Three screening tools—fecal occult blood test, flexible sigmoidoscopy, and colonoscopy—are commonly used to detect colorectal cancer in its early stages, when treatment is most likely to be effective.

- In 2001, the rate of death from colorectal cancer was 41% higher among men than women.
- The rate of death from colorectal cancer is highest among African Americans and lowest among Asians and Pacific Islanders.
- In 2001, 44% of Americans aged 50 and older reported ever having had a fecal occult blood test, and 47% reported ever having had a sigmoidoscopy or colonoscopy.
- The American Cancer Society estimates that 56,700 Americans will die of colorectal cancer in 2004.
- Routine screening for colorectal cancer, as recommended by the U.S. Preventive Services Task Force, can reduce the number of people who die of this disease by at least 30%.

Colorectal Cancer: 2001 Death Rate*



*Deaths per 100,000, age adjusted to 2000 total U.S. population. ICD-10 codes: C18–C20, C26.0.

Deaths Due to Colorectal Cancer, by Sex, 2001

State	Total		Male		Female	
	Number	Rate*	Number	Rate*	Number	Rate*
Alabama	873	19.0	432	23.4	441	16.1
Alaska	78	22.3	46	25.6	32	19.1
Arizona	887	16.9	441	19.2	446	15.0
Arkansas	641	21.9	319	26.1	322	18.8
California	5,254	17.6	2,626	20.7	2,628	15.2
Colorado	621	17.4	309	20.2	312	15.2
Connecticut	725	18.9	327	21.3	398	17.0
Delaware	163	20.1	79	22.6	84	17.6
District of Columbia	149	26.4	67	31.6	82	23.9
Florida	3,851	18.3	1,998	21.8	1,853	15.4
Georgia	1,344	19.9	637	23.1	707	17.7
Hawaii	215	16.6	127	21.7	88	12.4
Idaho	188	15.5	106	19.5	82	12.0
Illinois	2,722	22.4	1,352	27.6	1,370	18.7
Indiana	1,364	22.5	682	27.7	682	18.8
Iowa	740	21.1	348	25.0	392	18.6
Kansas	581	20.2	289	24.7	292	16.7
Kentucky	912	22.4	439	26.2	473	19.6
Louisiana	956	23.0	514	30.3	442	18.0
Maine	313	21.2	157	26.0	156	17.7
Maryland	1,098	22.0	533	26.3	565	19.1
Massachusetts	1,466	20.9	712	25.9	754	17.4
Michigan	1,894	19.2	931	22.8	963	16.6
Minnesota	872	17.6	414	20.5	458	15.5
Mississippi	602	21.9	309	27.9	293	18.0
Missouri	1,293	21.5	647	26.6	646	18.0
Montana	183	18.5	105	24.5	78	13.7
Nebraska	379	20.1	167	22.0	212	18.2
Nevada	388	21.8	217	25.9	171	18.0
New Hampshire	266	21.6	133	26.3	133	18.5
New Jersey	2,015	22.5	947	26.3	1,068	19.7
New Mexico	307	17.8	165	21.3	142	14.5
New York	4,102	20.7	1,946	24.8	2,156	18.0
North Carolina	1,533	19.4	742	23.0	791	17.0
North Dakota	156	20.8	78	24.9	78	17.6
Ohio	2,641	22.1	1,285	26.5	1,356	18.9
Oklahoma	732	20.2	364	24.6	368	17.3
Oregon	694	19.1	373	24.2	321	15.2
Pennsylvania	3,374	22.6	1,624	27.2	1,750	19.4
Rhode Island	251	20.7	105	22.5	146	20.0
South Carolina	816	20.6	426	26.1	390	16.8
South Dakota	179	20.6	102	28.5	77	14.8
Tennessee	1,248	21.8	641	27.4	607	17.9
Texas	3,276	18.9	1,714	23.2	1,562	15.5
Utah	215	13.6	112	16.5	103	11.3
Vermont	128	20.0	58	22.3	70	18.9
Virginia	1,348	20.3	672	24.7	676	17.4
Washington	1,038	18.6	530	22.1	508	15.8
West Virginia	508	23.7	249	28.4	259	20.2
Wisconsin	1,128	19.7	582	25.0	546	16.0
Wyoming	101	21.0	51	23.3	50	18.5
United States	56,808	20.1	28,229	24.1	28,579	17.1

* Deaths per 100,000, age adjusted to 2000 total US population.

Deaths Due to Colorectal Cancer, by Race and Ethnicity, 2001

State	White		Black		Asian/Pacific Islander		American Indian/ Alaska Native		Hispanic	
	Number	Rate*	Number	Rate*	Number	Rate*	Number	Rate*	Number	Rate*
Alabama	624	17.2	246	27.0	—	—	—	—	—	—
Alaska	52	19.2	—	—	—	—	—	—	—	—
Arizona	768	17.2	24	25.3	—	—	—	—	77	15.3
Arkansas	550	21.5	90	28.5	—	—	—	—	—	—
California	3,838	18.7	463	28.9	432	13.7	—	—	510	11.5
Colorado	537	17.4	28	30.0	—	—	—	—	48	14.5
Connecticut	666	19.2	44	22.1	—	—	—	—	—	—
Delaware	136	19.7	27	26.8	—	—	—	—	—	—
District of Columbia	32	20.6	112	30.1	—	—	—	—	—	—
Florida	3,071	18.0	375	24.2	22	11.4	—	—	382	16.5
Georgia	919	18.0	408	28.8	—	—	—	—	—	—
Hawaii	41	12.5	—	—	163	17.9	—	—	—	—
Idaho	182	15.6	—	—	—	—	—	—	—	—
Illinois	2,220	22.0	399	29.9	42	14.7	—	—	61	11.9
Indiana	1,236	22.1	114	31.6	—	—	—	—	—	—
Iowa	727	21.2	—	—	—	—	—	—	—	—
Kansas	539	20.1	29	27.3	—	—	—	—	—	—
Kentucky	834	21.9	70	31.6	—	—	—	—	—	—
Louisiana	648	21.4	291	28.8	—	—	—	—	—	—
Maine	309	21.1	—	—	—	—	—	—	—	—
Maryland	779	20.7	284	29.0	25	17.5	—	—	—	—
Massachusetts	1,380	21.2	48	21.6	—	—	—	—	—	—
Michigan	1,623	18.8	245	23.9	—	—	—	—	—	—
Minnesota	845	17.7	—	—	—	—	—	—	—	—
Mississippi	370	18.8	228	30.8	—	—	—	—	—	—
Missouri	1,131	20.7	148	32.8	—	—	—	—	—	—
Montana	167	17.5	—	—	—	—	—	—	—	—
Nebraska	365	20.2	—	—	—	—	—	—	—	—
Nevada	337	22.5	24	28.4	—	—	—	—	—	—
New Hampshire	263	21.7	—	—	—	—	—	—	—	—
New Jersey	1,682	22.9	227	27.4	—	—	—	—	86	15.6
New Mexico	187	17.3	—	—	—	—	—	—	103	20.0
New York	3,246	21.2	536	23.8	82	11.6	—	—	232	14.7
North Carolina	1,155	18.2	359	26.8	—	—	—	—	—	—
North Dakota	152	20.8	—	—	—	—	—	—	—	—
Ohio	2,307	21.4	314	31.7	—	—	—	—	—	—
Oklahoma	630	19.8	62	37.1	—	—	30	16.2	—	—
Oregon	658	19.1	—	—	—	—	—	—	—	—
Pennsylvania	3,032	22.3	303	30.7	—	—	—	—	25	18.0
Rhode Island	239	20.9	—	—	—	—	—	—	—	—
South Carolina	573	19.2	241	26.1	—	—	—	—	—	—
South Dakota	170	20.3	—	—	—	—	—	—	—	—
Tennessee	1,009	20.2	231	35.8	—	—	—	—	—	—
Texas	2,303	18.9	450	29.0	33	10.7	—	—	488	15.2
Utah	196	13.2	—	—	—	—	—	—	—	—
Vermont	128	20.3	—	—	—	—	—	—	—	—
Virginia	1,022	19.3	291	27.1	21	9.9	—	—	—	—
Washington	949	18.7	23	23.2	40	13.4	—	—	—	—
West Virginia	483	23.4	22	38.6	—	—	—	—	—	—
Wisconsin	1,084	19.9	33	25.4	—	—	—	—	—	—
Wyoming	95	21.0	—	—	—	—	—	—	—	—
United States	46,489	19.9	6,859	28.0	1,032	13.2	187	13.6	2,241	13.9

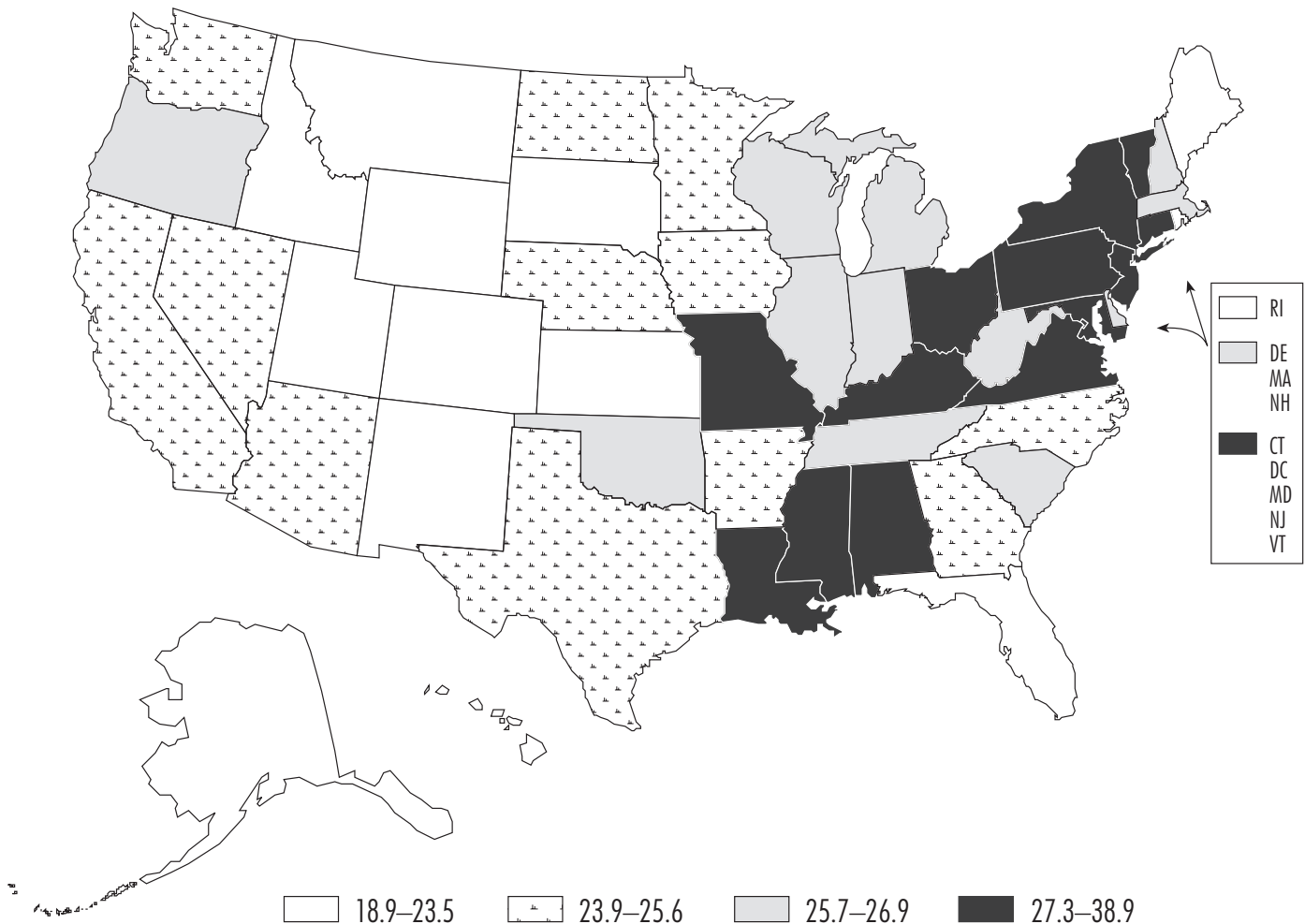
* Deaths per 100,000, age adjusted to 2000 total US population. Dashes indicate too few deaths (20 or fewer) to calculate a stable estimate.

Breast Cancer Among Women

Breast cancer is the most common cancer and the second leading cause of cancer-related deaths among American women. Risk factors include older age, later age at birth of first child, and family history of breast cancer. Mammography, the best available method for detecting breast cancer in its earliest, most treatable stage, can find cancer 1-3 years earlier than a woman or her health care provider can feel a lump.

- African American women have the highest rate of death from breast cancer, and Asian/Pacific Islander women have the lowest.
- Of all diagnosed cases of breast cancer, 75% are among women aged 50 years or older.
- Women have a 1 in 50 chance of getting breast cancer by age 50, a 1 in 24 chance by age 60, and a 1 in 8 lifetime risk for the disease.
- Screening with mammography can reduce deaths due to breast cancer by 16% among women aged 40 and older, and the risk reduction associated with screening increases as women get older.
- The American Cancer Society estimates that, in 2004, 215,990 women will be diagnosed with breast cancer and 40,110 women will die of this disease.

Breast Cancer Among Women: 2001 Death Rate*



*Deaths per 100,000, age adjusted to 2000 total U.S. population. ICD-10 code: C50.

Deaths Due to Breast Cancer Among Women, by Race and Ethnicity, 2001

State	Total		White		Black		Asian/Pacific Islander		American Indian/ Alaska Native		Hispanic	
	Number	Rate*	Number	Rate*	Number	Rate*	Number	Rate*	Number	Rate*	Number	Rate*
Alabama	748	28.6	527	26.0	219	38.6	—	—	—	—	—	—
Alaska	46	21.8	36	23.3	—	—	—	—	—	—	—	—
Arizona	685	24.2	583	25.4	29	54.9	—	—	—	—	57	17.3
Arkansas	395	24.7	334	24.1	57	30.0	—	—	—	—	—	—
California	4,200	24.8	3,034	27.8	355	34.9	297	14.8	—	—	505	16.4
Colorado	469	22.3	414	23.1	—	—	—	—	—	—	33	14.5
Connecticut	594	27.5	534	27.8	42	32.6	—	—	—	—	—	—
Delaware	123	26.7	101	26.1	—	—	—	—	—	—	—	—
District of Columbia	128	38.9	31	36.3	96	44.5	—	—	—	—	—	—
Florida	2,562	23.5	2,046	24.1	271	27.9	—	—	—	—	228	16.8
Georgia	1,010	24.9	713	24.1	285	29.1	—	—	—	—	—	—
Hawaii	139	20.5	41	23.8	—	—	87	18.5	—	—	—	—
Idaho	131	19.8	124	19.6	—	—	—	—	—	—	—	—
Illinois	1,846	26.6	1,462	26.2	316	37.5	22	10.8	—	—	46	12.6
Indiana	921	26.9	829	26.5	85	38.1	—	—	—	—	—	—
Iowa	455	23.9	442	23.8	—	—	—	—	—	—	—	—
Kansas	355	22.2	331	22.4	—	—	—	—	—	—	—	—
Kentucky	636	27.4	577	26.7	52	37.8	—	—	—	—	—	—
Louisiana	729	30.5	464	27.4	261	40.9	—	—	—	—	—	—
Maine	182	22.0	181	22.2	—	—	—	—	—	—	—	—
Maryland	819	27.9	569	26.8	229	33.7	—	—	—	—	—	—
Massachusetts	1,048	26.5	984	27.2	43	30.2	—	—	—	—	—	—
Michigan	1,473	26.3	1,216	25.2	231	36.4	—	—	—	—	—	—
Minnesota	687	24.9	678	25.7	—	—	—	—	—	—	—	—
Mississippi	440	28.2	270	24.5	166	36.5	—	—	—	—	—	—
Missouri	917	27.3	802	26.6	102	35.6	—	—	—	—	—	—
Montana	124	22.8	120	23.1	—	—	—	—	—	—	—	—
Nebraska	254	25.0	238	24.6	—	—	—	—	—	—	—	—
Nevada	255	25.5	219	27.1	—	—	—	—	—	—	—	—
New Hampshire	186	26.1	185	26.4	—	—	—	—	—	—	—	—
New Jersey	1,467	28.7	1,191	29.4	178	32.9	29	14.8	—	—	68	16.7
New Mexico	183	19.1	119	20.9	—	—	—	—	—	—	47	15.1
New York	3,125	27.6	2,361	28.2	514	34.9	53	9.6	—	—	195	18.3
North Carolina	1,154	25.5	847	23.6	288	34.2	—	—	—	—	—	—
North Dakota	103	25.6	101	25.8	—	—	—	—	—	—	—	—
Ohio	1,941	28.7	1,695	28.0	236	38.4	—	—	—	—	—	—
Oklahoma	536	26.8	465	27.0	47	44.1	—	—	—	—	—	—
Oregon	520	26.4	499	27.2	—	—	—	—	—	—	—	—
Pennsylvania	2,316	28.2	2,031	27.2	245	39.9	—	—	—	—	26	21.3
Rhode Island	159	23.4	154	24.6	—	—	—	—	—	—	—	—
South Carolina	589	25.8	385	22.7	197	34.3	—	—	—	—	—	—
South Dakota	87	18.9	83	19.0	—	—	—	—	—	—	—	—
Tennessee	845	25.7	697	24.7	143	34.1	—	—	—	—	—	—
Texas	2,483	24.7	1,725	25.3	371	37.5	21	9.2	—	—	363	17.3
Utah	197	22.0	189	22.7	—	—	—	—	—	—	—	—
Vermont	106	28.9	105	29.0	—	—	—	—	—	—	—	—
Virginia	1,077	27.9	799	26.5	252	38.5	—	—	—	—	—	—
Washington	759	24.2	703	25.0	—	—	22	13.1	—	—	—	—
West Virginia	309	25.7	299	25.8	—	—	—	—	—	—	—	—
Wisconsin	821	25.8	772	25.5	35	33.1	—	—	—	—	—	—
Wyoming	60	22.8	58	23.4	—	—	—	—	—	—	—	—
United States	41,394	26.0	33,363	26.0	5,490	35.2	672	12.9	123	13.5	1,746	16.2

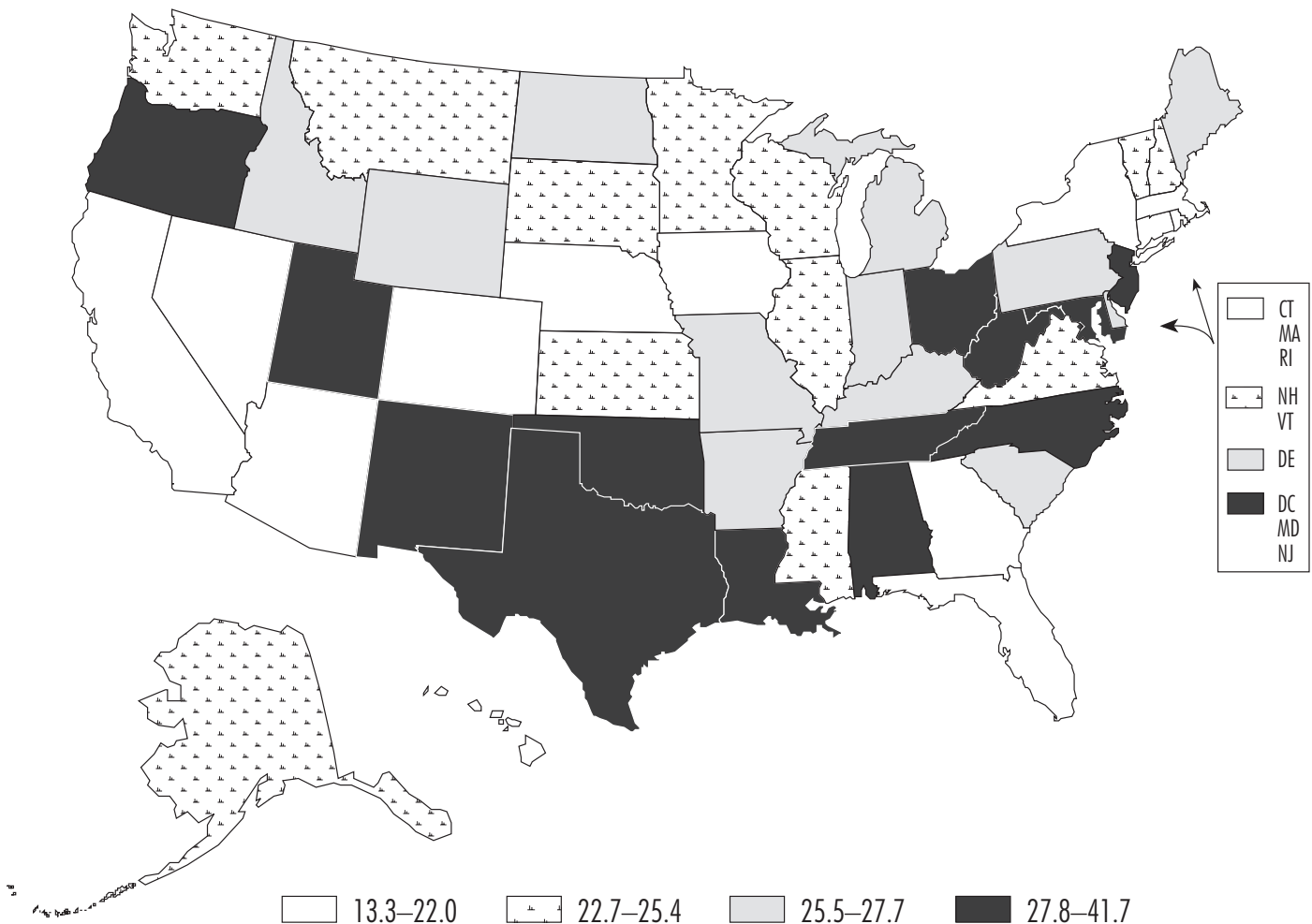
* Deaths per 100,000, age adjusted to 2000 total US population. Dashes indicate too few deaths (20 or fewer) to calculate a stable estimate.

Diabetes

Diabetes is a serious, costly, and increasingly common chronic disease that can cause devastating complications—including heart disease, kidney failure, leg and foot amputations, and blindness—that often result in disability and death. Early detection, improved delivery of care, and better self-management are key strategies for preventing much of the burden of diabetes. Type 2 diabetes, formerly considered “adult onset” diabetes, is now being diagnosed more frequently among children and adolescents. This type of diabetes is linked to two modifiable risk factors: obesity and physical inactivity.

- In 2001, diabetes was the sixth leading cause of death. Diabetes is believed to be under-reported on death certificates.
- About 18 million people in the United States have diabetes, and over 5 million of these people are unaware that they have the disease.
- Each year, an estimated 12,000–24,000 people become blind because of diabetic eye disease. In addition, nearly 43,000 people with diabetes begin treatment for kidney failure each year, and about 82,000 undergo diabetes-related lower extremity amputations.
- The direct and indirect costs of diabetes totaled \$132 billion in 2002.
- One in three Americans born in 2000 will develop diabetes during their lifetime.

Diabetes: 2001 Death Rate*



*Deaths per 100,000, age adjusted to 2000 total U.S. population. ICD-10 codes: E10–E14.

Deaths Due to Diabetes, by Sex, 2001

State	Total		Male		Female	
	Number	Rate*	Number	Rate*	Number	Rate*
Alabama	1,344	29.3	609	33.2	735	26.6
Alaska	80	22.7	41	20.6	39	23.2
Arizona	1,057	20.1	535	23.0	522	17.7
Arkansas	756	25.8	347	28.3	409	23.7
California	6,395	21.4	3,049	23.7	3,346	19.5
Colorado	667	18.7	307	20.1	360	17.5
Connecticut	759	19.6	348	22.7	411	17.2
Delaware	218	27.1	94	27.6	124	26.0
District of Columbia	209	37.0	82	36.8	127	37.5
Florida	4,631	22.0	2,344	25.8	2,287	18.9
Georgia	1,475	21.9	684	24.1	791	19.8
Hawaii	173	13.3	93	15.8	80	11.1
Idaho	318	26.2	141	26.3	177	25.7
Illinois	3,092	25.4	1,380	28.1	1,712	23.3
Indiana	1,677	27.7	763	31.1	914	25.2
Iowa	709	20.1	310	22.4	399	18.4
Kansas	721	25.0	327	28.1	394	23.2
Kentucky	1,099	27.1	491	29.9	608	25.1
Louisiana	1,734	41.7	688	39.4	1,046	42.5
Maine	398	26.9	186	31.0	212	24.2
Maryland	1,458	29.2	689	33.4	769	26.1
Massachusetts	1,422	20.2	656	24.0	766	17.7
Michigan	2,655	26.9	1,169	28.7	1,486	25.4
Minnesota	1,213	24.3	612	30.2	601	20.0
Mississippi	661	24.1	263	24.1	398	24.1
Missouri	1,535	25.5	714	29.2	821	22.8
Montana	229	23.2	98	23.1	131	23.0
Nebraska	400	21.2	175	23.3	225	20.2
Nevada	322	17.6	180	19.6	142	14.9
New Hampshire	291	23.6	157	30.3	134	18.4
New Jersey	2,556	28.5	1,190	33.1	1,366	25.3
New Mexico	538	31.4	266	35.5	272	27.9
New York	3,844	19.4	1,770	22.3	2,074	17.3
North Carolina	2,181	27.8	964	30.0	1,217	26.0
North Dakota	196	25.7	87	27.6	109	24.1
Ohio	3,750	31.4	1,670	34.7	2,080	28.9
Oklahoma	1,065	29.5	450	29.6	615	28.9
Oregon	1,011	27.9	466	30.4	545	26.0
Pennsylvania	3,826	25.7	1,696	28.4	2,130	23.6
Rhode Island	265	21.7	120	25.2	145	19.3
South Carolina	1,088	27.5	497	29.8	591	25.4
South Dakota	212	24.2	94	26.2	118	22.8
Tennessee	1,746	30.6	786	33.3	960	28.3
Texas	5,456	31.6	2,445	33.5	3,011	30.0
Utah	509	31.9	235	33.9	274	30.6
Vermont	155	24.1	67	24.5	88	23.7
Virginia	1,613	24.5	741	26.9	872	22.3
Washington	1,403	25.1	687	28.6	716	22.2
West Virginia	802	37.6	358	40.6	444	34.6
Wisconsin	1,337	23.3	663	28.8	674	19.6
Wyoming	120	25.5	56	28.2	64	23.6
United States	71,371¹	25.2	32,840	28.0	38,531	23.0

* Deaths per 100,000, age adjusted to 2000 total US population. ¹Total is slightly less than that in table on page 3 because it does not include decedents with unknown age.

Deaths Due to Diabetes, by Race and Ethnicity, 2001

State	White		Black		Asian/Pacific Islander		American Indian/ Alaska Native		Hispanic	
	Number	Rate*	Number	Rate*	Number	Rate*	Number	Rate*	Number	Rate*
Alabama	822	22.9	514	56.4	—	—	—	—	—	—
Alaska	62	23.4	—	—	—	—	—	—	—	—
Arizona	683	15.5	50	55.1	—	—	101	78.0	217	40.9
Arkansas	563	22.0	189	61.7	—	—	—	—	—	—
California	3,531	17.2	701	43.4	532	17.4	41	26.2	1,590	36.7
Colorado	483	15.7	32	32.5	—	—	—	—	139	46.1
Connecticut	624	17.6	96	48.5	—	—	—	—	36	30.8
Delaware	165	24.1	48	49.5	—	—	—	—	—	—
District of Columbia	22	14.2	186	50.4	—	—	—	—	—	—
Florida	3,251	19.2	795	52.5	28	14.8	—	—	549	24.2
Georgia	897	17.7	560	39.6	—	—	—	—	—	—
Hawaii	23	6.9	—	—	138	14.9	—	—	—	—
Idaho	297	25.5	—	—	—	—	—	—	—	—
Illinois	2,310	22.8	578	43.3	46	19.7	—	—	154	32.0
Indiana	1,443	25.8	213	58.9	—	—	—	—	—	—
Iowa	673	19.4	24	75.1	—	—	—	—	—	—
Kansas	642	23.9	49	47.9	—	—	—	—	24	41.7
Kentucky	993	26.1	100	45.9	—	—	—	—	—	—
Louisiana	930	30.7	770	75.9	—	—	—	—	—	—
Maine	394	26.9	—	—	—	—	—	—	—	—
Maryland	913	24.2	521	53.1	—	—	—	—	—	—
Massachusetts	1,258	19.2	96	44.6	24	21.3	—	—	43	26.6
Michigan	2,155	25.0	415	40.9	—	—	—	—	49	42.1
Minnesota	1,130	23.4	37	57.8	—	—	23	87.2	—	—
Mississippi	355	18.1	300	41.1	—	—	—	—	—	—
Missouri	1,287	23.5	224	49.4	—	—	—	—	—	—
Montana	213	22.4	—	—	—	—	—	—	—	—
Nebraska	369	20.5	—	—	—	—	—	—	—	—
Nevada	265	17.5	31	34.7	—	—	—	—	—	—
New Hampshire	285	23.5	—	—	—	—	—	—	—	—
New Jersey	1,836	24.9	504	60.7	48	19.4	—	—	167	31.7
New Mexico	221	20.9	—	—	—	—	70	82.5	231	45.8
New York	2,505	16.3	868	38.9	74	10.9	—	—	383	25.5
North Carolina	1,398	22.1	732	55.7	—	—	31	53.4	—	—
North Dakota	180	24.0	—	—	—	—	—	—	—	—
Ohio	3,155	29.2	553	54.9	—	—	—	—	25	27.1
Oklahoma	823	26.0	95	54.3	—	—	119	62.6	24	36.6
Oregon	931	27.1	27	86.3	—	—	—	—	22	33.6
Pennsylvania	3,344	24.5	425	42.2	—	—	—	—	41	26.9
Rhode Island	240	20.8	—	—	—	—	—	—	—	—
South Carolina	605	20.3	480	52.8	—	—	—	—	—	—
South Dakota	184	21.5	—	—	—	—	27	96.3	—	—
Tennessee	1,312	26.4	422	64.8	—	—	—	—	—	—
Texas	2,837	23.3	863	55.5	56	21.9	—	—	1,697	55.2
Utah	452	30.3	—	—	—	—	—	—	28	48.9
Vermont	153	24.1	—	—	—	—	—	—	—	—
Virginia	1,080	20.5	488	46.6	—	—	—	—	25	28.2
Washington	1,236	24.3	51	50.4	63	28.5	21	40.4	32	30.7
West Virginia	764	37.1	36	63.3	—	—	—	—	—	—
Wisconsin	1,227	22.3	82	53.5	—	—	—	—	—	—
Wyoming	104	23.4	—	—	—	—	—	—	—	—
United States	51,625	22.1	12,225	49.9	1,230	16.9	628	45.3	5,663	36.3

* Deaths per 100,000, age adjusted to 2000 total US population. Dashes indicate too few deaths (20 or fewer) to calculate a stable estimate.

Section III

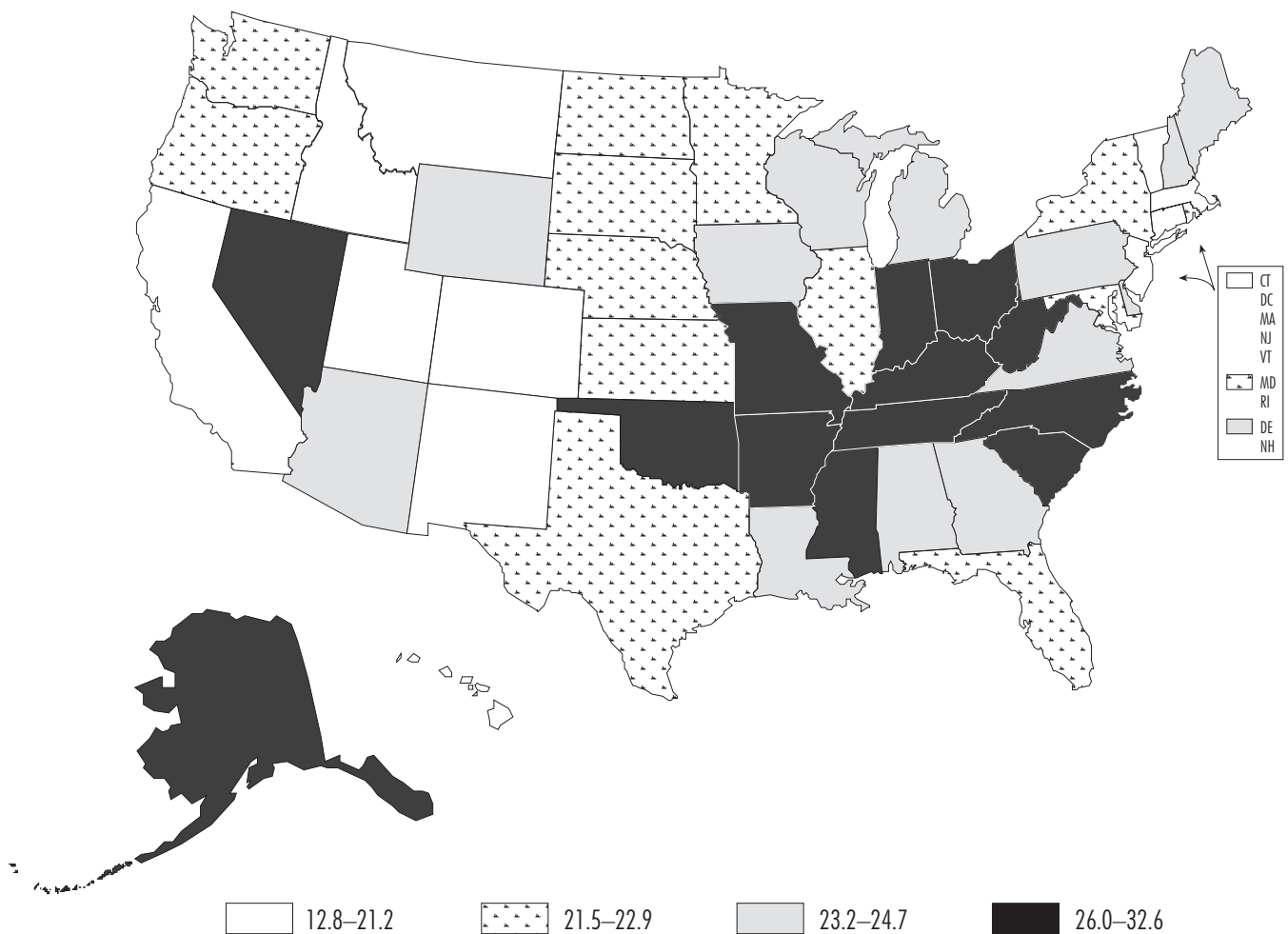
Risk Factors and Use of Preventive Services, United States

Cigarette Smoking Among Adults

Tobacco use is the single most preventable cause of death and disease in the United States. Tobacco use increases the risk for lung and other cancers, cardiovascular disease, chronic lung disease, and adverse reproductive outcomes. Quitting smoking has major and immediate health benefits for men and women of all ages. Smokers who quit will, on average, live longer and have fewer years of disability.

- Cigarette smoking is responsible for more than 440,000 deaths each year, or one in every five deaths. Almost 10% of these deaths are a result of exposure to second hand smoke.
- About 8.6 million people in the United States have at least one serious illness caused by smoking.
- The direct and indirect costs of smoking-related illnesses total more than \$157 billion each year.
- The prevalence of cigarette smoking among adults in the United States in 2002 ranged from 13% in Utah to 33% in Kentucky.

Percentage of Adults Who Reported Cigarette Smoking,* 2002



*Ever smoked at least 100 cigarettes and now smoke every day or some days
Source: CDC, Behavioral Risk Factor Surveillance System.

Percentage of Adults Who Reported Current Cigarette Smoking,* by Sex, Race, and Ethnicity, 2002

State	Total	Male	Female	White	Black [†]	Asian/Pacific Islander [†]	American Indian/ Alaska Native [†]	Hispanic [†]	Multiracial [†]
Alabama	24.4	27.5	21.5	24.0	21.5	—	—	31.7	—
Alaska	29.3	32.0	26.5	24.6	—	24.7	42.4	38.3	50.3
Arizona	23.4	26.9	20.0	24.6	19.6	—	16.0	17.6	—
Arkansas	26.3	28.7	24.2	26.3	22.7	—	42.0	24.2	34.7
California	16.4	19.6	13.3	16.9	18.1	10.3	—	16.3	25.4
Colorado	20.4	21.4	19.4	19.4	22.8	16.8	—	23.1	22.6
Connecticut	19.4	20.6	18.3	19.3	17.9	10.5	—	22.1	—
Delaware	24.7	25.3	24.1	25.6	25.6	8.3	—	18.1	—
District of Columbia	20.4	23.7	17.6	14.8	22.3	25.0	—	28.0	—
Florida	22.0	23.5	20.7	23.4	17.5	20.1	33.4	19.3	—
Georgia	23.2	26.6	20.1	24.6	18.9	—	—	17.3	36.6
Hawaii	21.0	26.1	16.0	20.1	21.9	18.2	—	12.9	32.8
Idaho	20.6	21.5	19.6	20.3	—	—	32.6	21.3	30.4
Illinois	22.8	26.1	19.8	23.7	24.0	10.3	—	17.7	—
Indiana	27.6	29.7	25.8	27.3	27.6	29.1	—	24.5	36.3
Iowa	23.2	26.3	20.3	22.9	—	—	—	24.8	—
Kansas	22.1	23.3	21.0	21.9	24.7	—	—	18.9	26.6
Kentucky	32.6	34.8	30.5	32.3	36.2	—	—	47.5	—
Louisiana	23.9	26.5	21.5	24.9	22.3	—	38.4	20.2	15.0
Maine	23.6	26.4	21.0	23.8	—	—	—	—	—
Maryland	21.9	25.6	18.7	21.4	23.8	13.2	—	17.8	—
Massachusetts	18.9	20.1	17.9	18.9	15.9	10.8	—	21.3	—
Michigan	24.2	25.0	23.4	23.9	25.3	6.7	—	29.5	34.4
Minnesota	21.7	24.3	19.3	21.3	26.9	17.8	—	25.2	—
Mississippi	27.3	33.1	22.1	27.9	24.7	—	—	33.3	—
Missouri	26.5	29.6	23.8	25.4	36.5	—	45.3	24.7	37.1
Montana	21.2	21.2	21.2	20.0	—	—	45.1	23.4	—
Nebraska	22.7	26.4	19.3	22.4	30.2	—	—	24.7	—
Nevada	26.0	28.5	23.5	24.9	29.9	24.5	—	22.8	42.4
New Hampshire	23.2	23.9	22.5	22.7	—	—	35.4	34.0	—
New Jersey	19.0	20.5	17.7	20.6	17.9	12.2	—	15.6	—
New Mexico	21.2	23.3	19.3	20.8	22.4	—	19.8	21.7	—
New York	22.3	25.8	19.2	23.2	19.7	12.1	—	21.5	23.2
North Carolina	26.3	30.5	22.3	27.8	22.6	15.3	22.9	22.8	24.1
North Dakota	21.5	23.0	20.0	19.3	—	—	60.3	—	—
Ohio	26.6	28.4	25.0	27.0	21.0	—	—	20.9	—
Oklahoma	26.6	29.7	23.7	26.4	25.9	21.0	37.6	19.3	23.8
Oregon	22.4	24.7	20.3	22.2	—	11.8	—	22.0	27.9
Pennsylvania	24.5	26.1	23.1	23.7	28.7	23.8	38.2	24.9	34.1
Rhode Island	22.4	24.1	20.9	22.3	27.1	—	—	15.8	—
South Carolina	26.6	29.0	24.3	27.7	21.1	—	—	33.5	42.7
South Dakota	22.6	25.6	19.7	21.2	—	—	38.9	33.5	—
Tennessee	27.7	30.9	24.8	28.5	23.7	—	—	20.9	—
Texas	22.9	26.7	19.2	25.1	21.4	8.3	52.5	18.9	29.0
Utah	12.8	14.2	11.4	12.3	—	—	—	15.3	—
Vermont	21.1	21.5	20.8	20.6	—	—	—	20.2	—
Virginia	24.6	28.7	20.8	24.6	19.7	29.7	—	26.0	41.3
Washington	21.5	23.6	19.4	21.5	16.0	13.8	30.9	19.7	32.8
West Virginia	28.4	29.8	27.2	27.8	19.9	—	—	—	43.8
Wisconsin	23.3	25.4	21.4	22.8	27.8	—	37.9	26.4	—
Wyoming	23.7	25.3	22.0	22.1	—	—	—	27.7	—
United States	22.7	25.3	20.2	23.4	21.8	13.6	38.5	19.1	30.4

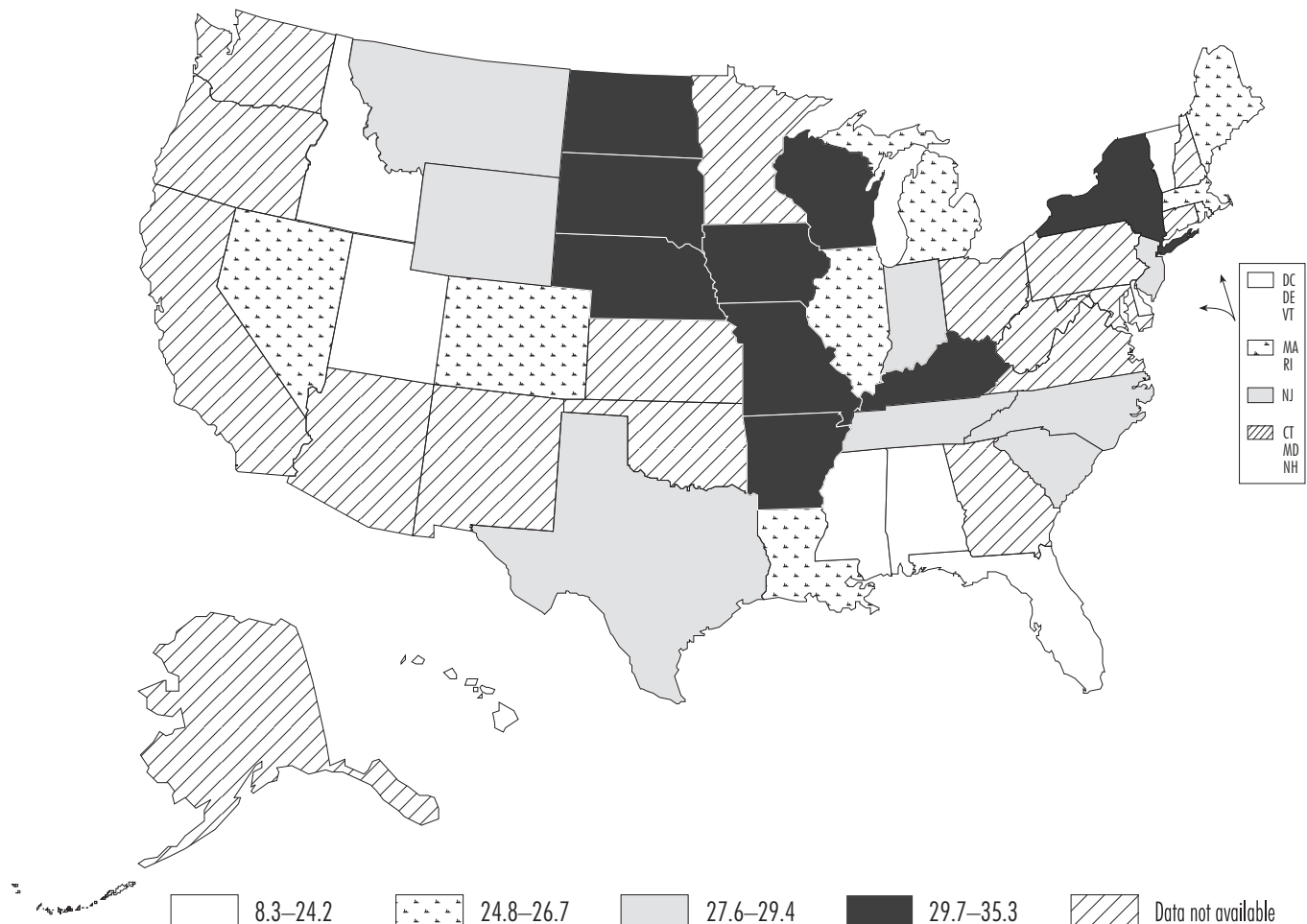
*Ever smoked at least 100 cigarettes and now smoke every day or some days. †A dash indicates that the state sample had too few respondents (fewer than 50) in this category to calculate a stable estimate. Source: CDC, Behavioral Risk Factor Surveillance System.

Cigarette Smoking Among High School Students

Preventing tobacco use among young people is critical to the overall goal of reducing the prevalence of smoking. Almost all smokers begin smoking during their teenage years. Every year, nearly three quarters of a million young people become regular smokers. If current patterns continue, more than 6 million young people who are regular smokers will eventually die from a tobacco-related disease. Factors associated with young people using tobacco include nicotine dependence, public attitudes about smoking, tobacco marketing, and peer and parental influences.

- According to a study by the Substance Abuse and Mental Health Services Administration (SAMHSA), every day 4,100 young people aged 12–17 try cigarettes for the first time.
- SAMHSA also reports that, among all people who ever smoked cigarettes, the average age at which they first smoked was 15.4 years.
- In 2001, 29% of U.S. high school students reported having smoked a cigarette in the last month.
- The percentage of high school students who reported having smoked a cigarette in the last month in the states that collected this information in 2001 ranged from 8% in Utah to 35% in Arkansas and North Dakota.

Percentage of High School Students Who Reported Cigarette Smoking,* 2001



*Smoked cigarettes on 1 or more of the 30 days preceding the survey.

Source: CDC, Youth Risk Behavior Surveillance System.

Percentage of High School Students Who Reported Cigarette Smoking,* by Sex, Race, and Ethnicity, 2001

State [†]	Total	Male	Female	White	Black [‡]	Hispanic [‡]	Other [‡]
Alabama	23.7	24.7	22.7	30.0	11.6	—	—
Alaska							
Arizona							
Arkansas	34.7	37.0	32.1	38.3	22.4	—	—
California							
Colorado [§]	26.7	24.3	29.3	22.9	—	36.8	—
Connecticut							
Delaware	24.2	24.7	23.4	28.4	12.7	27.4	23.3
District of Columbia	13.1	15.5	11.1	—	12.7	12.9	12.7
Florida	21.5	19.9	22.9	26.7	8.9	21.8	23.5
Georgia							
Hawaii [§]	15.0	11.0	18.0	15.5	—	—	14.7
Idaho	19.1	20.7	17.1	18.7	—	18.0	22.7
Illinois ^{§1}	25.3	23.5	26.6	27.4	—	—	—
Indiana [§]	28.5	29.3	27.5	29.8	—	—	—
Iowa [§]	29.7	29.7	29.5	29.7	—	—	—
Kansas							
Kentucky [§]	33.0	32.0	34.1	34.6	—	—	—
Louisiana ^{§2}	25.0	27.4	23.0	37.6	9.9	—	—
Maine	24.8	23.0	26.6	25.1	—	—	20.8
Maryland							
Massachusetts	26.0	25.0	27.0	28.0	16.4	19.8	23.8
Michigan	25.7	24.0	27.2	27.6	12.1	28.3	27.5
Minnesota							
Mississippi	23.6	22.4	24.6	33.8	12.6	—	—
Missouri	30.3	30.1	30.4	32.6	14.4	—	—
Montana	28.5	25.4	31.8	25.7	—	—	53.0
Nebraska [§]	30.5	29.3	31.6	30.5	—	—	—
Nevada	25.2	24.6	25.8	26.4	—	25.4	32.5
New Hampshire [§]	NA	NA	NA	NA	NA	NA	NA
New Jersey	29.4	29.7	28.9	31.7	17.4	33.5	25.7
New Mexico							
New York ^{§3}	29.8	26.7	32.8	30.5	—	—	—
North Carolina	27.8	28.4	27.2	31.9	19.2	26.5	24.4
North Dakota	35.3	34.7	35.5	33.8	—	—	—
Ohio							
Oklahoma							
Oregon							
Pennsylvania							
Rhode Island	24.8	24.1	25.6	27.4	13.5	13.1	32.3
South Carolina [§]	27.6	28.5	26.8	34.7	16.5	—	31.8
South Dakota	33.1	31.6	34.4	29.5	—	—	57.1
Tennessee [§]	29.1	29.9	28.4	35.8	12.0	—	—
Texas	28.4	31.8	24.9	30.6	13.6	30.8	33.7
Utah	8.3	7.1	9.6	8.0	—	—	18.2
Vermont	23.7	21.2	26.0	NA	NA	NA	NA
Virginia							
Washington							
West Virginia							
Wisconsin	32.6	28.6	36.7	33.5	17.0	—	34.8
Wyoming	28.4	27.0	29.6	27.5	—	33.7	38.5
United States	28.5	29.2	27.7	31.9	14.7	26.6	24.5

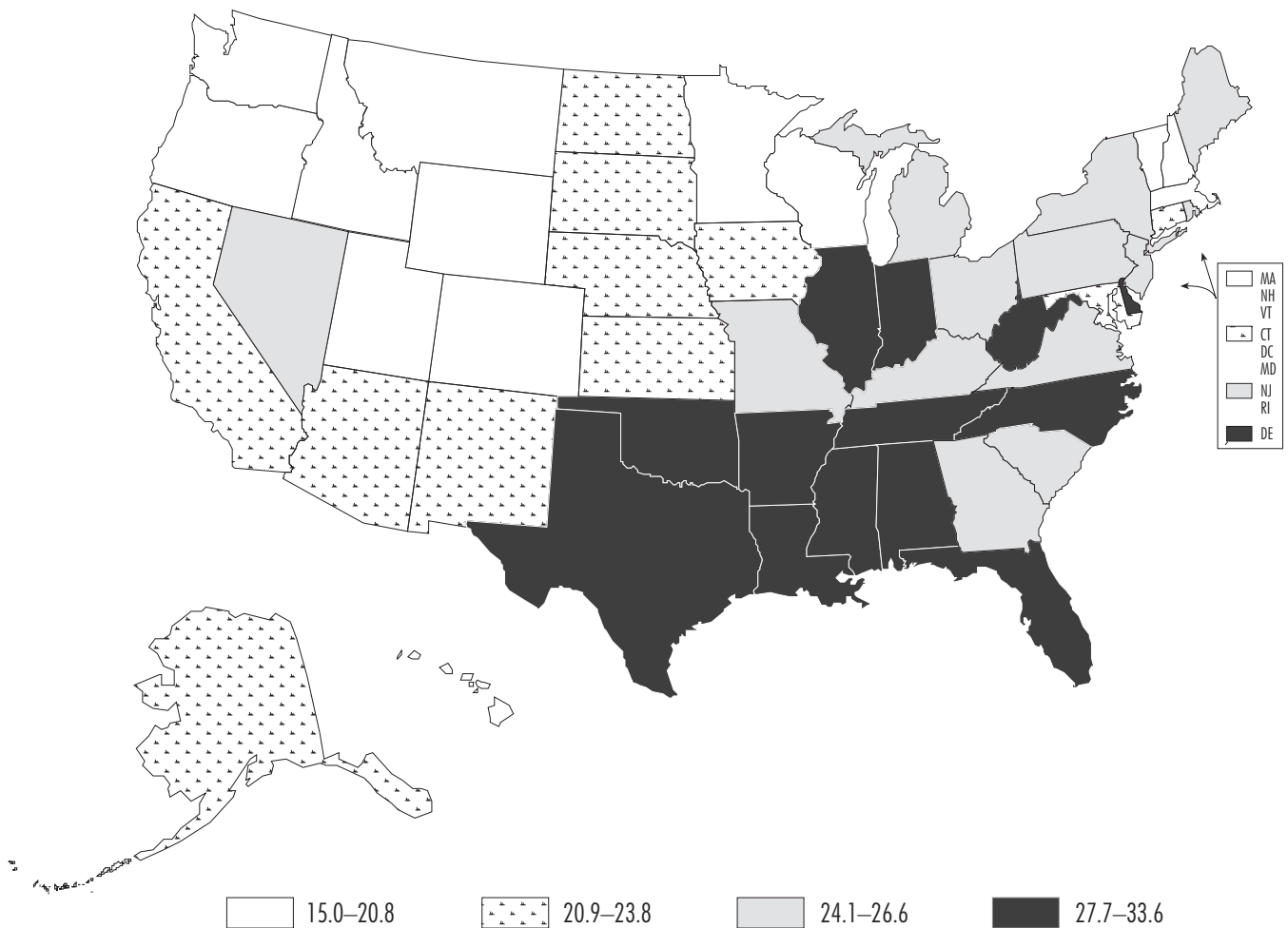
*Smoked cigarettes on 1 or more of the 30 days preceding the survey. [†]States with no data shown did not conduct a Youth Risk Behavior Survey in 2001. [‡]A dash indicates that the state sample had too few respondents (fewer than 100) in this category to calculate a stable estimate. [§]Unweighted data. NA—State did not ask this question data was not available. ^{§1}Excludes students from Chicago. ^{§2}Excludes students from New Orleans. ^{§3}Excludes students from New York City. Source: CDC, Youth Risk Behavior Surveillance System.

No Leisure-Time Physical Activity Among Adults

Regular physical activity reduces peoples risk for heart attack, colon cancer, diabetes, and high blood pressure, and may reduce their risk for stroke. It also helps to control weight; contributes to healthy bones, muscles, and joints; reduces falls among the elderly; helps to relieve the pain of arthritis; reduces symptoms of anxiety and depression; and can decrease the need for hospitalizations, physician visits, and medications. Moreover, physical activity need not be strenuous to be beneficial; people of all ages benefit from moderate physical activity, such as 30 minutes of brisk walking five or more times a week.

- In 2002, 25% of U.S. adults (28% of women and 22% of men) reported no leisure-time physical activity.
- The percentage of adults reporting no leisure-time physical activity in 2002 ranged from 15% in Washington to 34% in Louisiana and Tennessee.
- No leisure time physical activity was more prevalent among Hispanics (37%) and blacks (33%) than among whites (22%).

Percentage of Adults Who Reported No Leisure-Time Physical Activity,* 2002



*No exercise, recreation, or physical activity (other than regular job duties) during the previous month.
Source: CDC, Behavioral Risk Factor Surveillance System.

Percentage of Adults Who Reported No Leisure-Time Physical Activity,* by Sex, Race, and Ethnicity, 2002

State	Total	Male	Female	White	Black [†]	Asian/Pacific Islander [†]	American Indian/ Alaska Native [†]	Hispanic [†]	Multiracial [†]
Alabama	27.3	24.6	29.6	24.6	37.4	—	—	23.0	—
Alaska	22.4	20.2	24.8	18.9	—	35.8	35.8	22.1	28.4
Arizona	22.6	18.7	26.5	19.9	30.3	—	35.8	33.4	—
Arkansas	27.4	23.6	30.8	26.0	33.4	—	34.5	30.7	37.9
California	22.7	20.1	25.3	16.7	22.8	20.9	—	33.2	10.2
Colorado	19.3	17.8	20.7	15.0	23.8	16.2	—	39.5	16.8
Connecticut	22.0	19.6	24.1	18.9	29.8	30.0	—	39.2	—
Delaware	27.1	22.7	31.2	22.7	43.1	37.6	—	49.4	—
District of Columbia	20.9	16.4	24.7	7.3	28.4	19.4	—	22.0	—
Florida	27.9	25.7	30.0	24.4	37.2	31.5	30.0	34.6	—
Georgia	25.7	22.5	28.6	21.8	32.0	—	—	40.4	23.7
Hawaii	16.1	13.9	18.3	9.7	5.2	20.9	—	17.5	14.4
Idaho	19.3	18.5	20.1	19.0	—	—	18.8	29.0	12.9
Illinois	28.6	24.7	32.3	24.0	34.4	26.3	—	47.0	—
Indiana	27.5	23.9	30.8	26.4	33.5	25.0	—	37.8	27.3
Iowa	21.8	20.4	23.1	21.7	—	—	—	30.9	—
Kansas	22.5	21.2	23.8	21.5	20.2	—	—	34.2	21.6
Kentucky	26.6	23.8	29.2	26.7	27.7	—	—	28.3	—
Louisiana	33.5	30.5	36.1	29.0	43.3	—	35.2	39.9	34.9
Maine	25.8	24.0	27.5	25.9	—	—	—	—	—
Maryland	23.0	18.7	26.9	20.3	27.9	28.6	—	25.3	—
Massachusetts	20.8	18.8	22.6	18.0	29.2	26.5	—	45.2	—
Michigan	24.1	21.2	26.7	22.2	32.2	18.6	—	28.4	34.1
Minnesota	16.2	15.1	17.3	15.7	31.1	20.9	—	23.6	—
Mississippi	32.5	27.7	36.7	29.4	36.2	—	—	36.9	—
Missouri	26.5	24.7	28.2	25.7	35.7	—	22.4	23.9	22.5
Montana	19.2	18.8	19.6	18.9	—	—	25.6	10.0	—
Nebraska	22.0	20.9	23.0	19.8	39.8	—	—	38.5	—
Nevada	24.8	21.2	28.5	20.3	27.1	37.5	—	37.9	20.1
New Hampshire	19.9	18.2	21.5	19.4	—	—	25.7	31.5	—
New Jersey	26.0	23.7	28.0	20.3	36.1	33.7	—	40.2	—
New Mexico	23.0	19.6	26.3	18.1	21.2	—	25.4	29.4	—
New York	25.1	20.6	29.0	20.4	28.7	26.7	—	37.5	31.1
North Carolina	29.5	25.3	33.3	25.6	36.1	26.0	30.6	52.9	36.4
North Dakota	21.7	21.5	21.9	20.9	—	—	37.3	—	—
Ohio	25.4	21.8	28.6	24.8	33.3	—	—	26.5	—
Oklahoma	30.6	27.2	33.8	28.6	39.3	31.3	31.1	43.6	36.6
Oregon	17.9	16.8	18.8	16.5	—	14.6	—	29.5	20.6
Pennsylvania	24.4	20.9	27.5	22.5	36.5	38.1	19.3	33.3	31.5
Rhode Island	24.6	20.6	28.1	22.2	26.1	—	—	43.0	—
South Carolina	24.6	21.9	27.1	21.3	30.5	—	—	30.2	33.5
South Dakota	23.8	22.6	24.9	23.4	—	—	32.7	21.2	—
Tennessee	33.6	31.2	35.7	32.3	39.7	—	—	41.6	—
Texas	29.3	26.3	32.1	22.5	26.7	27.9	24.1	42.8	23.3
Utah	18.9	17.8	20.0	17.6	—	—	—	26.6	—
Vermont	18.3	17.4	19.2	18.1	—	—	—	16.3	—
Virginia	24.4	20.2	28.3	21.5	35.8	31.6	—	25.7	19.9
Washington	15.0	13.6	16.3	13.7	17.1	20.5	21.8	28.6	19.3
West Virginia	28.4	25.9	30.8	28.3	31.2	—	—	—	28.8
Wisconsin	20.0	16.9	23.0	19.0	40.2	—	31.9	23.9	—
Wyoming	20.4	20.1	20.6	20.1	—	—	—	25.0	—
United States	25.0	22.1	27.7	21.8	32.7	24.5	28.2	36.6	22.7

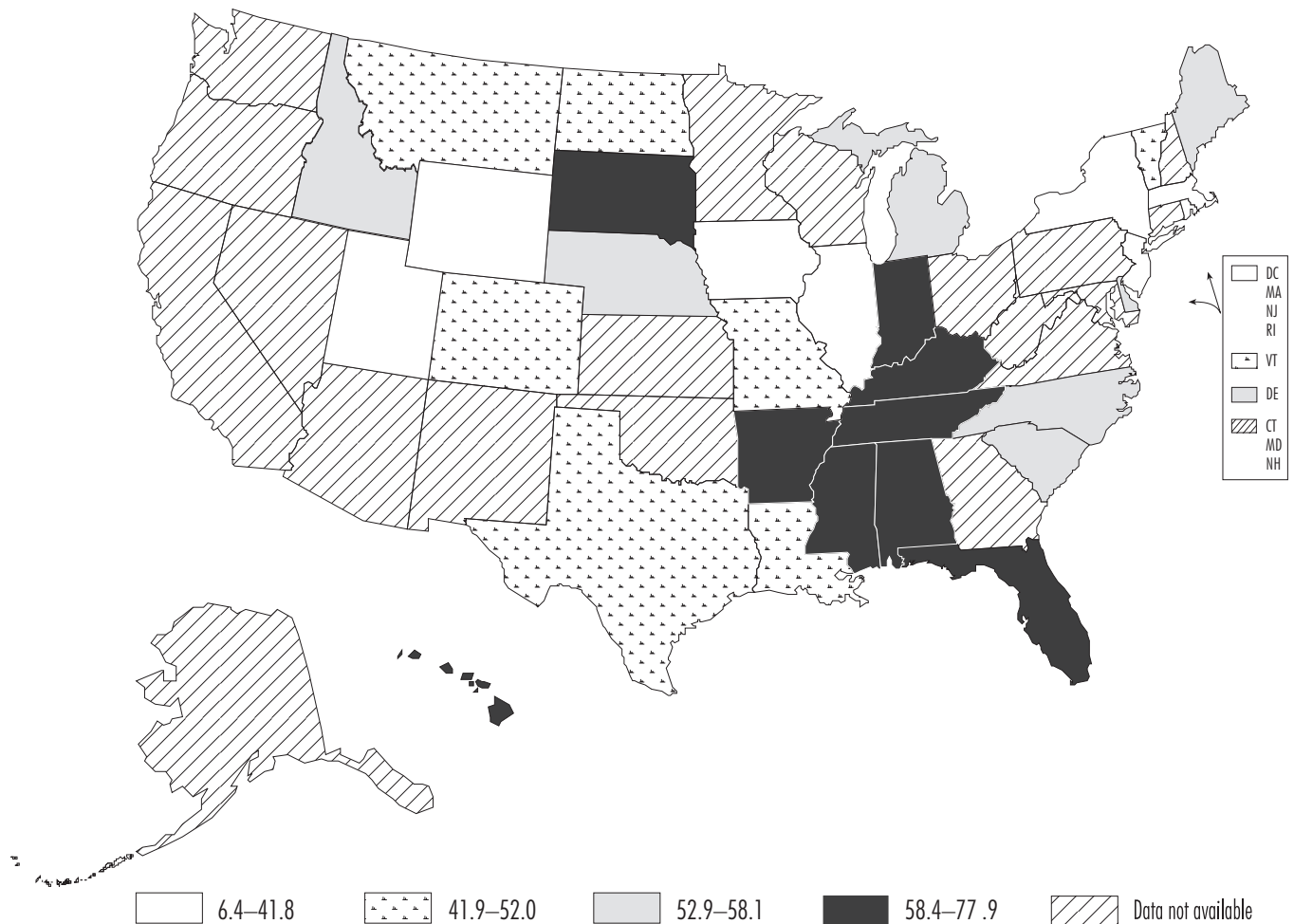
*No exercise, recreation, or physical activity (other than regular job duties) during the previous month. †A dash indicates that the state sample had too few respondents (fewer than 50) in this category to calculate a stable estimate. Source: CDC, Behavioral Risk Factor Surveillance System.

Lack of Enrollment in Physical Education Class Among High School Students

Regular physical activity in childhood and adolescence improves strength and endurance, helps build healthy bones and muscles, helps control weight, reduces anxiety and stress, increases self-esteem, and may improve blood pressure and cholesterol levels. High school physical education (PE) classes are important for ensuring that young people have a minimal, regular amount of physical activity and for establishing physical activity patterns that may be carried into adulthood.

- In 2001, 48% of U.S. high school students were not enrolled in a PE class.
- Among high school students in 2001, the percentage who attended PE class one or more days during an average school week declined with each successive grade, from 74% of 9th graders to 31% of 12 graders.
- The percentage of high school students who reported not being enrolled in a PE class in the states that collected this information in 2001 ranged from 6% in New York to 78% in South Dakota.

Percentage of High School Students Who Reported Not Being Enrolled in Physical Education Class, 2001



Source: CDC, Youth Risk Behavior Surveillance System.

Percentage of High School Students Who Reported Not Being Enrolled in Physical Education Classes, by Sex, Race, and Ethnicity, 2001

State*	Total	Male	Female	White	Black [†]	Hispanic [†]	Other [†]
Alabama	60.8	50.1	71.2	62.6	57.3	—	—
Alaska							
Arizona							
Arkansas	63.5	61.6	65.4	64.3	62.3	—	—
California							
Colorado [†]	49.1	43.2	55.6	52.6	—	51.1	—
Connecticut							
Delaware	57.9	56.6	59.4	61.9	50.4	57.0	51.9
District of Columbia							
Florida	58.4	50.7	66.3	61.9	49.0	58.5	61.2
Georgia							
Hawaii [‡]	58.5	50.1	65.0	48.1	—	—	59.9
Idaho	56.9	51.4	62.8	58.5	—	45.3	48.0
Illinois [†]	18.0	18.7	17.3	17.4	—	—	—
Indiana [†]	62.0	54.0	68.7	63.3	—	—	—
Iowa [†]	20.0	16.0	24.0	20.1	—	—	—
Kansas							
Kentucky [†]	71.0	63.1	78.3	72.7	—	—	—
Louisiana ^{†2}	41.9	33.9	48.0	45.8	39.4	—	—
Maine	58.1	58.0	58.2	58.4	—	—	42.1
Maryland							
Massachusetts	32.0	30.5	33.5	31.3	33.2	34.8	33.1
Michigan	55.9	50.0	62.0	57.2	48.7	54.1	52.1
Minnesota							
Mississippi	68.3	52.7	82.2	74.0	61.5	—	—
Missouri	44.1	37.8	50.7	42.8	51.5	—	—
Montana	47.7	44.4	51.7	49.0	—	—	38.2
Nebraska [†]	57.0	47.6	66.4	57.1	—	—	—
Nevada	NA	NA	NA	NA	NA	NA	NA
New Hampshire [†]	NA	NA	NA	NA	NA	NA	NA
New Jersey	7.6	7.6	7.5	7.2	6.0	9.8	12.8
New Mexico							
New York ^{†3}	6.4	7.6	5.1	5.7	—	—	12.9
North Carolina	52.9	43.5	62.2	56.5	45.3	—	51.0
North Dakota	52.0	47.8	56.6	53.4	—	—	—
Ohio							
Oklahoma							
Oregon							
Pennsylvania							
Rhode Island	11.9	12.1	11.7	8.5	23.1	25.5	25.4
South Carolina [†]	54.1	45.4	62.4	55.0	54.8	—	47.9
South Dakota	77.9	72.8	83.0	78.9	—	—	71.3
Tennessee [†]	58.4	54.2	62.8	60.1	52.4	—	—
Texas	52.0	48.3	55.9	49.8	49.0	56.5	39.8
Utah	41.0	38.3	43.8	41.1	—	—	32.4
Vermont	50.9	47.4	54.7	NA	NA	NA	NA
Virginia							
Washington							
West Virginia							
Wisconsin	NA	NA	NA	NA	NA	NA	NA
Wyoming	41.8	34.0	50.0	42.1	—	43.6	27.4
United States	48.3	44.4	52.0	51.7	39.5	41.6	43.6

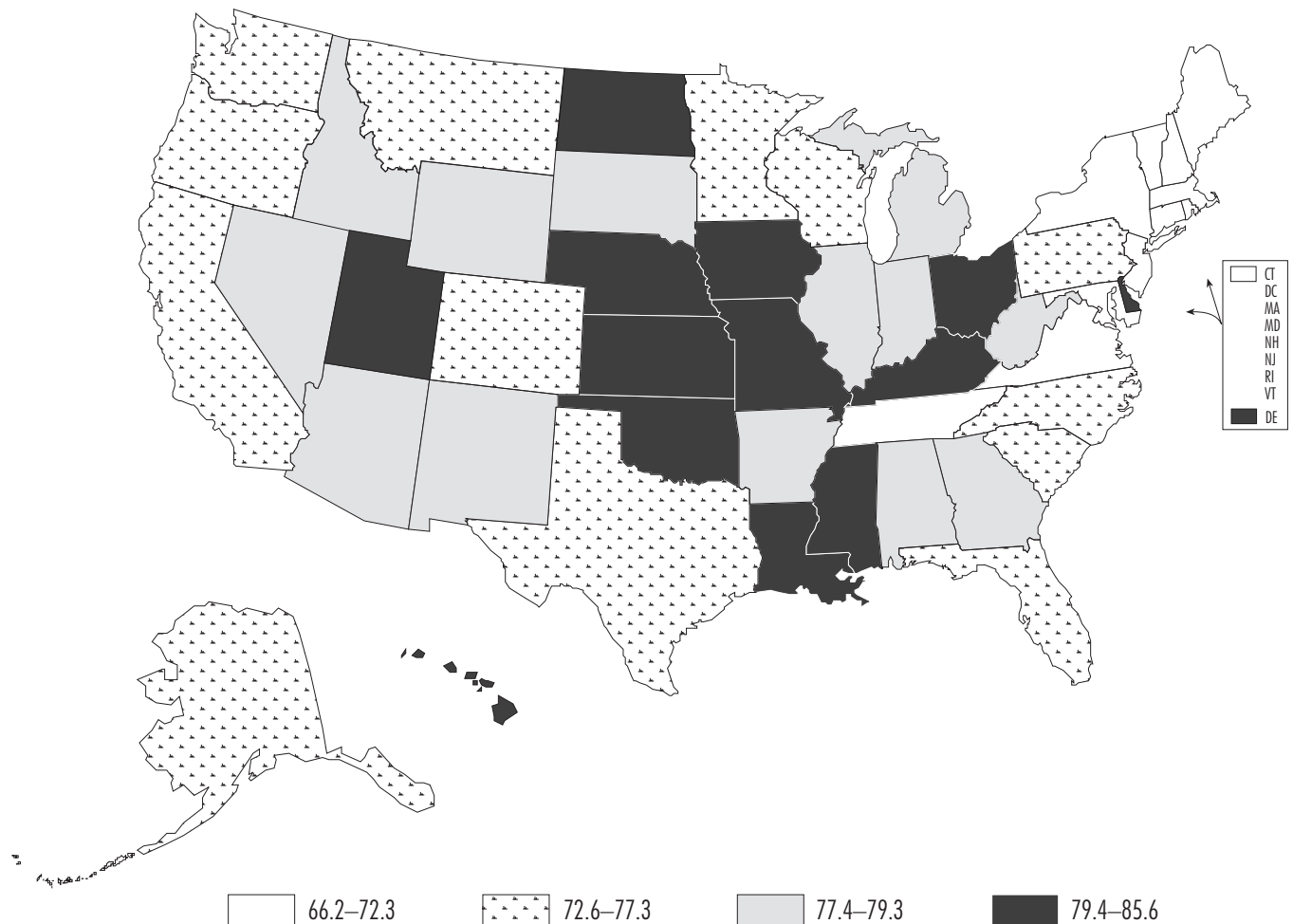
*States with no data shown did not conduct a Youth Risk Behavior Survey in 2001. †A dash indicates that the state sample had too few respondents (fewer than 50) in this category to calculate a stable estimate. ‡Unweighted data. NA—State did not ask this question or data was not available. †Excludes students from Chicago. ‡Excludes students from New Orleans. †Excludes students from New York City. Source: CDC, Youth Risk Behavior Surveillance System.

Poor Nutrition Among Adults

Good nutrition, including a diet that is low in saturated fats and contains five or more servings of fruits and vegetables each day, plays a key role in maintaining good health. Improving the American diet could extend Americans' productive life span and reduce their risk for chronic diseases, including heart disease, stroke, some types of cancers, diabetes, and osteoporosis.

- Poor nutrition and lack of physical exercise are associated with at least 300,000 deaths each year in the United States.
- In 2002, more than three-fourths of U.S. adults reported not eating recommended amounts of fruits and vegetables daily.
- In 2002, the percentage of adults who did not eat the recommended amounts of fruits and vegetables ranged from 66% in the District of Columbia to 86% in Oklahoma.

Percentage of Adults Who Reported Eating Fewer Than Five Servings of Fruits and Vegetables per Day, 2002



Source: CDC, Behavioral Risk Factor Surveillance System.

Percentage of Adults Who Reported Eating Fewer Than Five Servings of Fruits and Vegetables per Day, by Sex, Race, and Ethnicity, 2002

State	Total	Male	Female	White	Black*	Asian/Pacific Islander*	American Indian/ Alaska Native*	Hispanic*	Multiracial*
Alabama	78.9	82.0	76.2	79.1	79.8	—	—	71.9	—
Alaska	77.2	79.9	74.2	78.3	—	59.0	77.7	71.5	74.3
Arizona	77.4	83.4	71.5	76.1	95.3	—	82.3	78.9	—
Arkansas	79.3	83.7	75.4	79.2	79.7	—	86.5	82.1	79.9
California	72.6	77.5	67.8	72.2	72.5	70.3	—	74.2	67.3
Colorado	76.1	82.9	69.4	75.2	81.1	67.7	—	80.9	81.7
Connecticut	69.7	74.2	65.6	69.5	68.2	71.3	—	71.3	—
Delaware	80.5	86.0	75.6	79.9	87.4	80.3	—	79.1	—
District of Columbia	66.2	71.6	61.6	63.2	69.4	69.3	—	63.9	—
Florida	72.6	76.7	68.8	72.5	72.6	69.8	73.3	74.5	—
Georgia	77.4	80.4	74.6	76.7	79.8	—	—	81.7	84.3
Hawaii	79.6	83.6	75.6	76.2	75.2	81.7	—	74.6	82.2
Idaho	78.4	83.5	73.4	78.7	—	—	72.1	81.1	74.1
Illinois	79.1	82.6	75.7	78.3	83.2	63.8	—	83.7	—
Indiana	78.3	82.8	74.1	78.8	77.3	76.6	—	78.9	65.1
Iowa	80.2	85.2	75.7	80.0	—	—	—	84.2	—
Kansas	81.8	85.8	77.9	81.6	82.3	—	—	87.7	73.7
Kentucky	79.8	82.8	77.0	79.7	89.3	—	—	81.7	—
Louisiana	82.8	86.4	79.6	82.9	83.2	—	81.9	79.9	88.8
Maine	70.6	77.2	64.5	70.2	—	—	—	—	—
Maryland	70.3	74.0	67.0	70.5	72.6	64.3	—	61.0	—
Massachusetts	70.3	76.1	65.2	69.9	78.8	68.0	—	72.6	—
Michigan	77.4	81.7	73.3	77.7	77.0	52.9	—	84.3	71.3
Minnesota	77.3	83.9	71.0	77.8	73.7	63.7	—	69.5	—
Mississippi	80.8	83.1	78.8	80.4	82.3	—	—	74.3	—
Missouri	80.8	84.9	77.1	81.0	85.0	—	67.5	81.7	82.1
Montana	77.3	82.3	72.5	77.5	—	—	74.5	84.7	—
Nebraska	82.0	87.2	77.1	82.3	91.0	—	—	79.0	—
Nevada	77.7	83.1	72.2	79.7	75.6	64.4	—	79.0	64.9
New Hampshire	71.5	78.8	64.6	71.3	—	—	73.6	75.8	—
New Jersey	71.8	74.0	69.7	71.0	76.9	69.8	—	74.2	—
New Mexico	78.1	82.2	74.3	76.2	66.8	—	74.9	81.9	—
New York	72.3	77.4	67.8	72.8	73.7	56.7	—	74.8	65.7
North Carolina	76.4	79.4	73.6	73.8	80.9	72.2	91.8	90.7	75.0
North Dakota	79.6	88.2	71.4	79.4	—	—	82.2	—	—
Ohio	79.5	83.5	75.8	79.4	79.9	—	—	75.6	—
Oklahoma	85.6	88.2	83.2	85.9	86.9	77.6	87.5	82.7	80.9
Oregon	73.7	79.5	68.1	74.3	—	66.1	—	76.2	64.9
Pennsylvania	74.6	81.0	68.9	75.3	73.4	64.8	74.3	71.9	59.1
Rhode Island	71.4	75.2	68.0	70.9	74.9	—	—	76.6	—
South Carolina	76.1	81.5	71.1	76.0	77.4	—	—	73.6	77.8
South Dakota	79.3	84.6	74.1	79.2	—	—	76.4	82.0	—
Tennessee	71.6	74.4	69.0	71.7	78.3	—	—	58.4	—
Texas	76.1	80.9	71.5	76.7	73.6	71.7	58.3	77.7	60.6
Utah	79.4	86.7	72.2	79.4	—	—	—	79.1	—
Vermont	70.9	78.5	63.8	71.0	—	—	—	72.6	—
Virginia	72.1	75.5	68.9	72.3	76.0	58.0	—	70.8	69.4
Washington	76.2	83.4	69.2	76.3	76.2	72.8	74.7	77.4	76.0
West Virginia	78.7	84.3	73.6	79.1	91.8	—	—	—	75.6
Wisconsin	76.5	81.2	72.0	76.5	72.5	—	86.7	78.4	—
Wyoming	77.9	83.1	72.7	78.2	—	—	—	75.8	—
United States	75.5	80.1	71.2	75.7	77.1	69.1	75.4	76.2	71.0

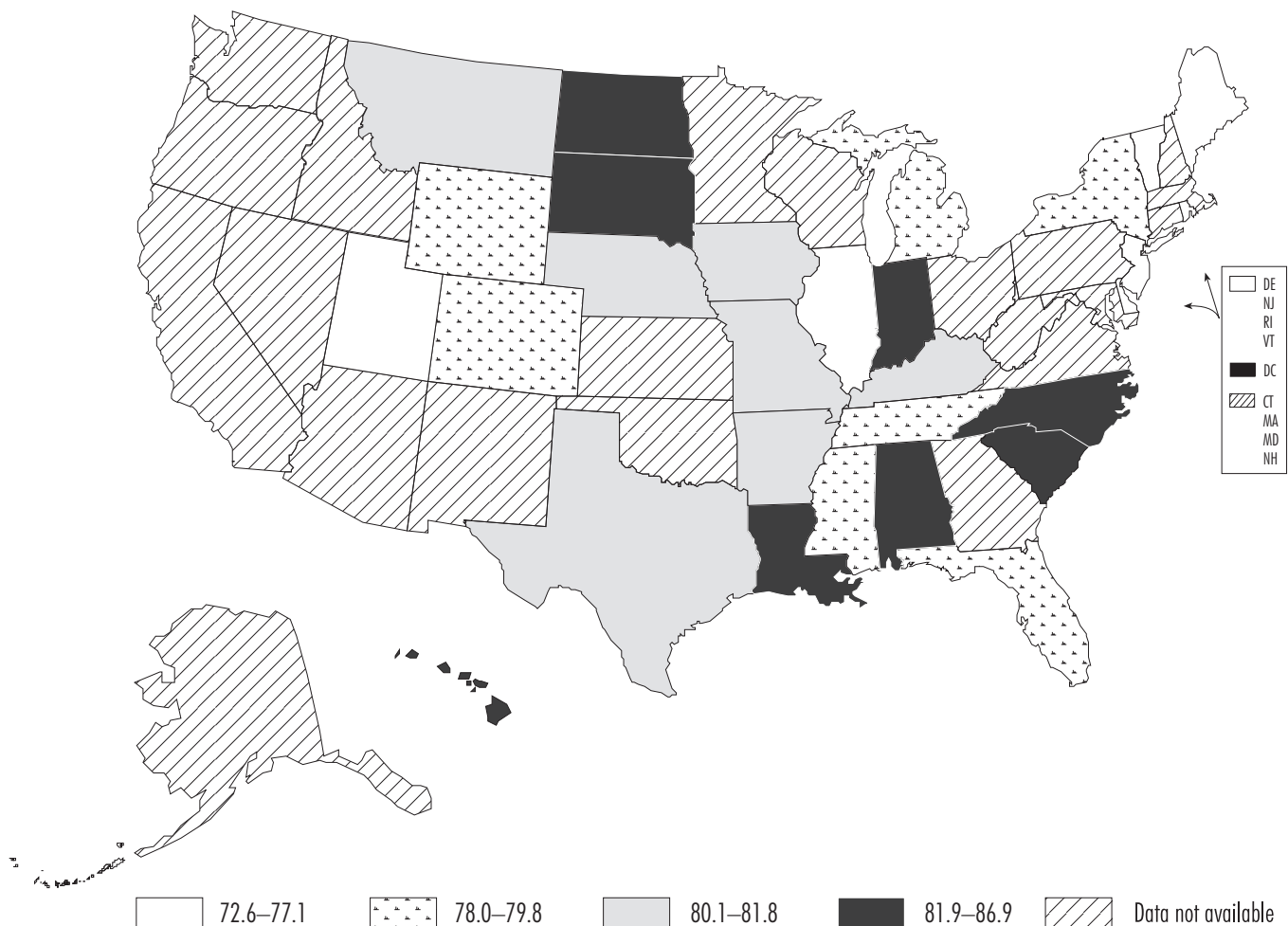
* A dash indicates that the state sample had too few respondents (fewer than 50) in this category to calculate a stable estimate. Source: CDC, Behavioral Risk Factor Surveillance System.

Poor Nutrition Among High School Students

Poor eating habits (diets high in fat and low in fruits, vegetables, and grains) are often established during youth and carried into adulthood, thus increasing a person's risk for cancer and other chronic diseases. Along with physical inactivity, poor eating habits are a root cause of overweight and obesity.

- In 2001, 79% of U.S. high school students ate fewer than five servings of fruits and vegetables per day.
- In the states that collected this information, the percentage of high school students who reported not eating five or more servings of fruits and vegetables a day in 2001 ranged from 73% in Rhode Island to 87% in Alabama.

Percentage of High School Students Who Reported Eating Fewer Than Five Servings of Fruit and Vegetables, 2001



Source: CDC, Youth Risk Behavior Surveillance System.

Percentage of High School Students Who Reported Eating Fewer Than Five Servings of Fruits and Vegetables per Day, by Sex, Race, and Ethnicity, 2001

State*	Total	Male	Female	White	Black [†]	Hispanic [†]	Other [†]
Alabama	86.9	86.0	87.8	89.4	83.6	—	—
Alaska							
Arizona							
Arkansas	80.1	78.2	82.1	82.3	73.7	—	—
California							
Colorado [†]	78.0	77.0	79.0	78.0	—	82.2	—
Connecticut							
Delaware	75.1	73.0	76.9	77.2	73.3	67.7	69.7
District of Columbia							
Florida	79.7	77.4	82.2	81.4	77.4	79.2	69.1
Georgia							
Hawaii [‡]	83.6	82.3	84.5	81.8	—	—	83.5
Idaho	81.9	82.5	81.2	82.6	—	76.9	79.3
Illinois [‡]	75.2	74.1	75.9	76.5	—	—	—
Indiana [†]	83.8	80.2	86.9	84.1	—	—	—
Iowa [†]	81.1	77.6	85.3	81.5	—	—	—
Kansas							
Kentucky [†]	80.8	74.8	86.2	82.5			
Louisiana [‡]	83.1	79.0	86.0	87.6	77.7	—	—
Maine	75.0	74.6	75.3	75.5	—	—	71.6
Maryland							
Massachusetts	NA	NA	NA	NA	NA	NA	NA
Michigan	79.4	78.0	80.7	79.2	83.1	76.4	76.0
Minnesota							
Mississippi	79.2	76.2	82.2	84.7	73.7	—	—
Missouri	81.3	78.7	84.0	82.6	75.1	—	—
Montana	80.6	80.1	81.5	80.7	—	—	79.6
Nebraska [†]	81.8	79.4	84.2	82.3	—	—	—
Nevada	NA	NA	NA	NA	NA	NA	NA
New Hampshire [†]	NA	NA	NA	NA	NA	NA	NA
New Jersey	74.1	71.0	77.1	75.0	73.9	77.3	67.5
New Mexico							
New York [‡]	79.3	78.1	80.6	80.2	—	—	71.6
North Carolina	82.2	80.8	83.7	82.8	81.1	79.5	81.6
North Dakota	81.9	80.0	83.9	83.0	—	—	—
Ohio							
Oklahoma							
Oregon							
Pennsylvania							
Rhode Island	72.6	68.1	77.1	73.4	69.2	70.7	64.9
South Carolina [†]	82.7	81.2	84.2	85.2	80.0	—	82.8
South Dakota	84.1	81.3	86.9	84.8	—	—	79.5
Tennessee [†]	79.8	76.3	83.3	80.5	79.1	—	—
Texas	80.1	77.6	82.7	82.1	76.0	79.4	68.1
Utah	77.1	74.9	79.6	78.7	—	—	71.8
Vermont	73.6	72.3	75.3	NA	NA	NA	NA
Virginia							
Washington							
West Virginia							
Wisconsin	NA	NA	NA	NA	NA	NA	NA
Wyoming	79.0	75.4	82.7	79.3	—	77.9	69.8
United States	78.6	76.7	80.3	79.8	75.5	76.8	75.3

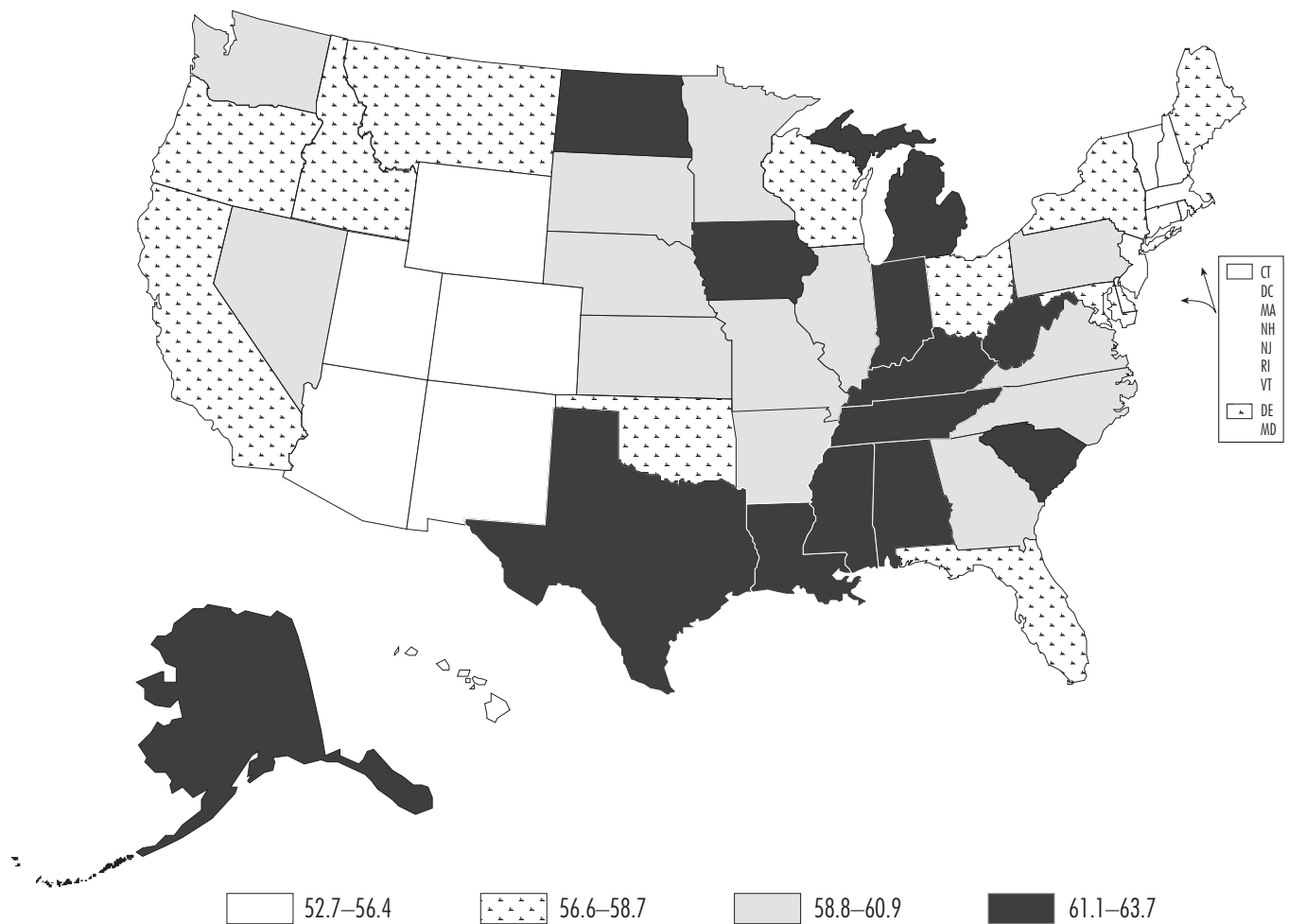
*States with no data shown did not conduct a Youth Risk Behavior Survey in 2001. †A dash indicates that the state sample had too few respondents (fewer than 100) in this category to calculate a stable estimate. ‡Unweighted data. NA—State did not ask this question or data was not available. †Excludes students from Chicago. ‡Excludes students from New Orleans. ‡Excludes students from New York City. Source: CDC, Youth Risk Behavior Surveillance System.

Overweight and Obesity Among Adults

Obesity has reached epidemic proportions in the United States, where it has more than doubled in the past two decades. People who are overweight (body mass index [BMI] ≥ 25) or obese (BMI ≥ 30) are at increased risk for heart disease, high blood pressure, diabetes, arthritis-related disabilities, and some cancers. In 2000, the direct and indirect cost attributable to obesity in the United States was \$117 billion.

- In 2002, 59% of American adults were overweight on the basis of self-reported weight and height.
- In 2002, men were more likely than women to be overweight (67% vs. 51%) on the basis of self-reported weight and height.
- The percentage of adults who reported being overweight on the basis of weight and height in 2002 ranged from 53% in Hawaii and the District of Columbia to 64% in West Virginia.

Percentage of Adults Who Were Overweight or Obese, 2002



Source: CDC, Behavioral Risk Factor Surveillance System.

Percentage of Adults Who Reported Being Overweight or Obese,* by Sex, Race, and Ethnicity, 2002

State	Total	Male	Female	White	Black [†]	Asian/Pacific Islander [†]	American Indian/ Alaska Native [†]	Hispanic [†]	Multiracial [†]
Alabama	62.7	70.9	55.0	60.9	68.8	—	—	63.8	—
Alaska	61.1	70.2	51.0	59.2	—	52.4	69.2	63.7	63.5
Arizona	56.2	66.9	45.6	56.6	—	—	55.3	58.3	—
Arkansas	60.9	67.3	54.8	60.1	71.6	—	58.7	57.5	66.4
California	56.7	63.9	49.5	52.6	66.7	38.0	—	66.1	64.6
Colorado	53.5	63.9	42.6	50.2	72.0	45.3	—	65.3	58.0
Connecticut	55.0	67.3	43.0	54.0	69.6	29.5	—	63.0	—
Delaware	58.6	67.8	49.7	56.3	74.3	40.3	—	58.8	—
District of Columbia	52.7	53.7	51.9	32.8	67.4	—	—	33.8	—
Florida	57.0	65.0	49.2	55.7	68.4	35.8	66.0	57.7	—
Georgia	58.9	64.6	53.4	55.7	66.7	—	—	69.0	55.9
Hawaii	53.1	65.8	40.3	51.4	67.3	49.3	—	50.8	65.4
Idaho	57.3	65.8	48.4	57.1	—	—	63.4	61.3	61.8
Illinois	59.3	67.7	51.1	57.2	70.6	36.6	—	66.1	—
Indiana	61.3	69.8	52.9	60.7	70.5	39.1	—	61.1	65.6
Iowa	61.2	69.9	52.6	61.9	—	—	—	55.0	—
Kansas	60.2	69.5	50.8	60.5	67.2	—	—	62.9	67.7
Kentucky	62.5	70.7	54.5	61.7	71.8	—	—	59.4	—
Louisiana	61.1	66.8	55.9	58.4	68.0	—	65.4	57.9	74.3
Maine	58.6	67.7	49.7	58.5	—	—	—	—	—
Maryland	57.9	65.5	50.6	55.5	67.3	37.5	—	50.0	—
Massachusetts	54.6	66.4	43.4	54.8	66.0	30.3	—	59.2	—
Michigan	62.2	69.6	55.2	60.7	74.6	42.1	—	61.4	65.6
Minnesota	58.9	68.0	50.0	59.0	69.3	38.9	—	57.3	—
Mississippi	63.1	68.7	57.9	60.1	70.5	—	—	57.2	—
Missouri	60.2	67.6	53.2	60.5	64.6	—	57.0	45.2	69.6
Montana	56.6	66.4	46.5	55.7	—	—	68.9	66.5	—
Nebraska	60.2	69.7	50.8	60.1	69.7	—	—	64.9	—
Nevada	58.9	69.3	47.7	57.9	64.6	39.1	—	63.8	62.3
New Hampshire	56.3	67.3	45.4	56.6	—	—	—	54.9	—
New Jersey	56.3	64.8	48.0	55.7	68.2	40.9	—	55.7	—
New Mexico	56.4	63.5	49.5	51.9	68.6	—	67.0	61.2	—
New York	57.3	64.1	51.0	56.3	70.2	31.5	—	59.4	—
North Carolina	59.0	66.1	52.1	56.8	70.8	28.7	66.2	55.7	72.1
North Dakota	61.6	71.6	51.5	61.2	—	—	71.4	—	—
Ohio	58.7	68.5	49.3	59.1	60.0	—	—	62.2	—
Oklahoma	58.7	67.5	50.0	58.2	68.5	31.5	58.1	58.8	70.2
Oregon	57.2	64.1	50.3	56.2	—	32.0	—	70.4	64.4
Pennsylvania	59.6	68.2	51.3	59.5	70.0	27.7	55.3	56.5	52.0
Rhode Island	56.1	67.3	45.7	55.4	63.3	—	—	61.1	—
South Carolina	61.4	69.7	53.4	57.7	72.2	—	—	59.2	63.8
South Dakota	60.6	70.4	50.6	60.0	—	—	74.0	63.2	—
Tennessee	61.3	69.8	53.2	59.8	69.6	—	—	59.9	—
Texas	62.8	70.4	54.9	59.1	75.5	25.5	67.3	69.8	55.6
Utah	53.6	64.8	42.3	52.9	—	—	—	65.4	—
Vermont	54.5	63.6	45.6	54.6	—	—	—	50.7	—
Virginia	58.8	65.9	51.8	57.6	73.0	36.8	—	53.4	59.1
Washington	58.9	68.8	48.9	58.5	75.0	41.4	73.2	60.2	61.9
West Virginia	63.7	71.4	56.2	63.4	70.2	—	—	—	66.7
Wisconsin	57.9	67.7	48.1	57.3	73.2	—	66.7	63.8	—
Wyoming	55.9	65.1	46.5	56.0	—	—	—	57.4	—
United States	58.7	66.9	50.7	57.4	69.3	37.2	63.9	63.7	61.5

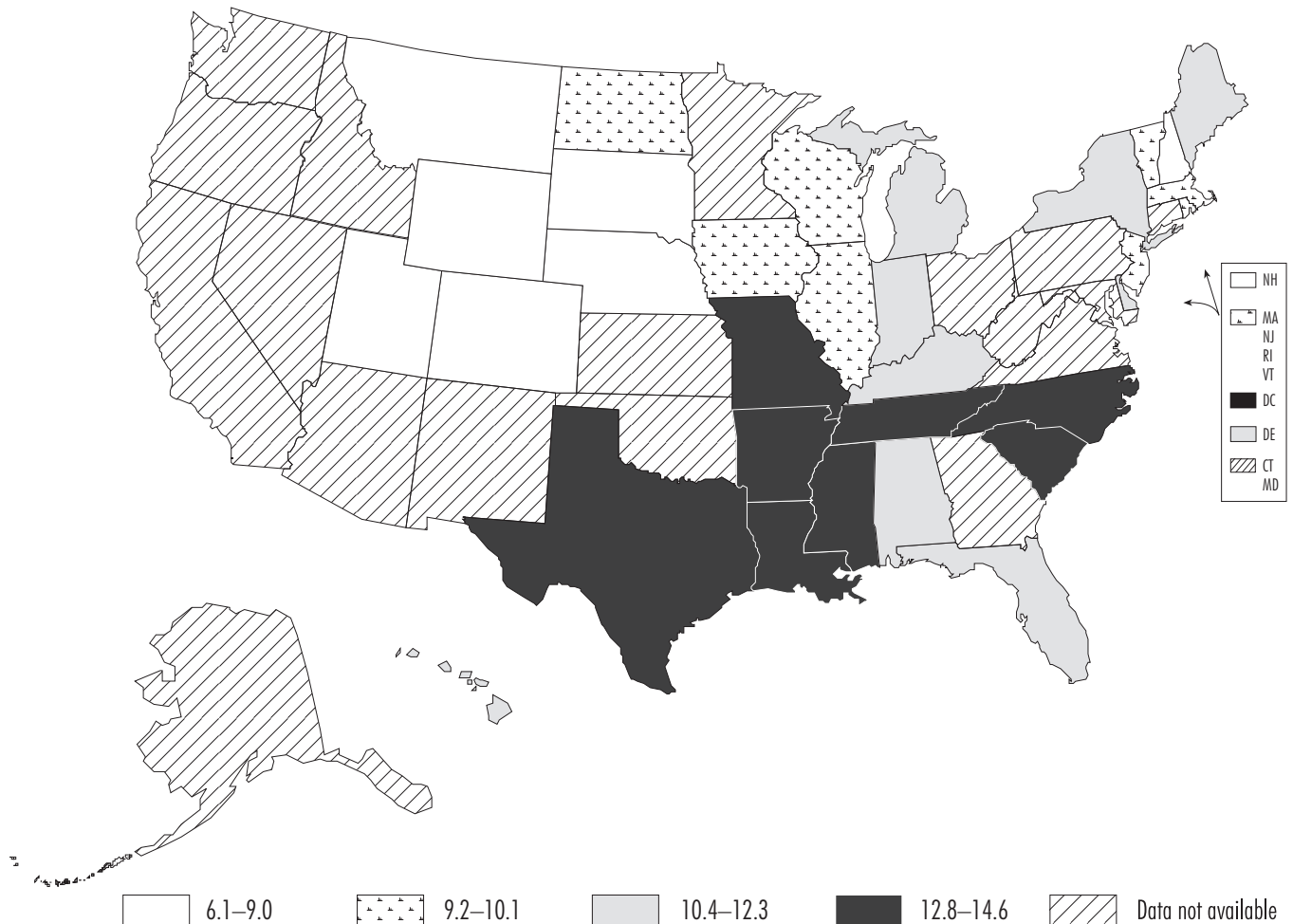
*Body mass index (BMI) \geq 25.0. BMI is calculated by dividing weight in kg by height in meters squared (kg/m²). [†]A dash indicates that the state sample had too few respondents (fewer than 50) in this category to calculate a stable estimate. Source: CDC, Behavioral Risk Factor Surveillance System.

Overweight Among High School Students

The obesity epidemic is not limited to adults. According to data from the National Health and Nutrition Examination Survey, the percentage of adolescents who are overweight has more than doubled during the past two decades. Overweight or obesity that begins in childhood or adolescence may continue into adulthood and increase the risk later in life for heart disease, gallbladder disease, and some types of cancer.

- In 2001, 11% of U.S. high school students were overweight on the basis of self-reported weight and height, and 14% were at risk of becoming overweight.
- In 2001, the percentage of high school students who reported being overweight in the states collecting this information ranged from 6% in Montana and Utah to 14% in Arkansas, Mississippi, and Texas.
- Being overweight was reported by a greater proportion of male students (14%) than female students (7%).

Percentage of High School Students Who Reported Being Overweight,* 2001



*Body mass index \geq 95th percentile by age and sex among participants in the First National Health and Nutrition Examination Survey (1971–1975).
Source: CDC, Youth Risk Behavior Surveillance System.

Percentage of High School Students Who Reported Being Overweight,* by Sex, Race, and Ethnicity, 2001

State†	Total	Male	Female	White	Black‡	Hispanic‡	Other‡
Alabama	12.3	16.9	7.6	10.3	16.3	—	—
Alaska							
Arizona							
Arkansas	13.8	18.7	8.7	12.4	18.6	—	—
California							
Colorado§	7.1	11.1	2.5	5.6	—	12.8	—
Connecticut							
Delaware	10.8	12.9	8.9	8.7	15.7	12.9	12.6
District of Columbia							
Florida	10.4	13.6	6.8	9.5	11.7	11.3	8.2
Georgia							
Hawaii§	12.1	16.6	8.3	6.7	—	—	12.9
Idaho	7.2	9.7	4.5	7.0	—	8.8	9.4
Illinois§¹	9.5	15.3	5.4	8.6	—	—	—
Indiana§	11.4	15.2	8.0	10.5	—	—	—
Iowa§	9.8	12.8	6.7	9.1	—	—	—
Kansas							
Kentucky§	12.3	16.0	8.9	12.2	—	—	—
Louisiana§²	13.0	17.0	9.8	11.7	15.6	—	—
Maine	10.4	14.8	5.5	10.3	—	—	16.0
Maryland							
Massachusetts	10.0	13.5	6.3	8.9	16.9	13.6	9.3
Michigan	10.7	14.0	7.2	9.6	16.8	17.2	11.0
Minnesota							
Mississippi	14.0	18.4	9.9	12.8	15.3	—	—
Missouri	12.8	17.0	8.5	11.6	18.6	—	—
Montana	6.1	8.3	3.7	5.6	—	—	10.7
Nebraska§	9.0	12.2	5.6	8.3	—	—	—
Nevada	NA	NA	NA	NA	NA	NA	NA
New Hampshire§	8.6	12.0	5.3	8.7	—	—	6.5
New Jersey	10.1	14.0	6.1	9.0	13.6	13.1	4.8
New Mexico							
New York§³	10.6	16.1	4.5	9.5	—	—	—
North Carolina	12.9	16.6	9.0	11.9	15.5	9.1	9.9
North Dakota	9.2	13.8	4.2	7.9	—	—	—
Ohio							
Oklahoma							
Oregon							
Pennsylvania							
Rhode Island	9.2	14.8	3.5	8.6	15.2	10.6	10.0
South Carolina§	12.9	16.3	9.4	10.7	16.3	—	10.8
South Dakota	7.6	10.7	4.7	6.9	—	—	12.9
Tennessee§	13.2	16.3	10.1	11.9	19.1	—	—
Texas	14.2	19.4	8.7	10.9	17.3	17.6	8.0
Utah	6.2	9.6	2.6	6.0	—	—	10.6
Vermont	9.7	14.0	5.1	NA	NA	NA	NA
Virginia							
Washington							
West Virginia							
Wisconsin	9.6	13.3	5.6	8.9	14.2	—	12.7
Wyoming	6.6	9.3	3.7	6.2	—	7.8	13.1
United States	10.5	14.2	6.9	8.8	16.0	15.1	8.7

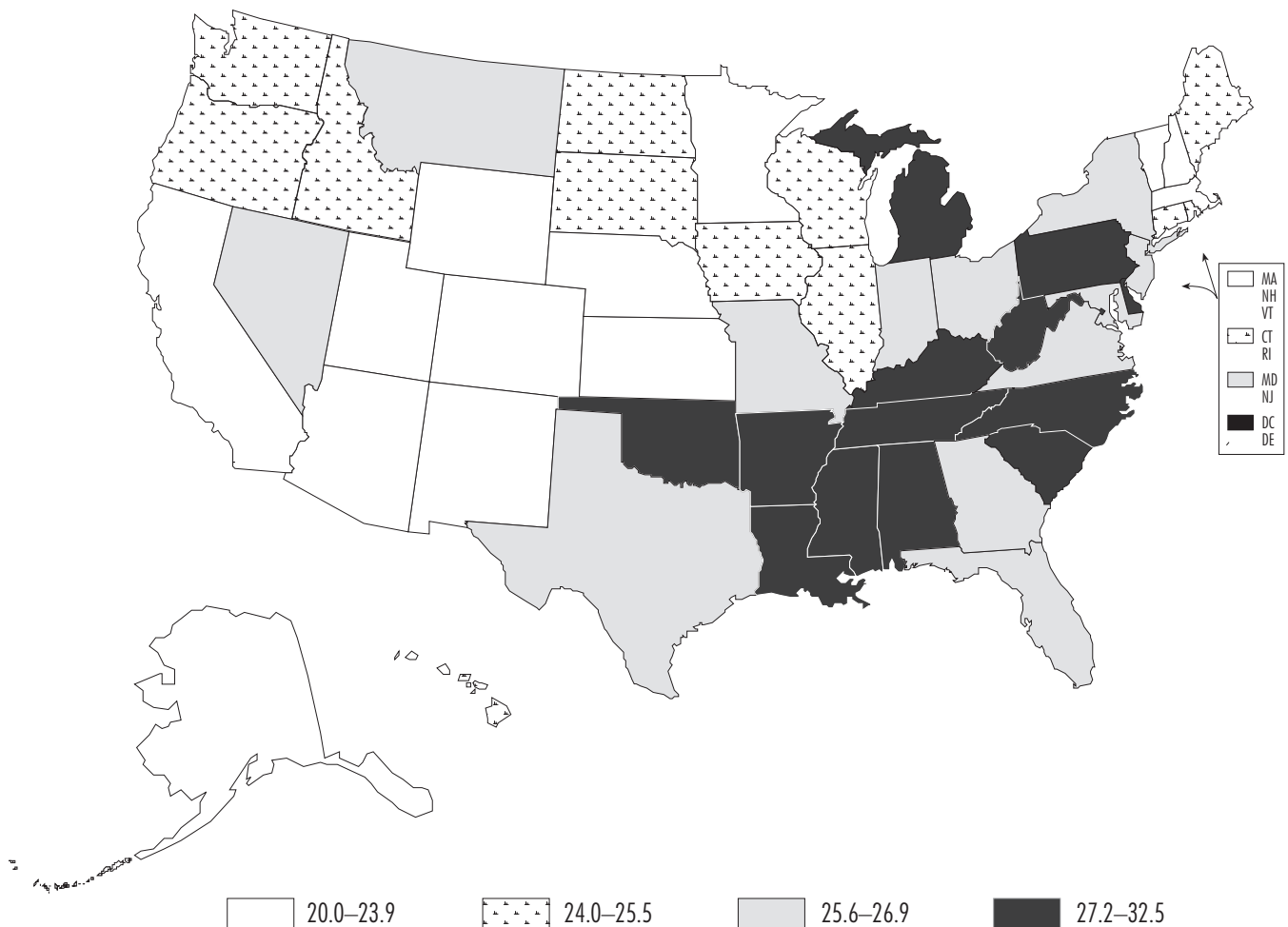
*Body mass index \geq 95th percentile by age and sex among participants in the First National Health and Nutrition Examination Survey (1971–1975). †States with no data shown did not conduct a Youth Risk Behavior Survey in 2001. ‡A dash indicates that the state sample had too few respondents (fewer than 100) in this category to calculate a stable estimate. §Unweighted data. NA—State did not ask this question or data was not available. ¹Excludes students from Chicago. ²Excludes students from New Orleans. ³Excludes students from New York City. Source: CDC, Youth Risk Behavior Surveillance System.

High Blood Pressure

High blood pressure is a major modifiable risk factor for heart disease and stroke. All adults need to be aware that having their blood pressure checked regularly is an important first step in identifying and controlling high blood pressure. Medications to reduce blood pressure levels among people with high blood pressure can reduce their risk for heart disease, stroke, and other coronary events.

- A 12-13 point reduction in blood pressure among people with high blood pressure can reduce heart attacks by 21%, strokes by 37%, and total CVD deaths by 25%.
- Fifty million Americans have high blood pressure, and another 45 million are pre-hypertensive, or at high risk of developing high blood pressure.
- Seventy percent of people with high blood pressure do not have it under control.

Percentage of Adults Who Reported Having High Blood Pressure, 2001



Source: CDC, Behavioral Risk Factor Surveillance System.

Percentage of Adults Who Reported Having High Blood Pressure, by Sex, Race, and Ethnicity, 2001

State	Total	Male	Female	White	Black*	Asian/Pacific Islander*	American Indian/ Alaska Native*	Hispanic*	Multiracial*
Alabama	31.6	29.8	33.3	29.8	37.5	—	—	33.9	—
Alaska	21.8	20.6	23.0	21.2	—	26.8	24.0	14.2	25.5
Arizona	23.6	25.7	21.7	25.2	35.3	11.6	17.1	16.8	—
Arkansas	29.7	29.4	30.0	28.6	34.4	—	—	26.9	46.1
California	23.3	22.2	24.3	24.8	42.8	19.3	—	17.7	22.6
Colorado	21.6	21.8	21.4	21.6	35.9	—	—	16.7	—
Connecticut	24.0	23.9	24.2	25.1	27.6	6.4	—	16.8	—
Delaware	27.2	27.2	27.3	27.1	32.5	—	—	13.0	47.6
District of Columbia	29.0	26.4	31.1	17.9	40.0	—	—	14.4	—
Florida	26.9	26.6	27.2	28.0	31.0	13.9	—	22.4	—
Georgia	26.9	25.7	28.1	26.3	30.5	—	—	19.5	—
Hawaii	24.1	24.0	24.1	19.2	20.6	28.3	—	15.2	24.8
Idaho	24.6	24.8	24.4	24.7	—	—	19.8	19.4	31.5
Illinois	24.8	22.8	26.5	26.1	31.5	—	—	12.7	26.7
Indiana	25.8	24.5	26.9	25.3	35.6	—	—	15.9	46.5
Iowa	25.5	24.9	26.1	25.6	—	—	—	23.8	—
Kansas	23.9	23.1	24.6	24.3	31.2	—	—	16.9	24.2
Kentucky	30.1	31.0	29.3	29.6	36.4	—	—	31.9	—
Louisiana	27.6	25.2	29.7	26.0	32.2	—	—	25.0	—
Maine	25.2	25.3	25.1	25.1	—	—	—	—	—
Maryland	26.3	26.3	26.3	25.9	30.4	19.1	—	17.8	—
Massachusetts	23.6	23.5	23.6	24.3	30.6	5.9	—	18.0	—
Michigan	27.3	27.0	27.5	27.0	34.2	6.2	—	19.4	27.3
Minnesota	22.3	22.6	22.0	22.8	22.2	7.8	—	14.0	—
Mississippi	31.3	28.8	33.6	29.1	37.0	—	—	12.8	—
Missouri	26.5	26.3	26.7	26.4	31.6	—	—	22.9	26.2
Montana	26.8	26.4	27.2	26.6	—	—	31.9	34.1	—
Nebraska	22.6	21.5	23.7	23.3	29.1	—	—	11.4	—
Nevada	25.6	25.4	25.8	25.8	28.9	—	—	21.2	25.9
New Hampshire	22.8	23.9	21.8	23.2	—	—	—	14.2	—
New Jersey	26.1	24.7	27.3	27.0	34.0	17.2	—	19.5	—
New Mexico	20.0	19.9	20.2	21.6	28.0	—	17.1	17.6	—
New York	26.0	26.5	25.5	26.8	31.9	14.6	—	21.3	—
North Carolina	27.2	25.4	28.9	25.5	37.1	7.9	19.5	19.9	35.7
North Dakota	24.1	23.5	24.7	23.9	—	—	31.1	—	—
Ohio	26.6	25.8	27.3	26.1	38.5	—	—	20.6	—
Oklahoma	28.5	29.1	28.0	28.8	32.6	—	31.7	21.3	41.0
Oregon	24.9	24.3	25.5	26.2	—	—	—	13.5	21.9
Pennsylvania	28.1	27.2	28.8	28.0	31.8	—	—	22.8	42.1
Rhode Island	25.4	25.7	25.2	26.0	33.6	—	—	17.3	—
South Carolina	28.8	28.6	29.1	27.1	34.4	—	—	22.6	—
South Dakota	24.1	23.9	24.3	24.2	—	—	24.0	25.9	12.7
Tennessee	29.3	28.4	30.1	28.6	34.8	—	—	31.0	—
Texas	25.6	23.8	27.3	28.1	35.7	10.3	—	18.9	26.8
Utah	22.3	22.5	22.2	22.8	—	—	—	14.9	—
Vermont	21.4	21.0	21.8	21.6	—	—	—	—	—
Virginia	25.8	24.8	26.7	25.2	35.4	13.6	—	7.8	21.4
Washington	24.4	25.5	23.5	24.8	27.5	14.8	30.6	21.3	26.1
West Virginia	32.5	32.5	32.4	32.2	40.5	—	—	—	36.9
Wisconsin	24.1	23.6	24.7	23.8	35.0	—	25.0	24.3	—
Wyoming	22.4	23.2	21.7	22.6	—	—	—	14.5	—
United States	25.8	25.2	26.4	26.2	34.2	16.2	25.8	18.9	27.4

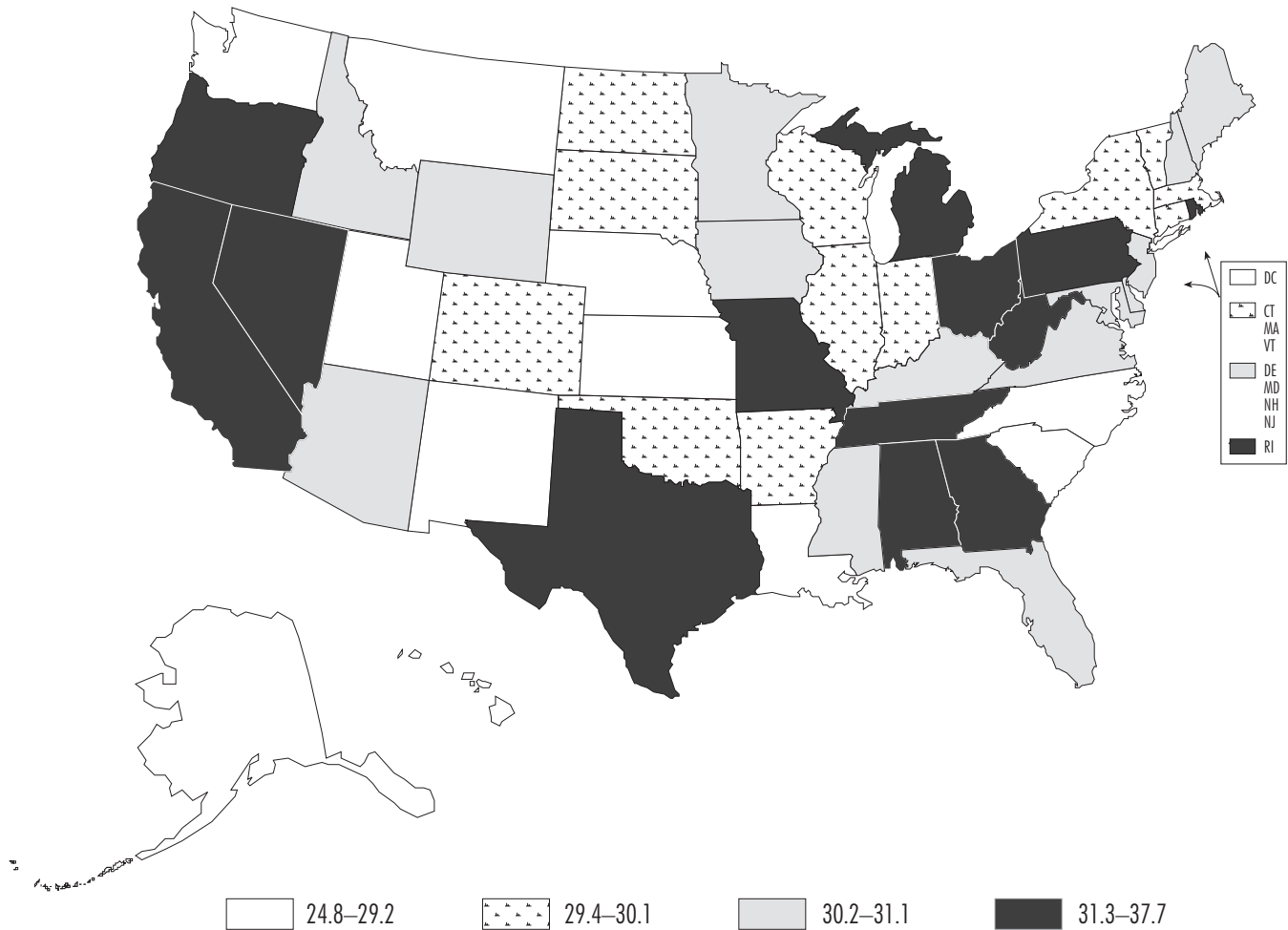
*A dash indicates that the state sample had too few respondents (fewer than 50) in this category to calculate a stable estimate. Source: CDC Behavioral Risk Factor Surveillance System.

High Blood Cholesterol

High blood cholesterol is one of the major independent risk factors for heart disease and stroke. Educating the public and the health care community about the importance of prevention through controlling cholesterol levels is critical to reducing the health and economic burden of heart disease and stroke. Current guidelines recommend that all adults have their blood cholesterol levels checked every 5 years.

- An estimated 105 million Americans have a total cholesterol level of 200mg/dL or higher, which is considered above optimal levels.
- Over 80% of those who have high blood cholesterol do not have it under control.
- A 10% decrease in total cholesterol levels may reduce the incidence of coronary heart disease by an estimated 30%.

Percentage of Adults Who Reported Having High Blood Cholesterol, 2001



Source: CDC, Behavioral Risk Factor Surveillance System.

Percentage of Adults Who Reported Having High Blood Cholesterol, by Sex, Race, and Ethnicity, 2001

State	Total	Male	Female	White	Black*	Asian/Pacific Islander*	American Indian/ Alaska Native*	Hispanic*	Multiracial*
Alabama	32.9	34.1	31.7	34.7	27.5	—	—	—	—
Alaska	28.7	28.2	29.4	29.7	—	41.4	22.4	34.0	25.4
Arizona	30.3	30.0	30.7	32.4	31.1	—	22.7	22.2	—
Arkansas	29.9	30.0	29.7	30.8	23.4	—	—	—	—
California	31.7	34.8	28.9	33.3	34.5	31.5	—	26.7	29.7
Colorado	29.4	33.0	26.2	29.6	—	—	—	26.8	—
Connecticut	29.8	30.7	29.0	30.6	24.6	23.9	—	24.0	—
Delaware	30.5	31.0	30.1	32.2	24.2	—	—	18.7	—
District of Columbia	29.0	28.0	29.9	27.6	32.7	—	—	20.0	—
Florida	31.0	30.2	31.7	32.1	32.2	—	—	26.4	—
Georgia	31.9	32.8	31.1	35.1	26.7	—	—	31.4	—
Hawaii	25.1	25.7	24.5	22.3	—	28.4	—	24.2	22.1
Idaho	30.3	31.1	29.6	30.4	—	—	—	24.3	30.0
Illinois	29.4	30.0	28.8	31.2	30.4	—	—	18.4	—
Indiana	30.1	30.4	29.8	31.0	20.5	—	—	28.4	—
Iowa	30.4	33.4	27.8	30.9	—	—	—	—	—
Kansas	29.2	28.9	29.6	30.3	20.2	—	—	21.1	—
Kentucky	31.1	31.5	30.9	32.2	16.9	—	—	37.4	—
Louisiana	27.6	27.7	27.6	29.6	22.6	—	—	23.0	—
Maine	30.3	31.4	29.4	30.5	—	—	—	—	—
Maryland	31.1	34.1	28.4	33.1	28.2	33.4	—	24.7	—
Massachusetts	29.7	31.5	28.2	30.6	26.9	21.7	—	22.8	—
Michigan	33.6	36.0	31.5	34.3	30.4	—	—	35.7	30.8
Minnesota	30.2	31.6	29.0	31.0	16.4	—	—	—	—
Mississippi	31.0	30.3	31.6	32.9	26.9	—	—	—	—
Missouri	31.3	31.5	31.1	32.4	21.6	—	—	—	—
Montana	29.0	29.4	28.6	28.8	—	—	34.2	42.5	—
Nebraska	27.8	29.1	26.6	28.6	24.2	—	—	11.7	—
Nevada	36.5	35.7	37.2	35.9	49.8	—	—	30.9	42.5
New Hampshire	31.0	34.6	27.9	31.2	—	—	—	—	—
New Jersey	30.2	29.7	30.7	32.2	27.7	20.5	—	24.6	—
New Mexico	24.8	26.8	23.2	27.7	—	—	17.8	22.6	—
New York	30.1	33.1	27.6	31.6	23.6	34.3	—	28.9	—
North Carolina	28.9	27.1	30.5	30.4	24.6	—	—	21.6	—
North Dakota	29.6	28.4	30.7	30.1	—	—	—	—	—
Ohio	32.8	35.9	30.1	33.4	25.1	—	—	41.2	—
Oklahoma	29.6	29.2	30.0	30.8	23.5	—	24.1	25.2	32.3
Oregon	32.1	34.1	30.3	32.7	—	—	—	30.7	28.8
Pennsylvania	32.5	33.9	31.2	33.8	28.8	—	—	12.8	—
Rhode Island	33.1	35.2	31.4	34.8	22.5	—	—	20.5	—
South Carolina	27.8	28.4	27.3	28.5	26.2	—	—	18.6	—
South Dakota	29.5	28.1	30.8	29.7	—	—	30.0	23.7	—
Tennessee	33.2	35.6	31.1	35.1	23.5	—	—	—	—
Texas	31.8	32.2	31.4	35.2	29.2	34.1	—	24.5	20.8
Utah	29.0	31.1	26.9	29.4	—	—	—	31.8	—
Vermont	29.5	31.3	27.9	29.5	—	—	—	—	—
Virginia	30.7	31.7	29.7	31.2	28.9	—	—	27.4	35.6
Washington	29.2	30.8	27.7	29.3	31.9	30.1	—	25.8	24.3
West Virginia	37.7	36.6	38.6	37.1	48.4	—	—	—	38.1
Wisconsin	29.7	33.1	26.7	29.9	27.8	—	—	17.6	—
Wyoming	30.5	31.2	29.9	31.5	—	—	—	13.7	—
United States	30.9	32.2	29.8	32.2	27.4	28.3	30.9	25.9	28.5

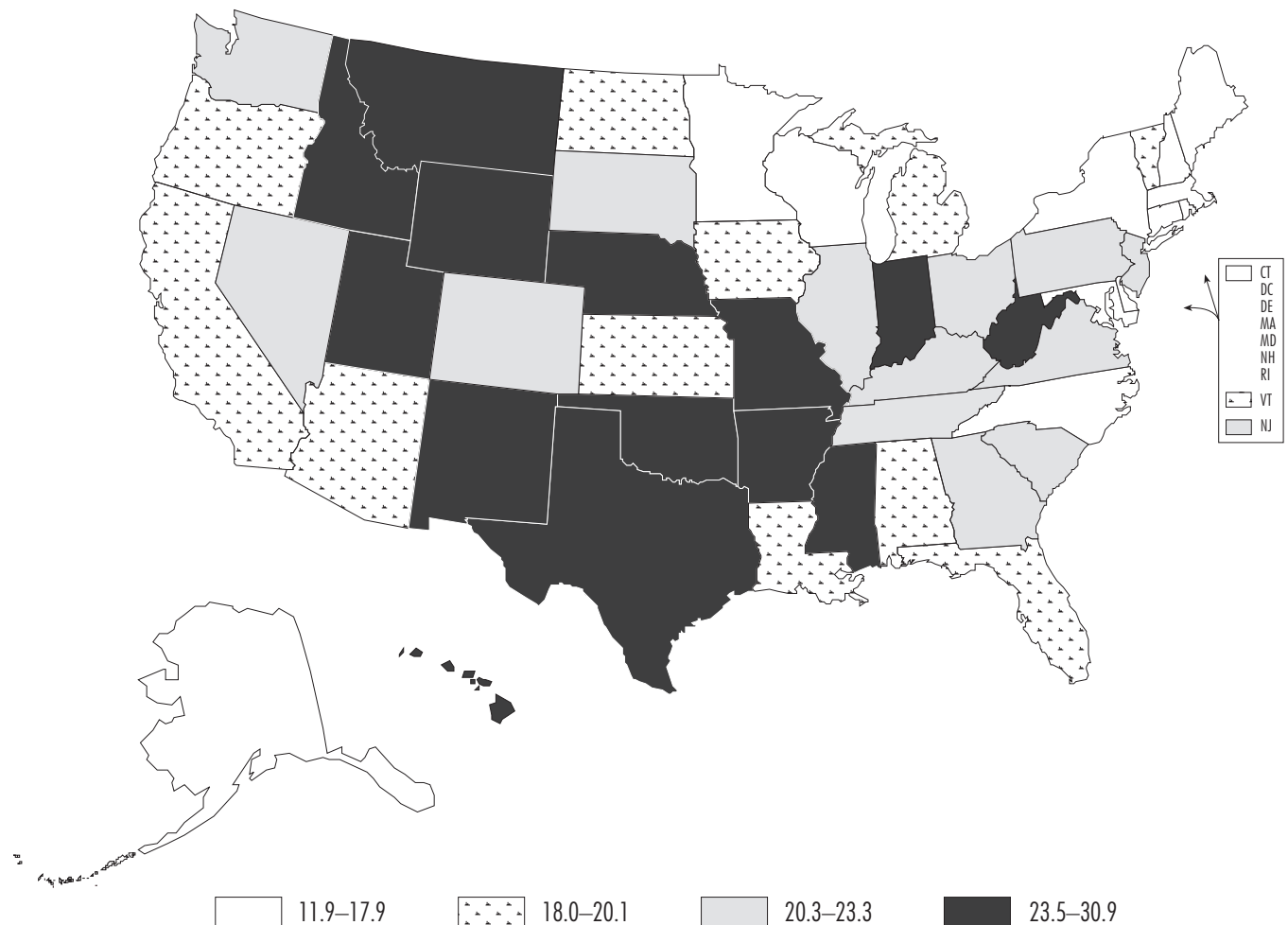
*A dash indicates that the state sample had too few respondents (fewer than 50) in this category to calculate a stable estimate. Source: CDC Behavioral Risk Factor Surveillance System.

Lack of Mammography Screening

Mammography is the best available method to detect breast cancer in its earliest, most treatable stage, which on average is 1 to 3 years before a woman can feel a lump. Mammography also locates cancers too small to be felt during a clinical breast examination. Women aged 40 years and older should have a screening mammogram every 1 to 2 years.

- Timely mammography screening among women aged 40 or older can prevent approximately 16% of all deaths from breast cancer, and the risk reduction associated with screening increases as women get older.
- In 2002, 20% of American women aged 50 years or older reported that they had not had a mammogram in the previous 2 years.
- In 2002, the prevalence of not having had a mammogram during the previous 2 years among women aged 50 years or older ranged from 12% in Rhode Island to 31% in Arkansas.

Percentage of Women Aged 50 Years or Older Who Reported Not Having Had a Mammogram in the Previous 2 Years, 2002



Source: CDC, Behavioral Risk Factor Surveillance System.

Percentage of Women Aged 50 Years or Older Who Reported Not Having Had a Mammogram in the Previous 2 Years, by Race and Ethnicity, 2002

State	Total	White	Black*	Asian/Pacific Islander*	American Indian/ Alaska Native*	Hispanic*	Multiracial*
Alabama	19.9	21.2	14.6	—	—	—	—
Alaska	17.7	18.0	—	—	15.4	—	—
Arizona	18.8	19.4	—	—	—	18.3	—
Arkansas	30.9	30.3	35.2	—	—	—	—
California	18.0	16.4	—	—	—	17.3	—
Colorado	21.3	20.7	—	—	—	26.1	—
Connecticut	15.5	13.9	—	—	—	—	—
Delaware	12.8	13.7	6.3	—	—	—	—
District of Columbia	15.6	18.5	14.3	—	—	—	—
Florida	19.4	17.5	21.2	—	—	30.6	—
Georgia	20.7	20.0	23.3	—	—	—	—
Hawaii	26.5	24.3	—	28.6	—	—	23.5
Idaho	28.8	28.3	—	—	—	—	—
Illinois	23.1	21.8	20.6	—	—	—	—
Indiana	23.5	23.7	14.9	—	—	—	—
Iowa	20.1	20.4	—	—	—	—	—
Kansas	19.2	19.4	—	—	—	—	—
Kentucky	21.4	21.8	10.5	—	—	—	—
Louisiana	20.1	19.9	19.9	—	—	—	—
Maine	15.3	15.1	—	—	—	—	—
Maryland	16.3	16.7	14.9	—	—	—	—
Massachusetts	14.5	14.1	—	—	—	12.3	—
Michigan	18.7	18.5	18.0	—	—	—	—
Minnesota	16.1	15.8	—	—	—	—	—
Mississippi	28.7	27.7	30.3	—	—	—	—
Missouri	24.1	24.4	14.8	—	—	—	—
Montana	23.8	23.9	—	—	9.7	—	—
Nebraska	23.5	23.2	—	—	—	—	—
Nevada	22.1	23.3	—	—	—	—	—
New Hampshire	17.8	17.3	—	—	—	—	—
New Jersey	21.3	23.6	7.0	—	—	22.1	—
New Mexico	24.7	25.2	—	—	—	24.9	—
New York	17.9	18.0	9.3	—	—	15.9	—
North Carolina	16.6	17.0	13.3	—	—	—	—
North Dakota	19.9	19.6	—	—	—	—	—
Ohio	20.6	21.4	9.9	—	—	—	—
Oklahoma	28.6	28.9	32.0	—	20.2	—	21.7
Oregon	18.8	19.3	—	—	—	—	—
Pennsylvania	21.1	21.4	20.6	—	—	8.2	—
Rhode Island	11.9	11.4	—	—	—	—	—
South Carolina	20.3	21.9	17.1	—	—	—	—
South Dakota	20.3	20.1	—	—	—	—	—
Tennessee	23.3	22.8	22.2	—	—	—	—
Texas	25.3	24.5	25.1	—	—	29.3	—
Utah	24.7	24.3	—	—	—	—	—
Vermont	18.6	18.1	—	—	—	—	—
Virginia	22.5	23.1	17.2	—	—	—	—
Washington	21.2	20.4	—	—	—	—	—
West Virginia	24.2	24.2	—	—	—	—	—
Wisconsin	17.7	17.7	12.5	—	—	—	—
Wyoming	27.8	27.2	—	—	—	—	—
United States	20.4	20.1	18.2	27.0	24.5	21.2	23.5

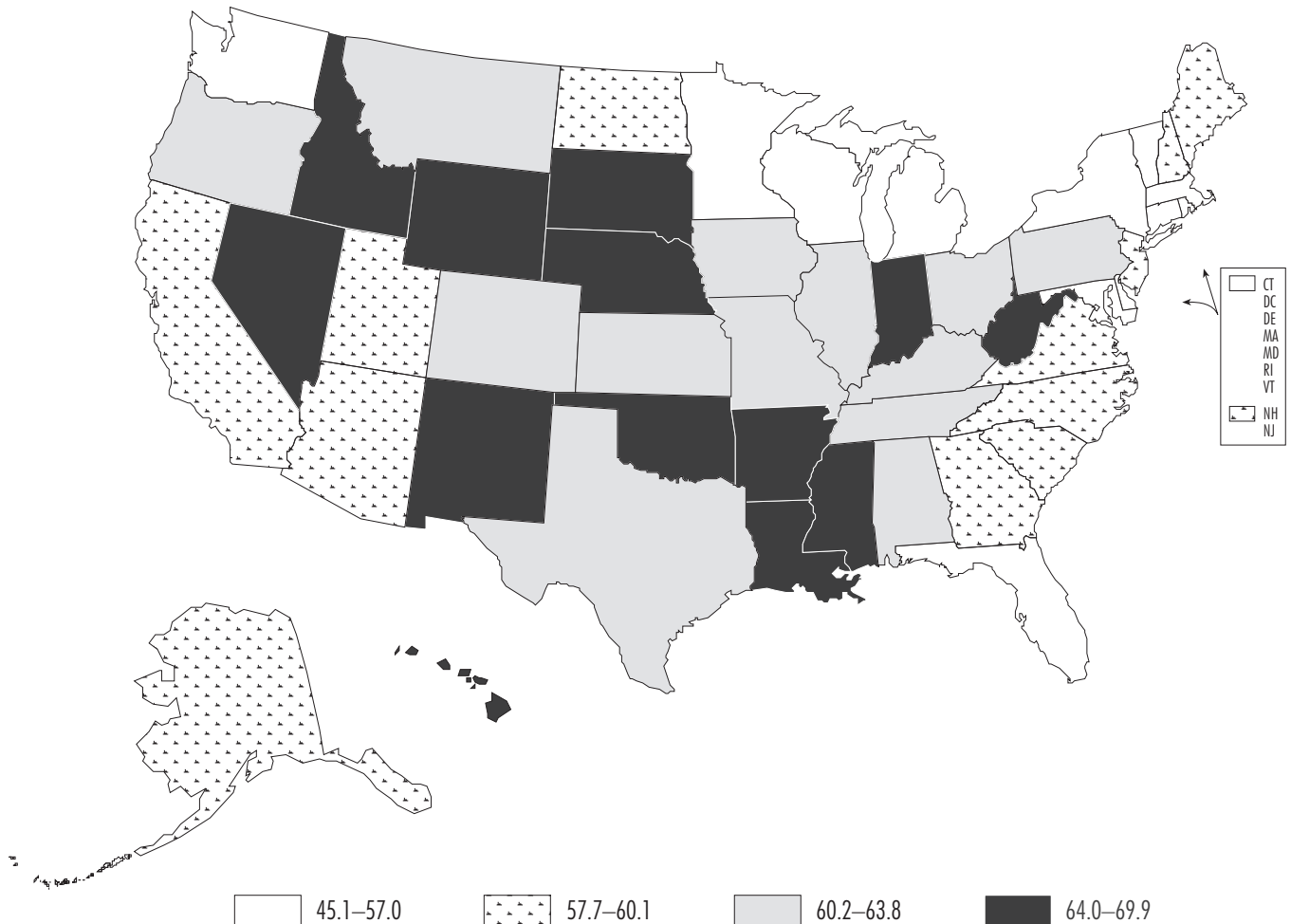
* A dash indicates that the state sample had too few respondents (fewer than 50) in this category to calculate a stable estimate. Source: CDC Behavioral Risk Factor Surveillance System.

Lack of Sigmoidoscopy or Colonoscopy

Colorectal cancer almost always develops from precancerous polyps (abnormal growths) in the colon or rectum. Sigmoidoscopy or colonoscopy can find polyps so they can be removed before they become cancerous. These screening tests can also find colorectal cancer early, when treatment works best. Sigmoidoscopy or colonoscopy is recommended every 5 years for people aged 50 years or older. Despite its proven effectiveness, colorectal cancer screening is used far less than screening for other cancers.

- Studies have found that people who had had a sigmoidoscopy had 59% fewer deaths from colorectal cancers within reach of a sigmoidoscope than people who had not had a sigmoidoscopy.
- In 2002, 60% of Americans aged 50 years or older reported not having had a sigmoidoscopy or colonoscopy within the previous 5 years.
- The prevalence of not having had a sigmoidoscopy or colonoscopy during the previous 5 years among Americans aged 50 years or older ranged from 45% in Minnesota to 70% in Oklahoma and Wyoming.

Percentage of Adults Aged 50 Years or Older Who Reported Not Having Had a Sigmoidoscopy or Colonoscopy in the Previous 5 Years, 2002



Source: CDC, Behavioral Risk Factor Surveillance System.

Percentage of Adults Aged 50 Years or Older Who Reported Not Having Had a Sigmoidoscopy or Colonoscopy in the Previous 5 years, by Sex, Race, and Ethnicity, 2002

State	Total	Male	Female	White	Black*	Asian/Pacific Islander*	American Indian/ Alaska Native*	Hispanic*	Multiracial*
Alabama	60.2	58.7	61.3	60.3	61.1	—	—	—	—
Alaska	60.0	60.5	59.6	61.2	—	—	51.0	—	—
Arizona	58.0	52.9	62.4	56.4	—	—	—	73.0	—
Arkansas	67.4	66.2	68.3	67.5	65.5	—	—	—	—
California	59.6	57.4	61.4	55.2	55.8	70.1	—	70.8	—
Colorado	62.1	60.6	63.5	60.7	—	—	—	74.7	—
Connecticut	51.0	48.6	53.0	50.0	51.5	—	—	64.0	—
Delaware	48.3	44.8	51.3	48.5	53.1	—	—	—	—
District of Columbia	46.2	47.0	45.6	39.4	49.9	—	—	—	—
Florida	55.6	53.9	57.0	54.0	61.2	—	—	61.4	—
Georgia	59.2	60.0	58.6	58.5	62.2	—	—	—	—
Hawaii	66.8	67.1	66.6	66.7	—	66.3	—	73.7	68.8
Idaho	64.0	61.8	65.9	64.2	—	—	—	—	—
Illinois	63.0	64.5	61.7	62.8	59.2	—	—	60.0	—
Indiana	66.4	65.3	67.2	66.0	61.9	—	—	—	—
Iowa	60.8	60.9	60.7	61.2	—	—	—	—	—
Kansas	61.5	60.2	62.6	60.9	—	—	—	65.7	—
Kentucky	62.6	64.5	61.0	62.8	55.1	—	—	53.4	—
Louisiana	66.0	65.6	66.4	64.5	68.9	—	—	72.5	—
Maine	59.1	56.7	61.0	58.8	—	—	—	—	—
Maryland	53.3	49.8	56.1	53.5	52.1	—	—	—	—
Massachusetts	53.3	49.8	56.1	52.3	49.3	—	—	65.2	—
Michigan	55.3	54.8	55.7	54.7	50.3	—	—	—	—
Minnesota	45.1	44.7	45.5	44.6	—	—	—	—	—
Mississippi	65.5	66.3	64.8	62.7	73.8	—	—	—	—
Missouri	63.8	63.9	63.7	63.6	65.6	—	—	—	—
Montana	61.3	63.3	59.5	61.0	—	—	64.4	—	—
Nebraska	65.0	63.8	65.9	64.6	—	—	—	70.6	—
Nevada	66.9	65.6	68.1	65.1	—	—	—	70.3	69.5
New Hampshire	57.7	53.9	61.0	57.2	—	—	—	—	—
New Jersey	58.8	56.8	60.6	56.5	65.8	76.6	—	72.0	—
New Mexico	65.0	62.3	67.4	63.4	—	—	78.0	67.2	—
New York	55.4	51.7	58.2	52.7	57.0	—	—	64.0	—
North Carolina	59.2	60.0	58.5	57.8	61.5	—	68.7	62.6	—
North Dakota	60.1	61.1	59.3	59.3	—	—	—	—	—
Ohio	62.3	62.3	62.3	62.4	59.6	—	—	—	—
Oklahoma	69.8	68.9	70.7	69.4	69.3	—	74.6	80.4	64.9
Oregon	61.1	60.7	61.5	61.1	—	—	—	—	—
Pennsylvania	61.0	59.3	62.3	61.4	55.3	—	—	61.0	—
Rhode Island	52.2	48.7	54.9	52.1	—	—	—	60.5	—
South Carolina	59.4	60.3	58.7	59.9	56.4	—	—	—	—
South Dakota	65.6	65.8	65.5	65.5	—	—	71.5	—	—
Tennessee	60.4	60.0	60.8	59.2	65.7	—	—	—	—
Texas	63.8	64.5	63.2	61.5	62.7	—	—	75.6	—
Utah	60.1	60.2	60.1	59.9	—	—	—	—	—
Vermont	55.2	51.6	58.3	54.8	—	—	—	—	—
Virginia	58.7	55.2	61.7	57.5	58.6	—	—	70.0	—
Washington	57.0	56.6	57.3	56.2	—	—	—	61.7	69.6
West Virginia	68.5	66.2	70.4	68.3	—	—	—	—	70.2
Wisconsin	53.2	51.0	55.0	52.9	40.7	—	—	—	—
Wyoming	69.9	68.6	71.2	69.9	—	—	—	64.8	—
United States	59.5	58.3	60.5	58.3	59.7	69.6	57.5	68.3	65.4

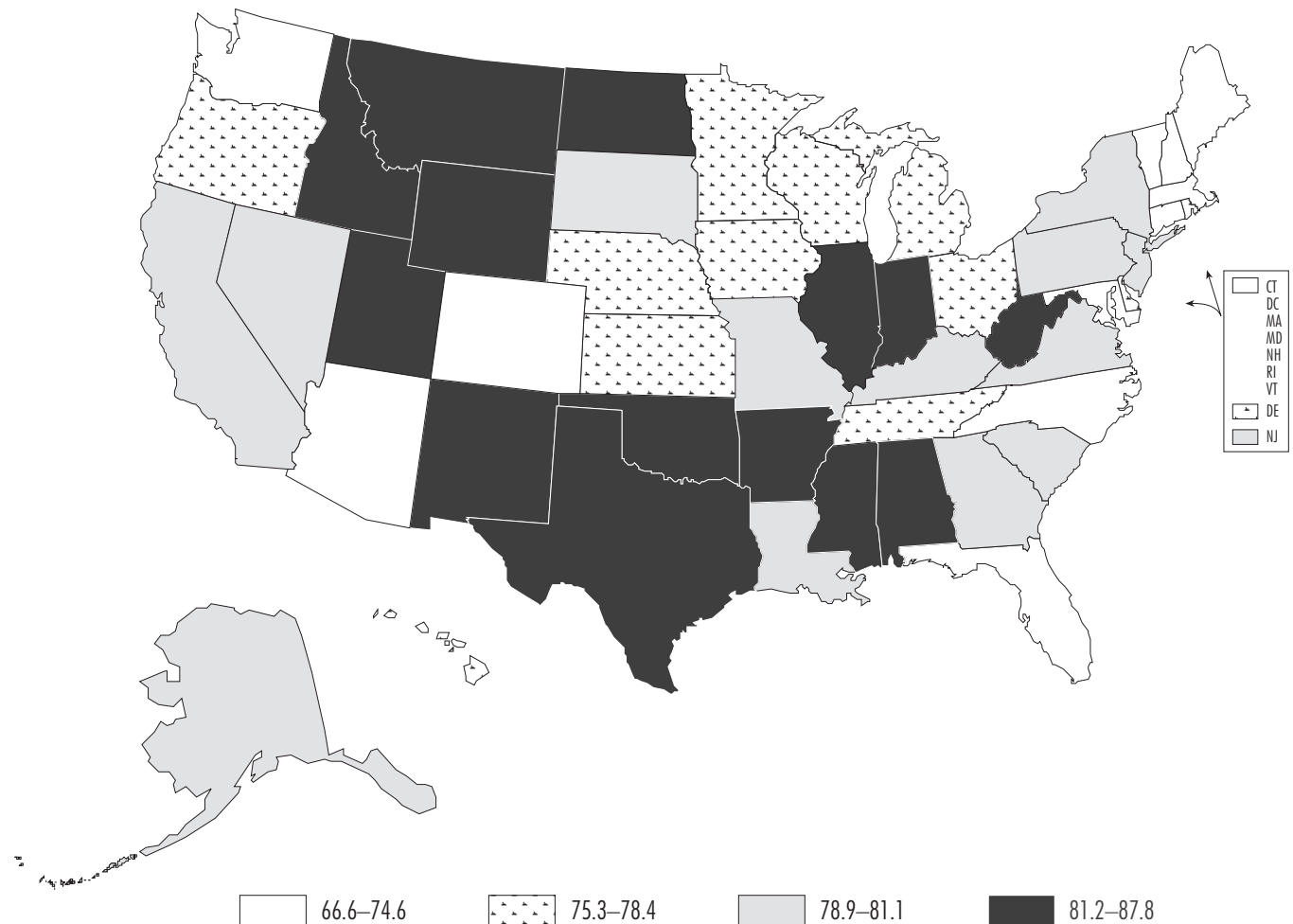
*A dash indicates that the state sample had too few respondents (fewer than 50) in this category to calculate a stable estimate. Source: CDC, Behavioral Risk Factor Surveillance System.

Lack of Fecal Occult Blood Test

The fecal occult blood test checks for occult (hidden) blood in the stool. Proven to be beneficial in screening for colorectal cancer, this test is recommended annually for people aged 50 years or older. Studies have shown that annual fecal occult blood tests can reduce the number of colorectal cancer deaths by one-third. Despite the availability of this effective screening test, it is widely underused.

- In 2002, 78% of Americans aged 50 years or older reported not having had a fecal occult blood test within the previous year.
- The prevalence of not having had a fecal occult blood test within the previous year among Americans aged 50 years or older ranged from 67% in Maine to 88% in Utah and Wyoming.

Percentage of Adults Aged 50 Years or Older Who Reported Not Having Had a Fecal Occult Blood Test Within the Previous Year, 2002



Source: CDC, Behavioral Risk Factor Surveillance System.

Percentage of Adults Aged 50 Years or Older Who Reported Not Having Had a Fecal Occult Blood Test Within the Previous Year, by Sex, Race, and Ethnicity, 2002

State	Total	Male	Female	White	Black*	Asian/Pacific Islander*	American Indian/ Alaska Native*	Hispanic*	Multiracial*
Alabama	81.6	82.3	81.1	81.0	83.0	—	—	—	—
Alaska	81.1	84.2	78.1	79.8	—	—	86.2	—	—
Arizona	72.9	71.1	74.4	71.6	—	—	—	81.2	—
Arkansas	84.1	82.3	85.6	83.7	86.6	—	—	—	—
California	80.1	78.4	81.4	76.3	78.0	90.9	—	89.4	—
Colorado	74.3	76.4	72.4	72.7	—	—	—	85.0	—
Connecticut	72.8	74.6	71.3	72.4	68.1	—	—	76.9	—
Delaware	76.7	75.4	77.8	76.1	81.1	—	—	—	—
District of Columbia	70.9	70.6	71.2	66.0	74.2	—	—	—	—
Florida	74.6	73.5	75.5	72.2	82.1	—	—	85.2	—
Georgia	78.9	77.4	80.0	77.5	80.5	—	—	—	—
Hawaii	75.6	77.9	73.7	74.3	—	75.2	—	78.0	79.8
Idaho	82.8	83.7	82.0	82.9	—	—	—	—	—
Illinois	81.6	81.2	81.9	80.6	83.1	—	—	90.0	—
Indiana	82.7	81.5	83.6	81.9	88.2	—	—	—	—
Iowa	75.3	75.2	75.4	75.2	—	—	—	—	—
Kansas	75.5	74.6	76.2	75.1	—	—	—	79.7	—
Kentucky	79.2	77.8	80.3	79.5	71.5	—	—	86.9	—
Louisiana	80.2	79.6	80.6	78.5	86.0	—	—	68.3	—
Maine	66.6	64.5	68.3	66.1	—	—	—	—	—
Maryland	69.9	69.5	70.1	69.6	70.7	—	—	—	—
Massachusetts	70.9	71.3	70.6	70.8	67.2	—	—	74.7	—
Michigan	76.1	76.4	75.8	76.1	73.7	—	—	—	—
Minnesota	76.4	75.4	77.2	76.3	—	—	—	—	—
Mississippi	82.5	80.4	84.1	82.0	83.9	—	—	—	—
Missouri	78.9	76.0	81.2	79.0	70.3	—	—	—	—
Montana	81.3	81.7	80.9	81.5	—	—	85.6	—	—
Nebraska	77.9	77.9	78.0	78.0	—	—	—	90.4	—
Nevada	81.1	81.5	80.7	80.2	—	—	—	93.5	87.1
New Hampshire	69.8	70.2	69.4	69.7	—	—	—	—	—
New Jersey	80.1	78.9	81.1	79.8	74.2	95.9	—	75.4	—
New Mexico	83.2	79.7	86.2	81.6	—	—	96.5	86.0	—
New York	79.0	79.0	79.0	78.7	76.3	—	—	85.0	—
North Carolina	70.6	72.5	69.0	69.8	70.4	—	71.8	82.0	—
North Dakota	83.8	86.5	81.4	83.4	—	—	—	—	—
Ohio	77.7	76.4	78.7	77.3	83.9	—	—	—	—
Oklahoma	82.5	81.4	83.5	81.9	87.8	—	87.3	92.4	74.7
Oregon	78.4	81.6	75.7	78.3	—	—	—	—	—
Pennsylvania	80.0	78.2	81.5	79.9	82.6	—	—	64.3	—
Rhode Island	71.9	71.3	72.4	72.4	—	—	—	69.5	—
South Carolina	79.6	79.8	79.4	79.6	77.7	—	—	—	—
South Dakota	79.3	79.3	79.3	78.9	—	—	90.8	—	—
Tennessee	76.4	75.3	77.3	75.9	80.3	—	—	—	—
Texas	83.6	82.2	84.7	81.1	86.9	—	—	90.7	—
Utah	87.8	89.8	86.0	87.7	—	—	—	—	—
Vermont	69.7	68.4	70.8	69.4	—	—	—	—	—
Virginia	80.4	78.5	82.0	80.4	80.2	—	—	79.8	—
Washington	73.9	77.0	71.3	73.6	—	—	—	—	80.4
West Virginia	81.2	76.6	84.9	81.0	—	—	—	—	85.8
Wisconsin	77.8	76.5	78.9	78.2	77.5	—	—	—	—
Wyoming	87.5	88.2	86.8	87.2	—	—	—	97.2	—
United States	78.2	77.6	78.8	77.2	79.1	87.7	81.3	85.8	76.4

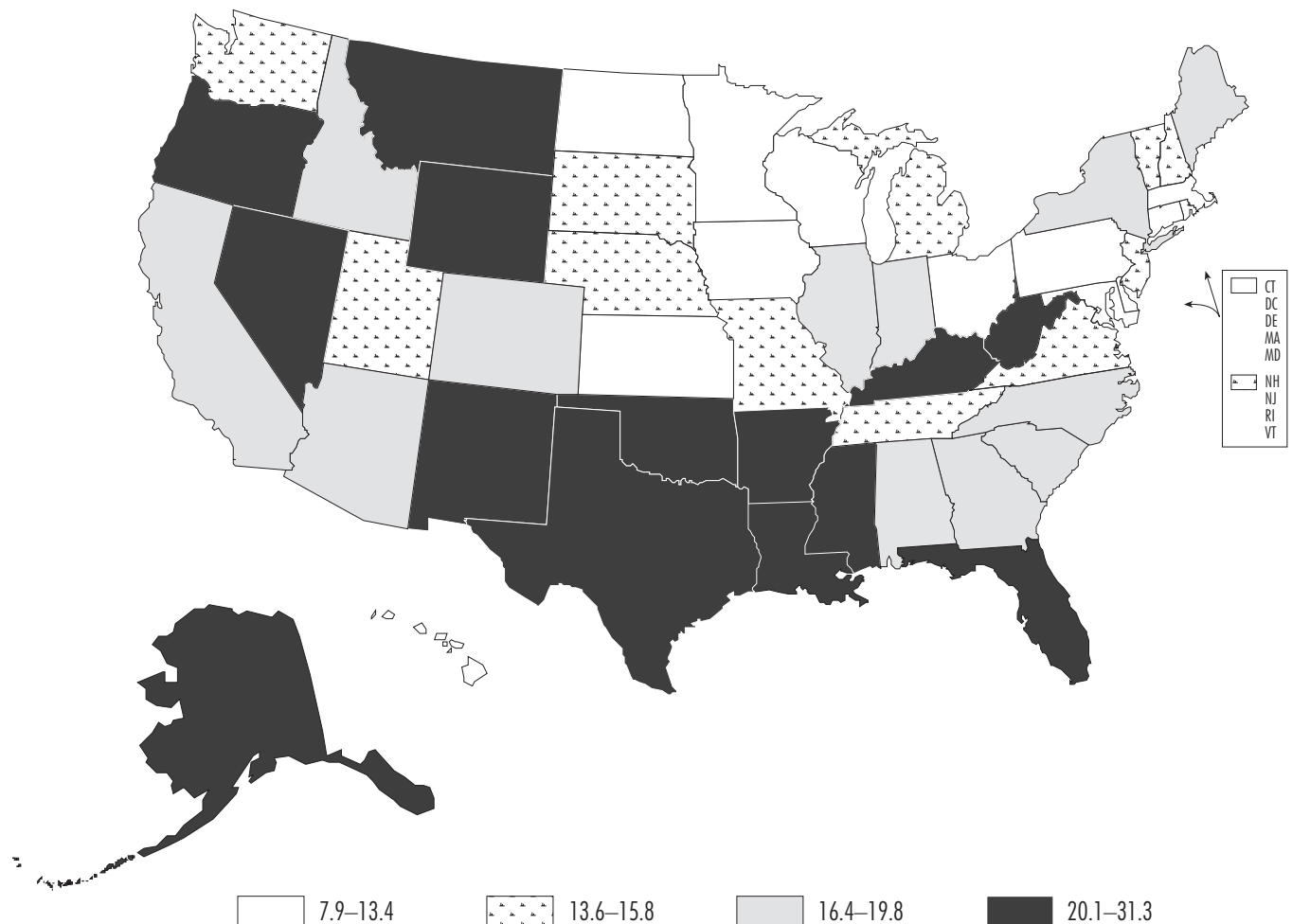
*A dash indicates that the state sample had too few respondents (fewer than 50) in this category to calculate a stable estimate. Source: CDC, Behavioral Risk Factor Surveillance System.

No Health Care Coverage

Health care coverage includes health insurance, prepaid plans such as HMOs, and government plans such as Medicaid and Medicare. The U.S. health care system is rapidly changing. As this system evolves, health care plans need to ensure access to affordable, high-quality preventive services (e.g., screening for early detection) for all Americans.

- In 2002, 18% of U.S. adults aged 18-64 years reported having no health care coverage.
- Hispanics were almost three times more likely than whites to report having no health care coverage.
- The prevalence of having no health care coverage among U.S. adults aged 18-64 years ranged from 8% in Minnesota to 31% in Texas.

Percentage of Adults Aged 18-64 Years Who Reported Having No Health Care Coverage, 2002



Source: CDC, Behavioral Risk Factor Surveillance System.

Percentage of Adults Aged 18–64 Years Who Reported Having No Health Care Coverage, by Sex, Race, and Ethnicity, 2002

State	Total	Male	Female	White	Black*	Asian/Pacific Islander*	American Indian/ Alaska Native*	Hispanic*	Multiracial*
Alabama	18.2	19.0	17.4	15.7	22.2	—	—	27.0	—
Alaska	20.1	19.7	20.5	18.3	—	14.8	25.5	22.7	27.3
Arizona	19.2	20.2	18.3	15.5	—	—	41.2	34.4	—
Arkansas	22.7	23.5	21.8	21.1	28.6	—	—	31.4	29.8
California	18.0	19.7	16.2	9.8	10.1	8.6	—	32.1	24.3
Colorado	18.6	20.4	16.8	13.4	9.1	—	—	41.3	11.9
Connecticut	12.7	14.5	10.9	8.8	18.5	13.0	—	37.4	—
Delaware	10.4	12.0	8.9	9.2	13.4	—	—	22.0	—
District of Columbia	12.2	17.0	7.8	6.7	14.1	—	—	22.6	—
Florida	22.3	23.7	20.8	18.2	28.9	19.8	—	31.7	—
Georgia	17.8	18.7	16.9	13.1	25.2	—	—	29.0	—
Hawaii	10.3	11.4	9.2	10.6	4.5	8.8	—	7.2	14.4
Idaho	19.8	19.6	20.1	18.6	—	—	—	34.2	30.9
Illinois	16.4	17.9	14.8	10.8	23.4	5.7	—	37.1	—
Indiana	17.2	19.3	15.2	15.1	22.6	—	—	38.4	32.0
Iowa	10.8	11.4	10.2	10.3	—	—	—	—	—
Kansas	13.1	13.9	12.3	10.7	20.7	—	—	33.4	—
Kentucky	21.1	21.7	20.5	21.2	23.4	—	—	27.4	—
Louisiana	27.1	26.8	27.3	20.0	39.9	—	—	33.4	—
Maine	16.9	20.7	13.1	16.8	—	—	—	—	—
Maryland	11.3	11.1	11.5	8.6	15.9	10.8	—	15.7	—
Massachusetts	10.8	13.5	8.2	7.5	16.7	15.0	—	34.7	—
Michigan	13.8	14.7	12.9	11.7	18.8	15.3	—	27.5	24.1
Minnesota	7.9	9.6	6.2	7.3	22.4	13.5	—	4.7	—
Mississippi	26.7	26.5	26.9	21.6	34.0	—	—	—	—
Missouri	15.8	17.6	14.0	14.3	26.9	—	—	24.4	15.1
Montana	21.1	23.2	18.8	19.8	—	—	34.4	36.6	—
Nebraska	13.8	16.3	11.2	12.0	9.0	—	—	39.8	—
Nevada	25.8	24.5	27.1	16.0	22.7	4.5	—	58.3	26.8
New Hampshire	13.6	15.2	12.0	13.1	—	—	—	20.2	—
New Jersey	15.7	18.1	13.4	9.3	18.4	14.6	—	42.2	—
New Mexico	25.0	25.9	24.2	16.5	—	—	25.9	35.2	—
New York	17.6	20.1	15.2	11.6	14.6	23.3	—	36.1	—
North Carolina	19.2	21.1	17.4	14.7	22.7	7.9	20.1	56.1	12.8
North Dakota	11.4	12.8	9.8	10.4	—	—	18.8	—	—
Ohio	13.4	15.0	11.7	12.4	20.6	—	—	16.6	—
Oklahoma	23.7	24.5	22.9	19.2	26.0	25.7	29.5	56.3	26.4
Oregon	20.5	22.6	18.5	16.9	—	—	—	49.4	—
Pennsylvania	12.6	13.9	11.4	11.1	20.8	27.8	—	17.8	11.7
Rhode Island	13.7	16.8	10.8	9.9	17.5	—	—	36.7	—
South Carolina	18.4	20.3	16.6	15.3	20.9	—	—	35.5	—
South Dakota	14.3	15.2	13.5	12.2	—	—	40.5	29.3	—
Tennessee	15.1	17.6	12.8	13.4	20.8	—	—	—	—
Texas	31.3	31.5	31.1	18.7	28.6	18.1	—	53.8	28.5
Utah	15.4	16.0	14.7	14.4	—	—	—	25.2	—
Vermont	13.6	16.6	10.7	13.5	—	—	—	12.9	—
Virginia	14.4	15.0	13.8	12.3	23.1	9.4	—	20.8	10.9
Washington	14.0	16.3	11.7	13.3	21.0	7.6	16.4	21.5	22.3
West Virginia	21.8	22.5	21.1	21.9	22.0	—	—	—	23.4
Wisconsin	13.0	15.3	10.7	10.9	20.6	—	—	29.3	—
Wyoming	20.1	21.2	18.9	18.2	—	—	—	27.8	—
United States	17.9	19.4	16.5	13.4	22.3	13.1	26.5	37.4	20.6

*A dash indicates that the state sample had too few respondents (fewer than 50) in this category to calculate a stable estimate. Source: CDC Behavioral Risk Factor Surveillance System.

Section IV

**Chronic Diseases, Risk Factors,
and Preventive Services, by State**

Alabama: Burden of Chronic Diseases, 2001

Heart Disease

- Heart disease was the most common cause of death in Alabama in 2001, accounting for 29% of all deaths.
- The rate of death from heart disease was 51% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 2,998 deaths in Alabama, or 7% of all deaths.
- The rate of death from stroke was 35% higher among blacks than among whites.

Cancer

- Cancer accounted for 22% of all deaths in Alabama in 2001.
- The American Cancer Society estimates that 24,300 new cases

of cancer will be diagnosed in Alabama in 2004, including 3,400 new cases of lung cancer, 2,300 new cases of colorectal cancer, and 4,000 new cases of breast cancer in women.*

- The American Cancer Society estimates that 10,000 Alabama residents will die of cancer in 2004.
- The rate of death from all cancers was 65% higher among men than among women.

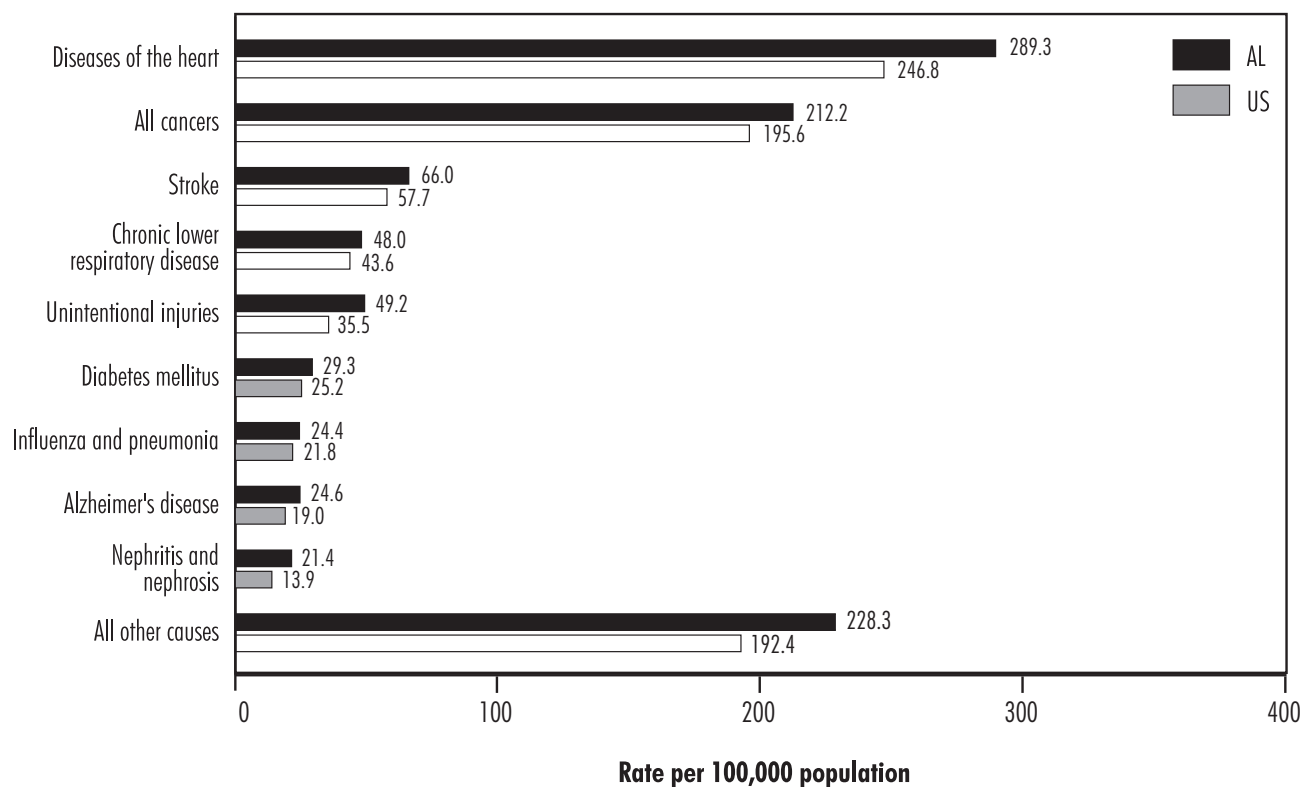
Diabetes

- In 2002, † 303,000 adults in Alabama had diagnosed diabetes.
- In 2001, diabetes was responsible for 1,344 deaths in Alabama.
- The rate of death from diabetes was 25% higher among men than among women.

* American Cancer Society are data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Alabama Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Alabama: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, cigarette smoking was reported by 32% of Hispanics, 24% of whites, and 22% of blacks in Alabama.
- No leisure-time physical activity was reported by 37% of blacks, 25% of whites, and 23% of Hispanics.
- In Alabama, 82% of men and 76% of women reported eating fewer than five servings of fruits and vegetables per day.
- According to self-reported height and weight, 71% of men and 55% of women in Alabama were overweight.
- In 2001, 35% of whites and 28% of blacks in Alabama reported having high blood cholesterol.
- High blood pressure was reported by 33% of women and 30% of men in 2001.

Risk Factors Among High School Students

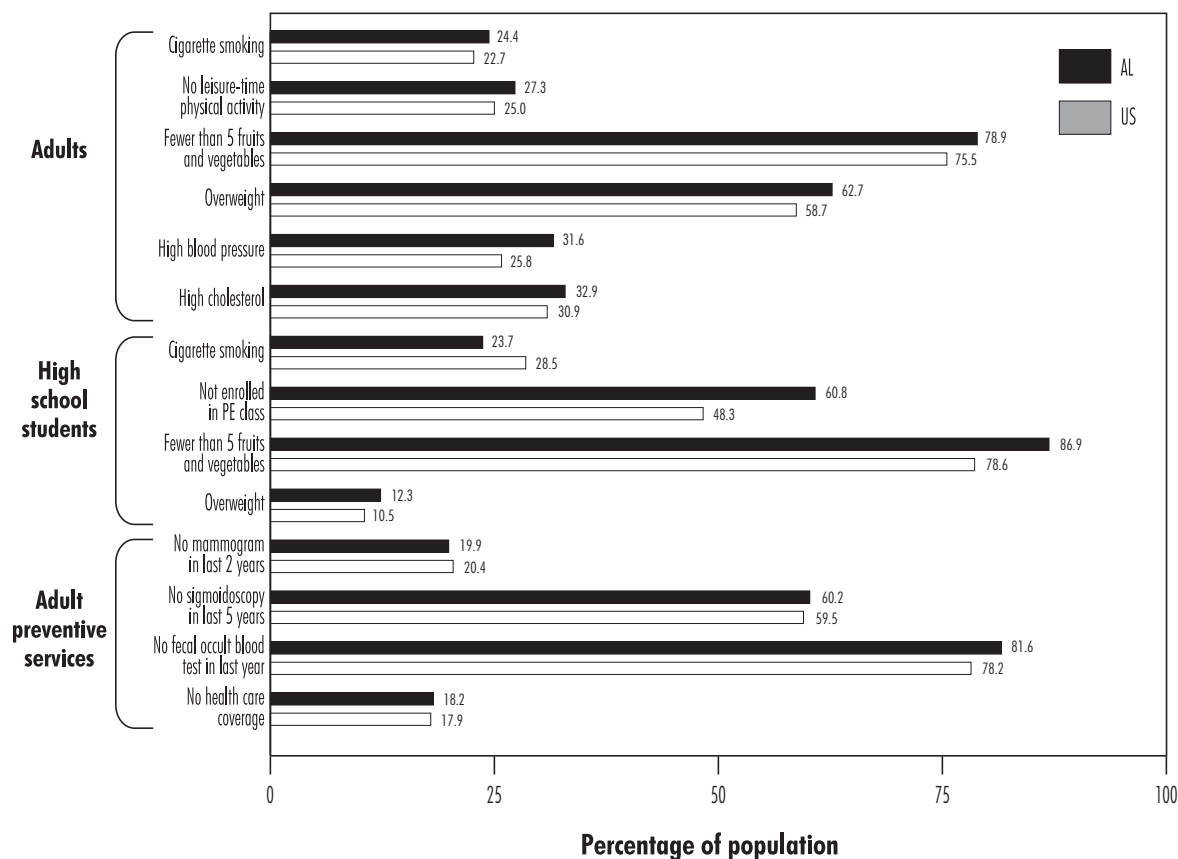
- In 2001, 30% of white and 12% of black students reported cigarette smoking.
- Sixty-one percent of high school students reported not being enrolled in physical education class.

- Among high school students, 17% of male and 8% of female students were overweight.
- Eighty-seven percent of students ate fewer than five servings per day of fruits and vegetables during the 7 days preceding the survey.

Preventive Services

- Among women aged 50 years or older, 21% of whites and 15% of blacks reported not having had a mammogram in the last 2 years.
- Among adults aged 50 years or older, 61% of women and 59% of men reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Among adults aged 50 years or older, 83% of blacks and 81% of whites reported not having had a fecal occult blood test within the last year.
- Among adults aged 18–64 years old, 27% of Hispanics, 22% of blacks, and 16% of whites reported having no health care coverage.

Risk Factors and Preventive Services, Alabama Compared With United States



Source: CDC, Behavioral Risk Factor Surveillance System, 2002.
 CDC, Youth Risk Behavior Surveillance System, 2001.

Alaska: Burden of Chronic Diseases, 2001

Heart Disease

- In 2001, heart disease accounted for 20% of all deaths in Alaska.
- The rate of death from heart disease in Alaska was 67% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 5% of all deaths in Alaska.
- The rate of death from stroke was 50% higher among American Indians/Alaska Natives than among whites.

Cancer

- In 2001, cancer accounted for 23% of all deaths.
- The American Cancer Society estimates that 1,900 new cases

of cancer will be diagnosed in Alaska in 2004, including 200 new cases of lung cancer, 200 new cases of colorectal cancer, and 300 new cases of breast cancer in women.*

- The American Cancer Society estimates that 800 Alaska residents will die of cancer in 2004.
- The rate of death from all cancers was 21% lower among American Indians/Alaska Natives than among whites.

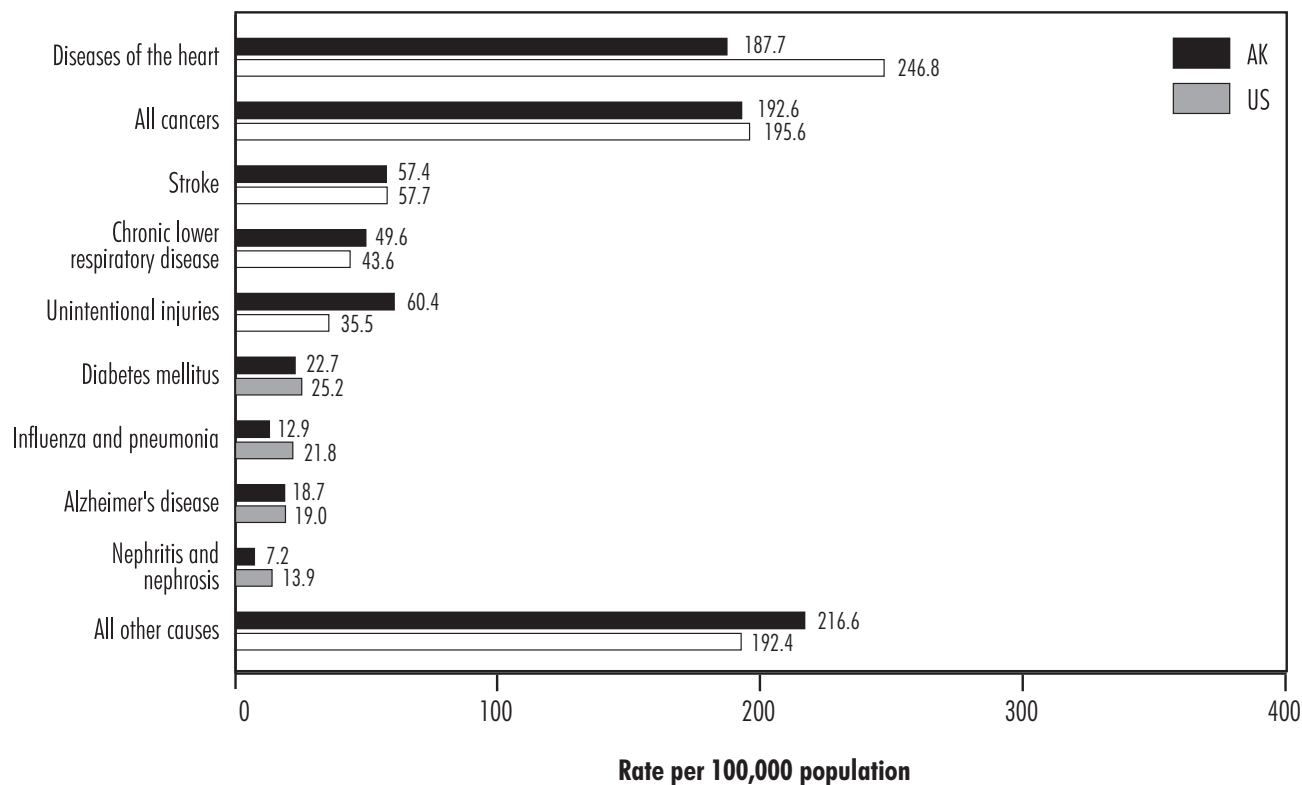
Diabetes

- In 2002,† 17,000 adults in Alaska had diagnosed diabetes.
- In 2001, diabetes was the cause of 80 deaths in Alaska.
- The rate of death from diabetes was 13% higher among women than among men.

* American Cancer Society are data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Alaska Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Alaska: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, 50% of multiracial adults, 42% of American Indians/Alaska Natives, 38% of Hispanics, and 25% of whites and Asians/Pacific Islanders in Alaska reported current cigarette smoking.
- No leisure-time physical activity was reported by 36% of American Indians/Alaska Natives and Asians/Pacific Islanders, 28% of multiracial adults, 22% of Hispanics, and 19% of whites.
- Eating fewer than five servings of fruits and vegetables per day was reported by 80% of men and 74% of women.
- According to self-reported height and weight, 70% of men and 51% of women were overweight.
- In 2001, 41% of Asians/Pacific Islanders, 34% of Hispanics, 30% of whites, 25% of multiracial Alaskans, and 22% of American Indians/Alaska Natives reported having high blood cholesterol.
- In 2001, 23% of women and 21% of men in Alaska reported having high blood pressure.

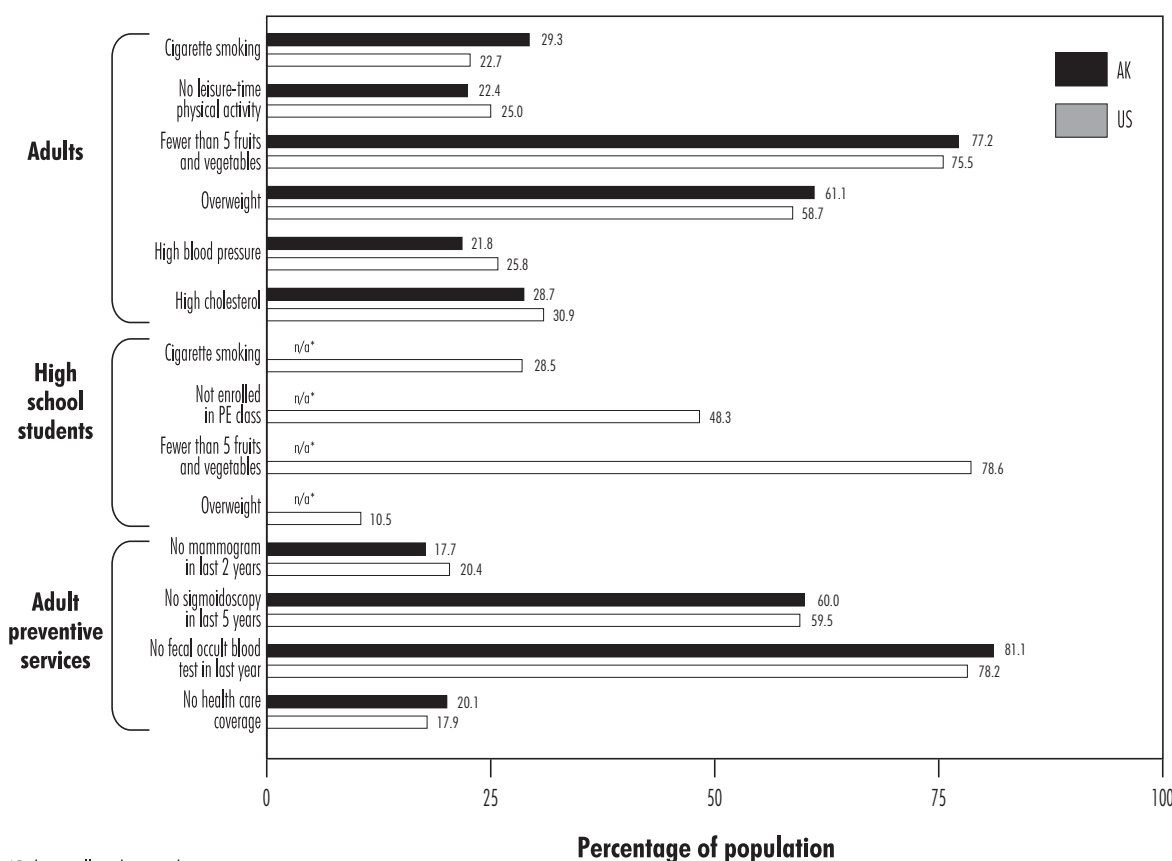
Risk Factors Among High School Students

The 2001 YRBS was not conducted in Alaska.

Preventive Services

- Among women aged 50 years or older, 18% reported not having had a mammogram within the last 2 years.
- Among adults aged 50 years or older, 61% of whites and 51% of American Indians/Alaska Natives reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Among adults aged 50 years or older, 86% of American Indians/Alaska Natives and 80% of whites reported not having had a fecal occult blood test within the last year.
- No health care coverage was reported by 26% of American Indian/Alaska Native, 23% of Hispanic, 18% of white, and 15% of Asian/Pacific Islander adults aged 18–64.

Risk Factors and Preventive Services, Alaska Compared With United States



*Did not collect data on this topic.

Source: CDC, Behavioral Risk Factor Surveillance System, 2002.

CDC, Youth Risk Behavior Surveillance System, 2001.

Arizona: Burden of Chronic Diseases, 2001

Heart Disease

- Heart disease was the most common cause of death in Arizona in 2001, accounting for 10,582 deaths, or 26% of all deaths.
- The rate of death from heart disease was 56% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 2,480 deaths in Arizona, or 6% of all deaths.
- The rate of death from stroke was 72% higher among blacks than among whites.

Cancer

- Cancer accounted for 22% of all deaths in Arizona in 2001.

- The American Cancer Society estimates that 23,600 new cases of cancer will be diagnosed in Arizona in 2004, including 2,800 new cases of lung cancer, 2,500 new cases of colorectal cancer, and 4,000 new cases of breast cancer in women.*
- The American Cancer Society estimates that 9,700 Arizona residents will die of cancer in 2004.
- The rate of death from lung cancer was 48% higher among men than among women.

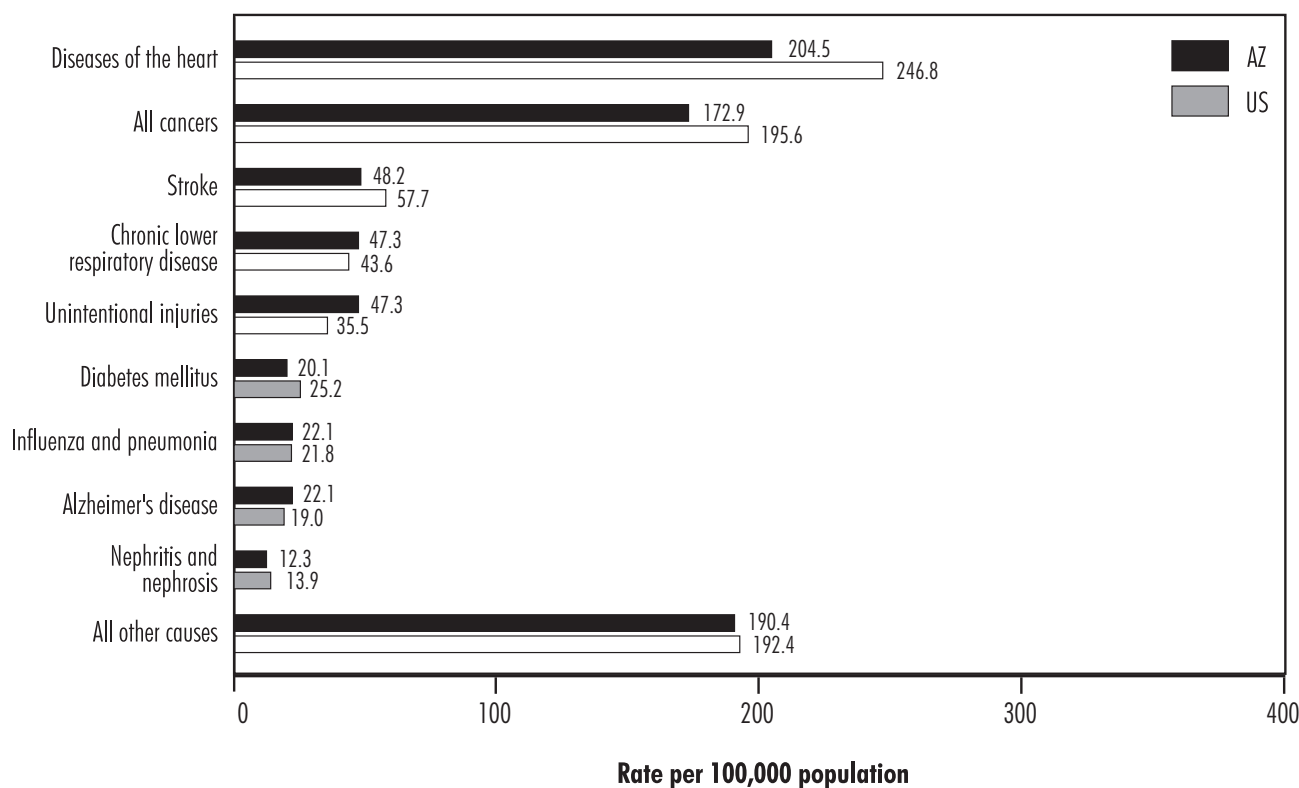
Diabetes

- In 2002,† 244,000 adults in Arizona had diagnosed diabetes.
- In 2001, diabetes was the cause of 1,057 deaths.
- The rate of death from diabetes was 403% higher among American Indians/Alaska Natives, 255% higher among blacks, and 164% higher among Hispanics than among whites.

* American Cancer Society data are rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Arizona Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Arizona: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, current cigarette smoking was reported by 25% of whites, 20% of blacks, 18% of Hispanics, and 16% of American Indians/Alaska Natives.
- No leisure-time physical activity was reported by 36% of American Indians/Alaska Natives, 33% of Hispanics, 30% of blacks, and 20% of whites.
- Eighty-three percent of men and 72% of women reported eating fewer than five servings of fruits and vegetables per day.
- According to self-reported height and weight, 67% of men and 46% of women were overweight.
- In 2001, 32% of whites, 31% of blacks, 23% of American Indians/Alaska Natives, and 22% of Hispanics reported having high blood cholesterol.
- In 2001, 26% of men and 22% of women in Arizona reported having high blood pressure.

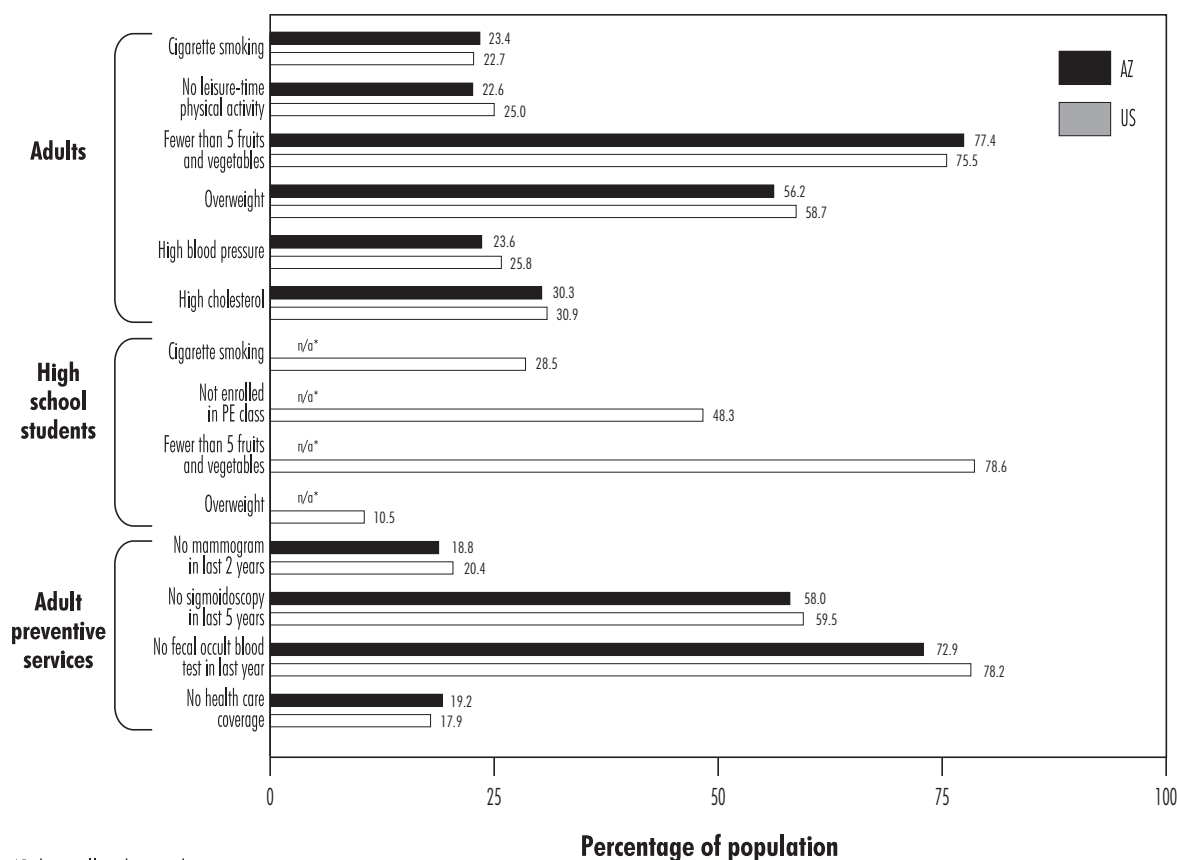
Risk Factors Among High School Students

- The 2001 YRBS was not conducted in Arizona.

Preventive Services

- Of women aged 50 years or older, 19% reported not having had a mammogram within the last 2 years.
- Among adults aged 50 years or older, 62% of women and 53% of men reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Among adults aged 50 years or older, 81% of Hispanics and 72% of whites reported not having had a fecal occult blood test within the past year.
- Among adults aged 18-64, no health coverage was reported by 41% of American Indians/Alaska Natives, 34% of Hispanics, and 16% of whites.

Risk Factors and Preventive Services, Arizona Compared With United States



*Did not collect data on this topic.

Source: CDC, Behavioral Risk Factor Surveillance System, 2002.

CDC, Youth Risk Behavior Surveillance System, 2001.

Arkansas: Burden of Chronic Diseases, 2001

Heart Disease

- Heart disease was the most common cause of death in Arkansas in 2001, accounting for 30% of all deaths.
- The rate of death from heart disease was 49% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 2,256 deaths in Arkansas, or 8% of all deaths.
- The rate of death from stroke was 36% higher among blacks than among whites.

Cancer

- Cancer accounted for 22% of all deaths in Arkansas in 2001.

- The American Cancer Society estimates that 14,800 new cases of cancer will be diagnosed in Arkansas in 2004, including 2,200 new cases of lung cancer, 1,600 new cases of colorectal cancer, and 2,100 new cases of breast cancer in women.*
- The American Cancer Society estimates that 6,100 Arkansas residents will die of cancer in 2004.
- The rate of death from all cancers was 64% higher among men than among women.

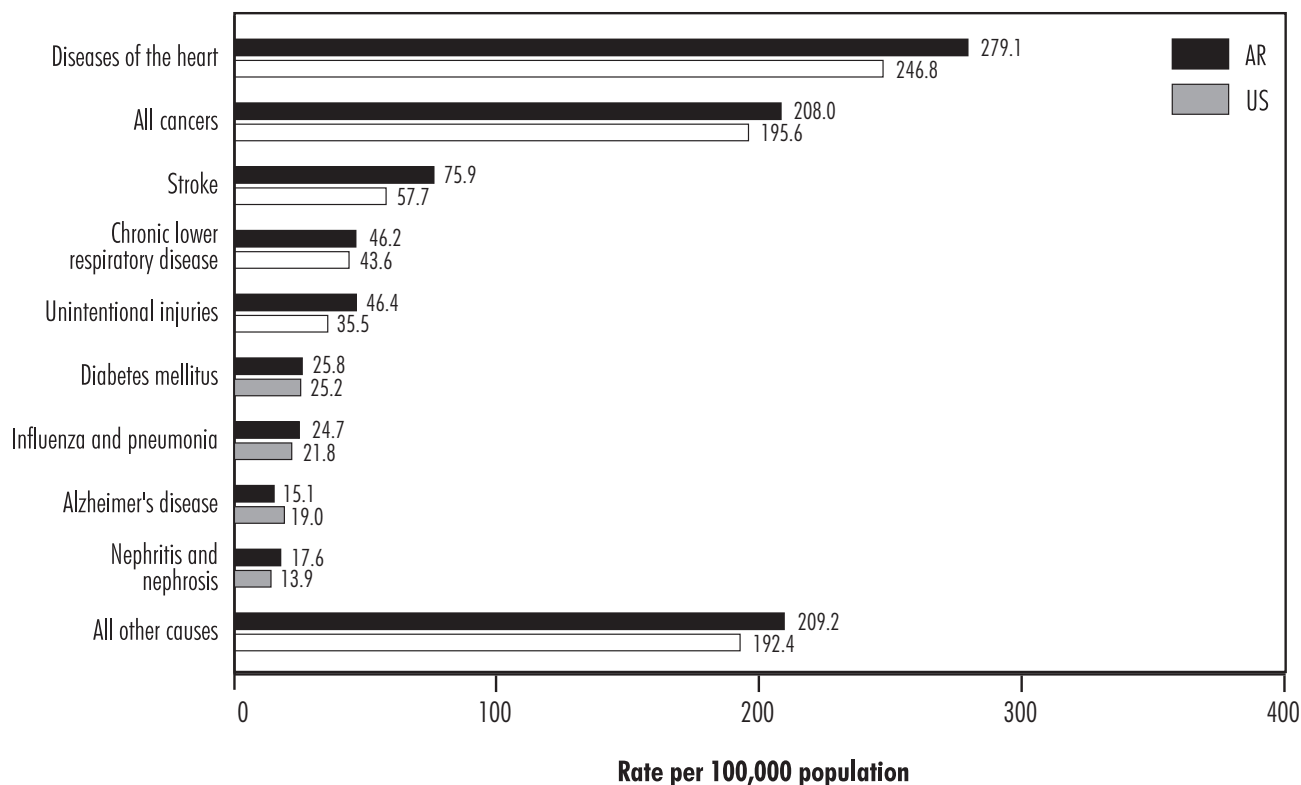
Diabetes

- In 2002,† 158,000 adults in Arkansas had diagnosed diabetes.
- In 2001, diabetes was the cause of 756 deaths.
- The rate of death from diabetes was 181% higher among blacks than among whites.

* American Cancer Society data are rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Arkansas Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Arkansas: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, current cigarette smoking was reported by 42% of American Indian/Alaska Native, 35% of multiracial, 26% of white, 24% of Hispanic, and 23% of black adults in Arkansas.
- No leisure-time physical activity was reported by 38% of multiracial adults, 35% of American Indians/Alaska Natives, 33% of blacks, 31% of Hispanics, and 26% of whites.
- Eighty-four percent of men and 75% of women in Arkansas reported eating fewer than five servings of fruits and vegetables per day.
- According to self-reported height and weight, 67% of men and 55% of women were overweight.
- In Arkansas in 2001, 31% of whites and 23% of blacks reported having high blood cholesterol.
- In 2001, 30% of women and 29% of men in Arkansas reported having high blood pressure.

- Sixty-four percent of students were not enrolled in physical education class.
- Nineteen percent of male and 9% of female students were overweight.
- Eighty percent of students ate fewer than five servings per day of fruits and vegetables during the 7 days preceding the survey.

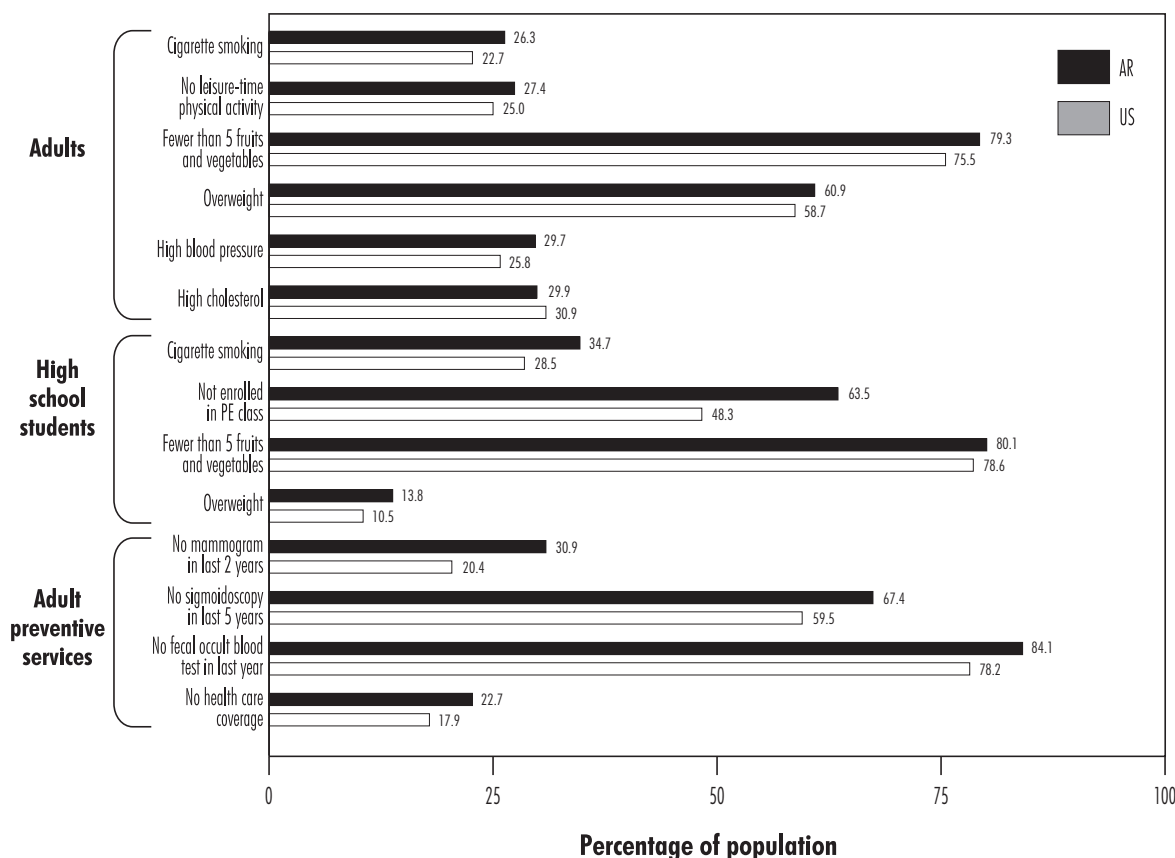
Preventive Services

- Among women aged 50 years or older, 31% reported not having had a mammogram within the last 2 years.
- Among adults aged 50 years or older, 67% reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Among adults aged 50 years or older, 87% of blacks and 84% of whites reported not having had a fecal occult blood test within the past year.
- Twenty-three percent of adults aged 18–64 reported having no health care coverage.

Risk Factors Among High School Students

- Cigarette smoking was reported by 38% of white and 22% of black students in 2001.

Risk Factors and Preventive Services, Arkansas Compared With United States



Source: CDC, Behavioral Risk Factor Surveillance System, 2002.

CDC, Youth Risk Behavior Surveillance System, 2001.

California: Burden of Chronic Diseases, 2001

Heart Disease

- In 2001, heart disease was the most common cause of death in California, accounting for 68,226 deaths, or 29% of all deaths.
- The rate of death from heart disease was 45% higher among men than among women.

Stroke

- In California, stroke was the cause of 18,088 deaths, or 8% of all deaths in 2001.
- The rate of death from stroke was 46% higher among blacks than among whites.

Cancer

- Cancer accounted for 53,923 deaths, or 23% of all deaths in California in 2001.

- The American Cancer Society estimates that 134,300 new cases of cancer will be diagnosed in California in 2004, including 15,700 new cases of lung cancer, 13,900 new cases of colorectal cancer, and 21,900 new cases of breast cancer in women.*
- The American Cancer Society estimates that 55,300 California residents will die of cancer in 2004.
- The rate of death from lung cancer was 54% higher among men than among women.

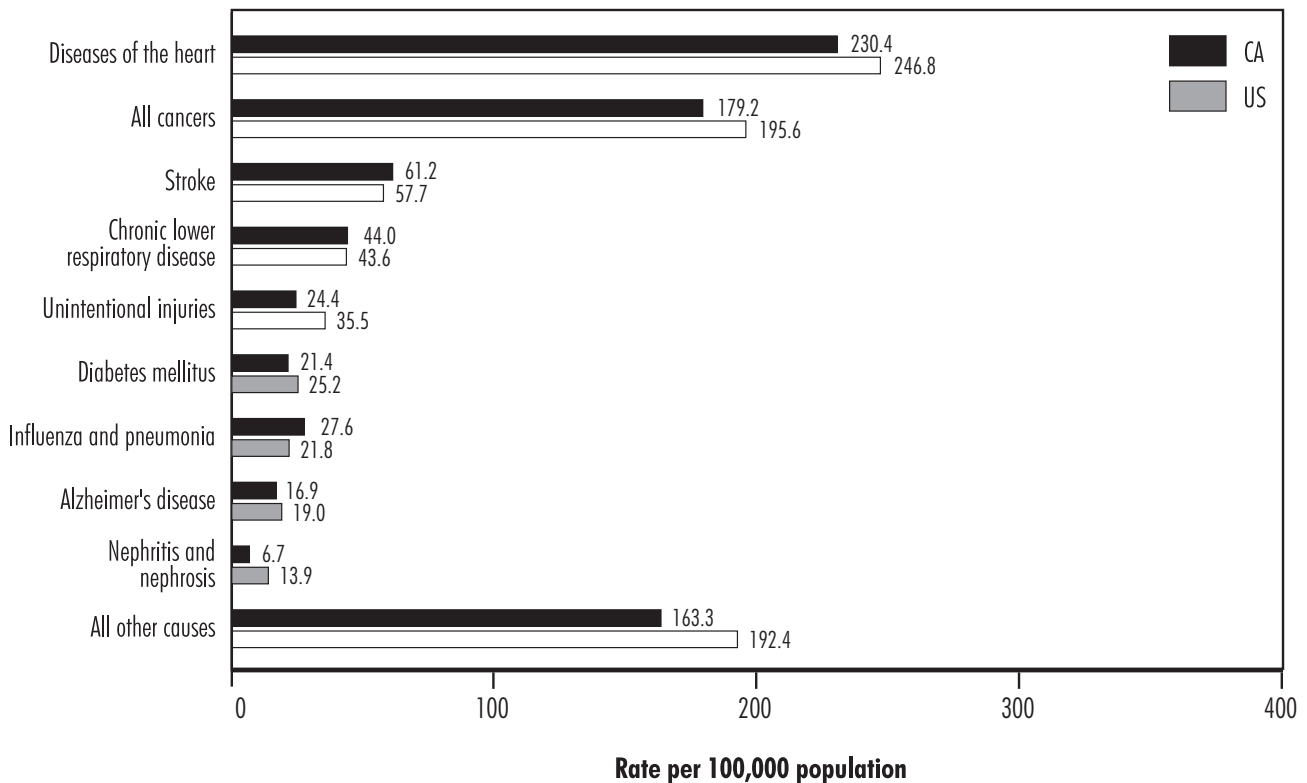
Diabetes

- In 2002,† 1,754,000 adults in California had diagnosed diabetes.
- In 2001, diabetes was the cause of 6,395 deaths in California.
- The rate of death from diabetes was 151% higher among blacks, 113% higher among Hispanics, and 52% higher among American Indians/Alaska Natives than among whites.

* American Cancer Society are data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, California Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

California: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, 20% of men and 13% of women in California reported current cigarette smoking.
- No leisure-time physical activity was reported by 33% of Hispanics, 21% of Asians/Pacific Islanders, 23% of blacks, 17% of whites, and 10% of multiracial adults.
- In 2002, 78% of men and 68% of women reported eating fewer than five servings of fruits and vegetables per day.
- According to self-reported height and weight, 67% of blacks, 66% of Hispanics, 65% of multiracial adults, 53% of whites, and 38% of Asians/Pacific Islanders were overweight.
- In 2001, 35% of blacks, 33% of whites, 32% of Asians/Pacific Islanders, 30% of multiracial Californians, and 27% of Hispanics reported having high blood cholesterol.
- In 2001, 24% of women and 22% of men in California reported having high blood pressure.

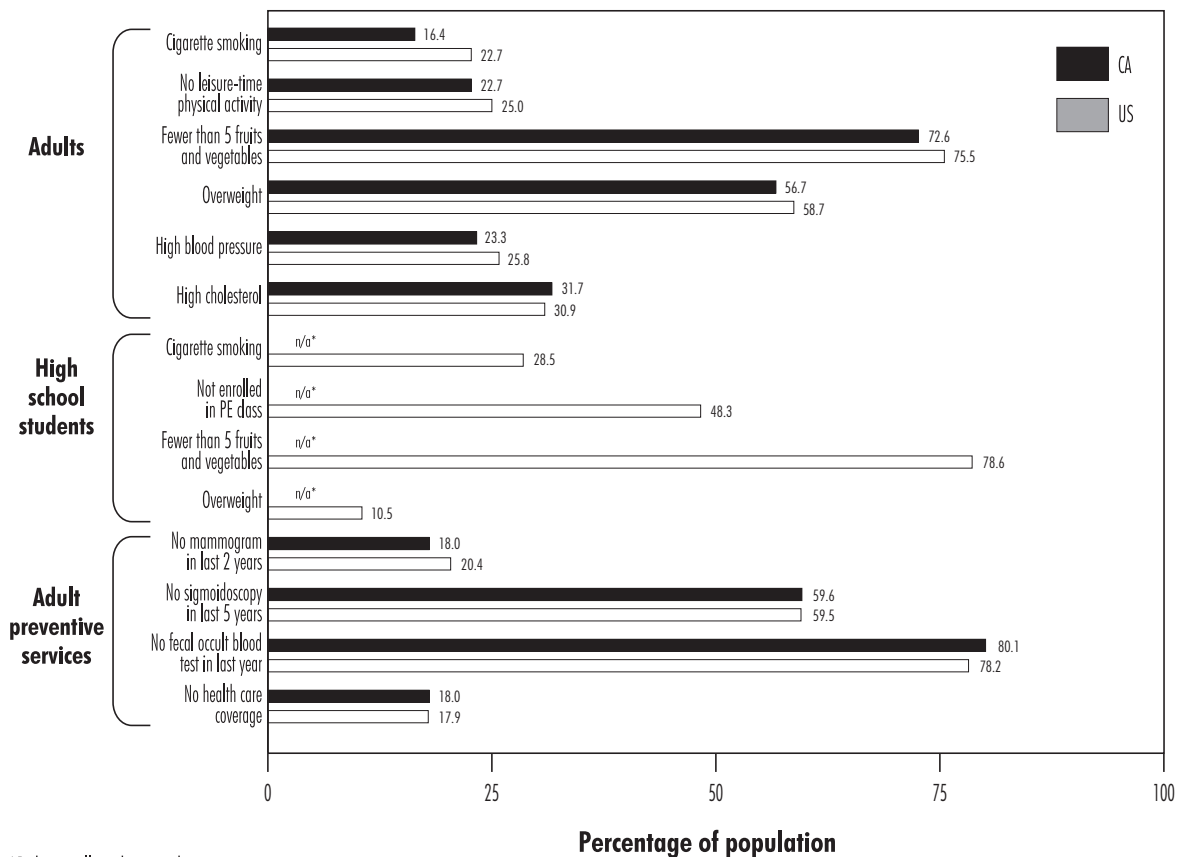
Preventive Services

- Among women aged 50 years or older, 18% reported not having had a mammogram within the last 2 years.
- Among adults aged 50 years or older, 71% of Hispanics, 70% of Asians/ Pacific Islanders, 56% of blacks, and 55% of whites reported not having had a sigmoidoscopy or colonoscopy within the last 5 years
- Among adults aged 50 years or older, 91% of Asians/ Pacific Islanders, 89% of Hispanics, 78% of blacks, and 76% of whites reported not having had a fecal occult blood test within the past year.
- Among adults aged 18–64, no health care coverage was reported by 32% of Hispanics, 24% of multiracial adults, 10% of blacks, 10% of whites, and 9% of Asians/Pacific Islanders.

Risk Factors Among High School Students

- The 2001 YRBS was not conducted in California.

Risk Factors and Preventive Services, California Compared With United States



*Did not collect data on this topic.

Source: CDC, Behavioral Risk Factor Surveillance System, 2002.

CDC, Youth Risk Behavior Surveillance System, 2001.

Colorado: Burden of Chronic Diseases, 2001

Heart Disease

- Heart disease was the most common cause of death in Colorado in 2001, accounting for 22% of all deaths.
- The rate of death from heart disease was 48% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 1,825 deaths, or 6.5% of all deaths in Colorado.
- The rate of death from stroke was 33% higher among blacks than among whites.

Cancer

- Cancer accounted for 22% of all deaths in Colorado in 2001.
- The American Cancer Society estimates that 15,500 new cases of cancer will be diagnosed in Colorado in 2004, including 1,700 new cases of lung cancer, 1,600 new cases of colorectal cancer, and 2,600 new cases of breast cancer in women.

- The American Cancer Society estimates that 6,400 Colorado residents will die of cancer in 2004.
- The rate of death from lung cancer was 48% higher among men than among women.*

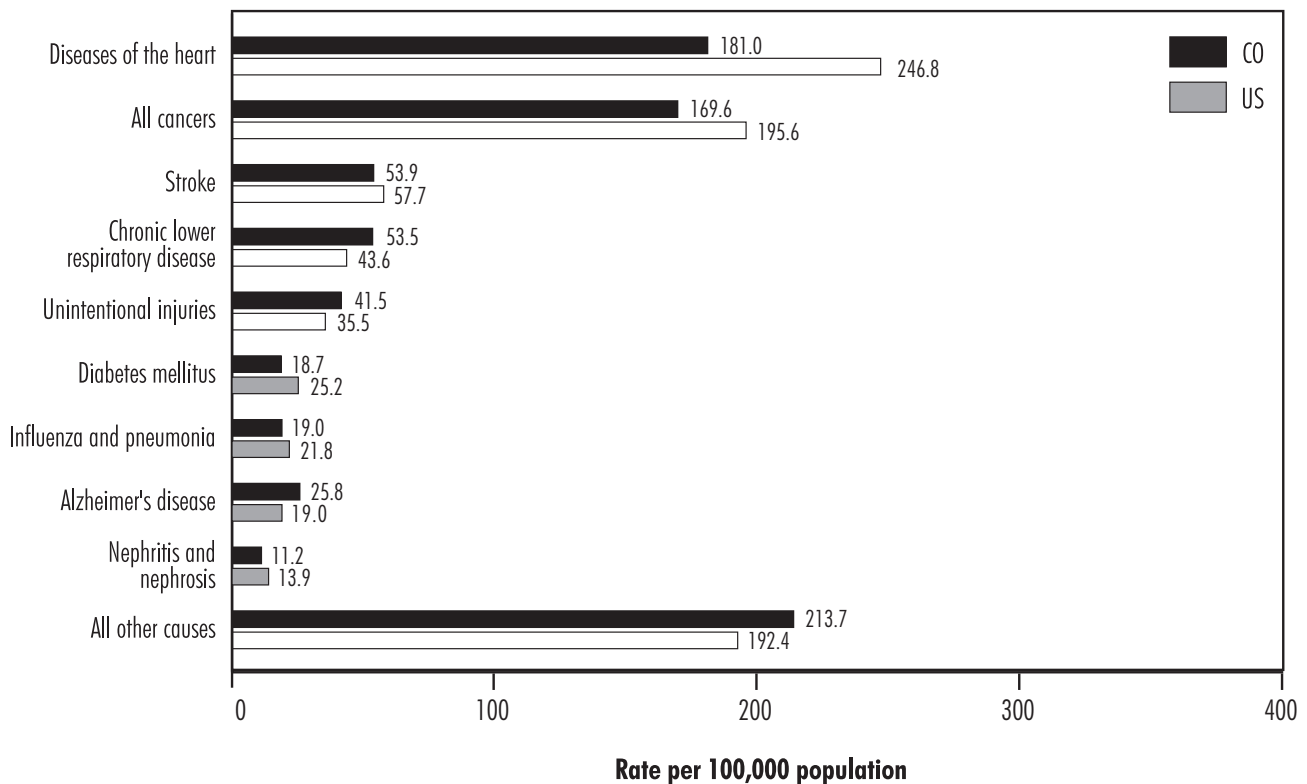
Diabetes

- In 2002, † 149,000 adults in Colorado had diagnosed diabetes.
- In 2001, diabetes was the cause of 667 deaths in Colorado.
- The rate of death from diabetes was 194% higher among Hispanics and 107% higher among blacks than among whites.

* American Cancer Society are data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Colorado Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Colorado: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, 21% of men and 19% of women reported current cigarette smoking.
- No leisure-time physical activity was reported by 40% of Hispanics, 24% of blacks, 17% of multiracial adults, 16% of Asians/Pacific Islanders, and 15% of whites.
- Eighty-three percent of men and 69% of women reported eating fewer than five servings of fruits and vegetables per day.
- According to self-reported height and weight, 72% of blacks, 65% of Hispanics, 58% of multiracial adults, 50% of whites, and 45% of Asians/Pacific Islanders were overweight.
- In 2001, 33% of men and 26% of women reported having high blood cholesterol.
- In 2001, 36% of blacks, 22% of whites, and 17% of Hispanics in Colorado reported having high blood pressure.

Risk Factors Among High School Students

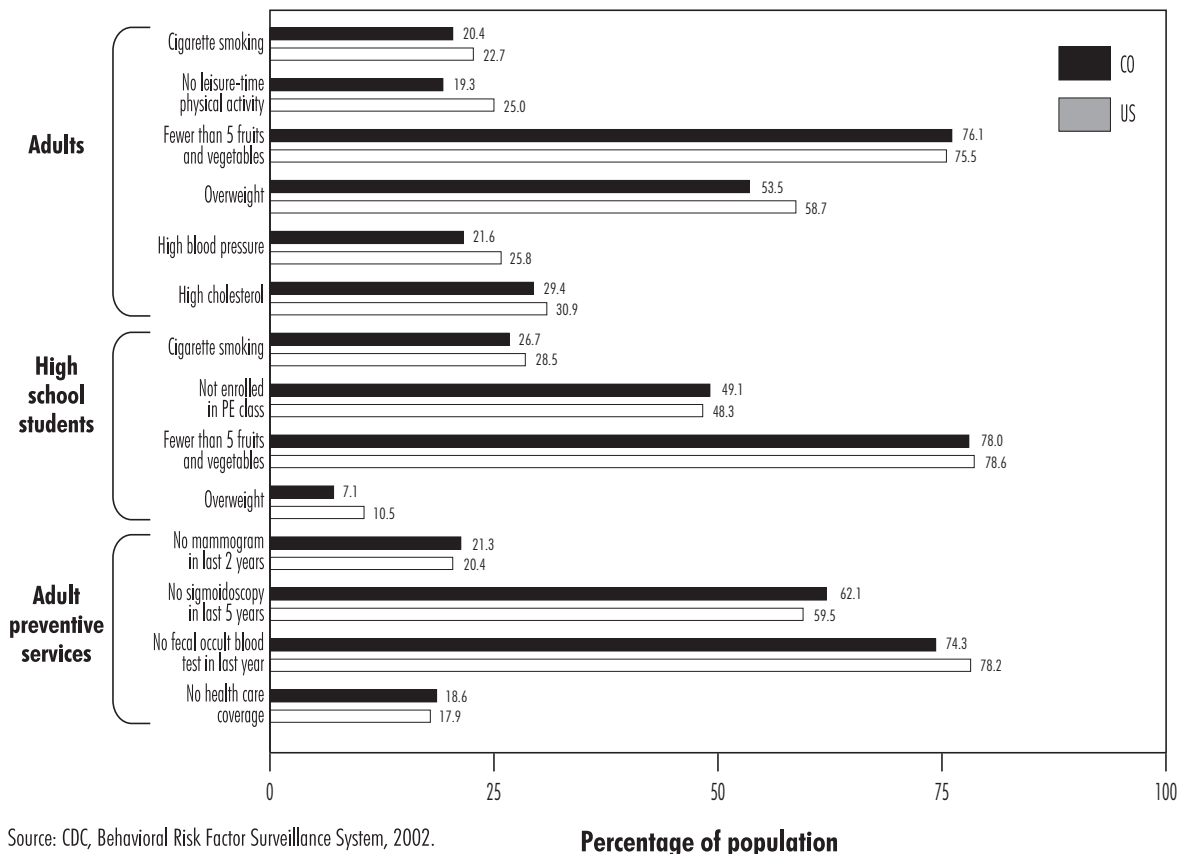
- Cigarette smoking was reported by 37% of Hispanic and 23% of white students in 2001.
- Forty-nine percent of students were not enrolled in physical education class.

- Eleven percent of male and 3% of female students were overweight.
- Seventy-eight percent of students ate fewer than five servings per day of fruits and vegetables during the 7 days preceding the survey.

Preventive Services

- Of women aged 50 years or older, 26% of Hispanics and 21% of whites reported not having had a mammogram within the last 2 years.
- Among adults aged 50 years or older, 64% of women and 61% of men reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Among adults aged 50 years or older, 85% of Hispanics and 73% of whites reported not having had a fecal occult blood test within the past year.
- Among adults aged 18–64, no health care coverage was reported by 41% of Hispanics, 13% of whites, and 9% of blacks.

Risk Factors and Preventive Services, Colorado Compared With United States



Connecticut: Burden of Chronic Diseases, 2001

Heart Disease

- Heart disease was the most common cause of death in Connecticut, accounting for 8,582 deaths, or 29% of all deaths.
- The rate of death from heart disease was 52% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 2003 deaths, or 7% of all deaths in Connecticut.
- The rate of death from stroke was 34% higher among blacks than among whites.

Cancer

- Cancer accounted for 24% of all deaths in Connecticut in 2001.
- The American Cancer Society estimates that 17,000 new cases of cancer will be diagnosed in Connecticut in 2004, including 2,000 new cases of lung cancer, 1,700 new cases of colorectal

cancer, and 2,900 new cases of breast cancer in women.

- The American Cancer Society estimates that 7,000 Connecticut residents will die of cancer in 2004.
- The rate of death from lung cancer was 50% higher among men than among women.*

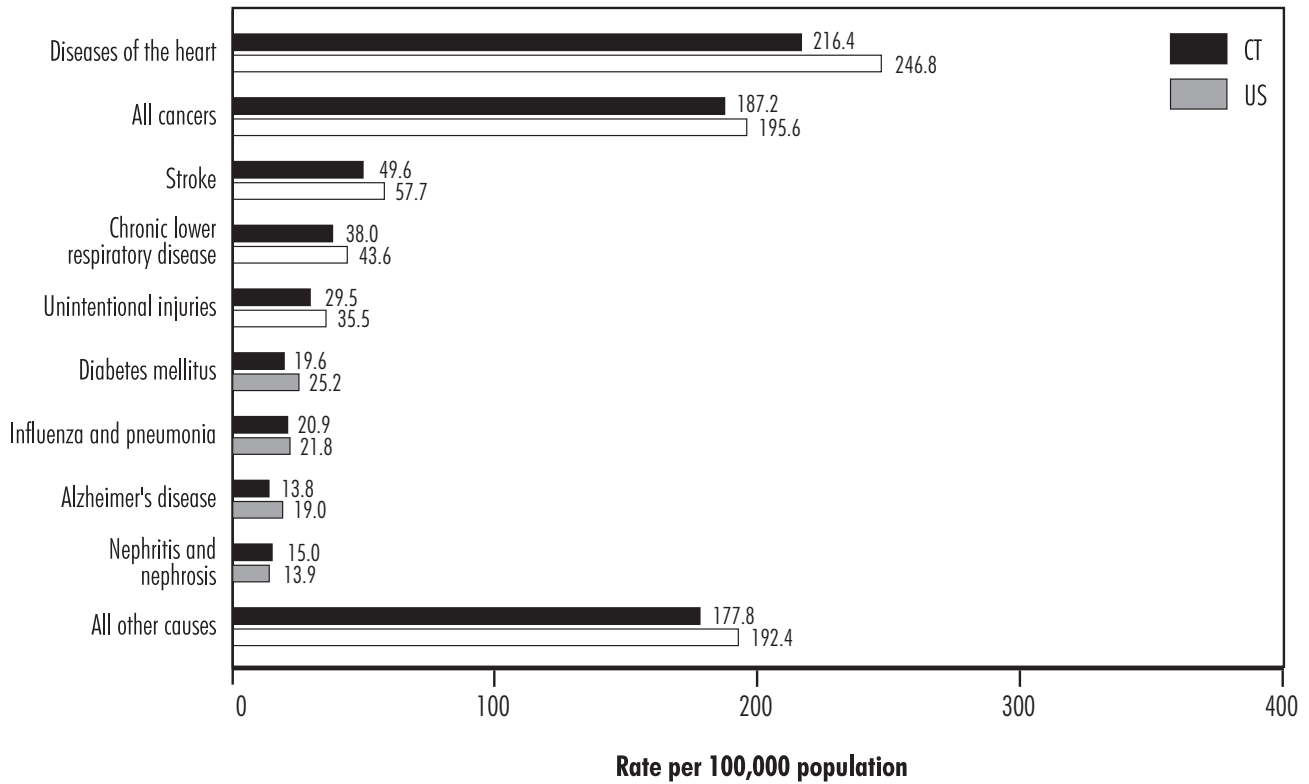
Diabetes

- In 2002, † 158,000 adults in Connecticut had diagnosed diabetes.
- In 2001, diabetes accounted for 759 deaths in Connecticut.
- The rate of death from diabetes was 176% higher among blacks than among whites.

* American Cancer Society are data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Connecticut Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Connecticut: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, current cigarette smoking was reported by 22% of Hispanics, 19% of whites, 18% of blacks, and 11% of Asians/Pacific Islanders in Connecticut.
- No leisure-time physical activity was reported by 39% of Hispanics, 30% of blacks and Asians/Pacific Islanders, and 19% of whites.
- Eating fewer than five servings of fruits and vegetables per day was reported by 74% of men and 66% of women.
- According to self-reported height and weight, 67% of men and 43% of women were overweight.
- In 2001, 31% of men and 29% of women reported having high blood cholesterol.
- In 2001, 28% of blacks, 25% of whites, 17% of Hispanics, and 6% of Asians/Pacific Islanders in Connecticut reported having high blood pressure.

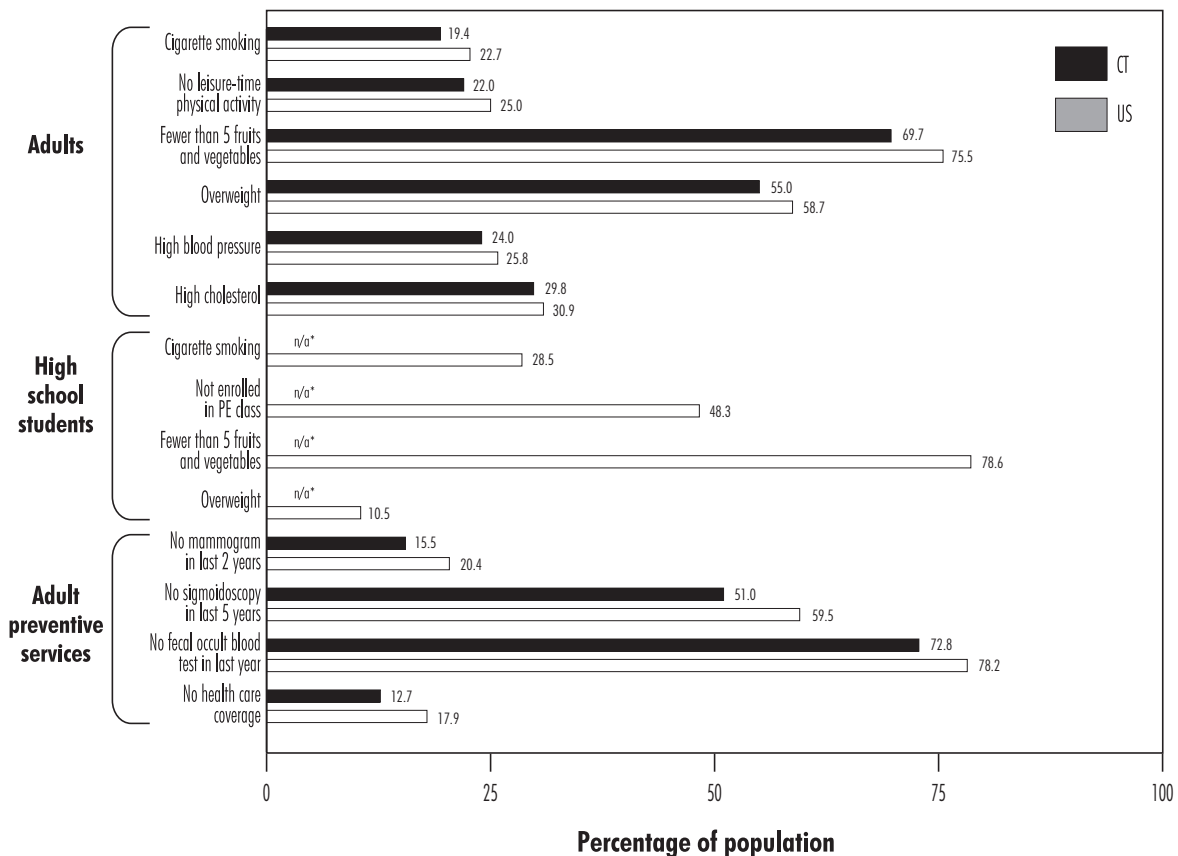
Risk Factors Among High School Students

- The 2001 YRBS was not conducted in Connecticut.

Preventive Services

- Of women aged 50 years or older, 16% reported not having had a mammogram within the last 2 years.
- Among adults aged 50 years or older, 53% of women and 49% of men reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Among adults aged 50 years or older, 77% of Hispanics, 72% of whites, and 68% of blacks reported not having had a fecal occult blood test within the past year.
- Among adults aged 18–64, 37% of Hispanics, 19% of blacks, 9% of whites, and 13% of Asians/Pacific Islanders reported having no health care coverage.

Risk Factors and Preventive Services, Connecticut Compared With United States



*Did not collect data on this topic.

Source: CDC, Behavioral Risk Factor Surveillance System, 2002.

CDC, Youth Risk Behavior Surveillance System, 2001.

Delaware: Burden of Chronic Diseases, 2001

Heart Disease

- Heart disease was the most common cause of death in Delaware in 2001, accounting for 29% of all deaths.
- The rate of death from heart disease was 43% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 5% of all deaths in Delaware.
- The rate of death from stroke was 43% higher among blacks than among whites.

Cancer

- Cancer accounted for 25% of all deaths in Delaware in 2001.

- The American Cancer Society estimates that 4,400 new cases of cancer will be diagnosed in Delaware in 2004, including 600 new cases of lung cancer, 400 new cases of colorectal cancer, and 700 new cases of breast cancer in women.
- The American Cancer Society estimates that 1,800 Delaware residents will die of cancer in 2004.
- The rate of death from lung cancer was 48% higher among men than among women.*

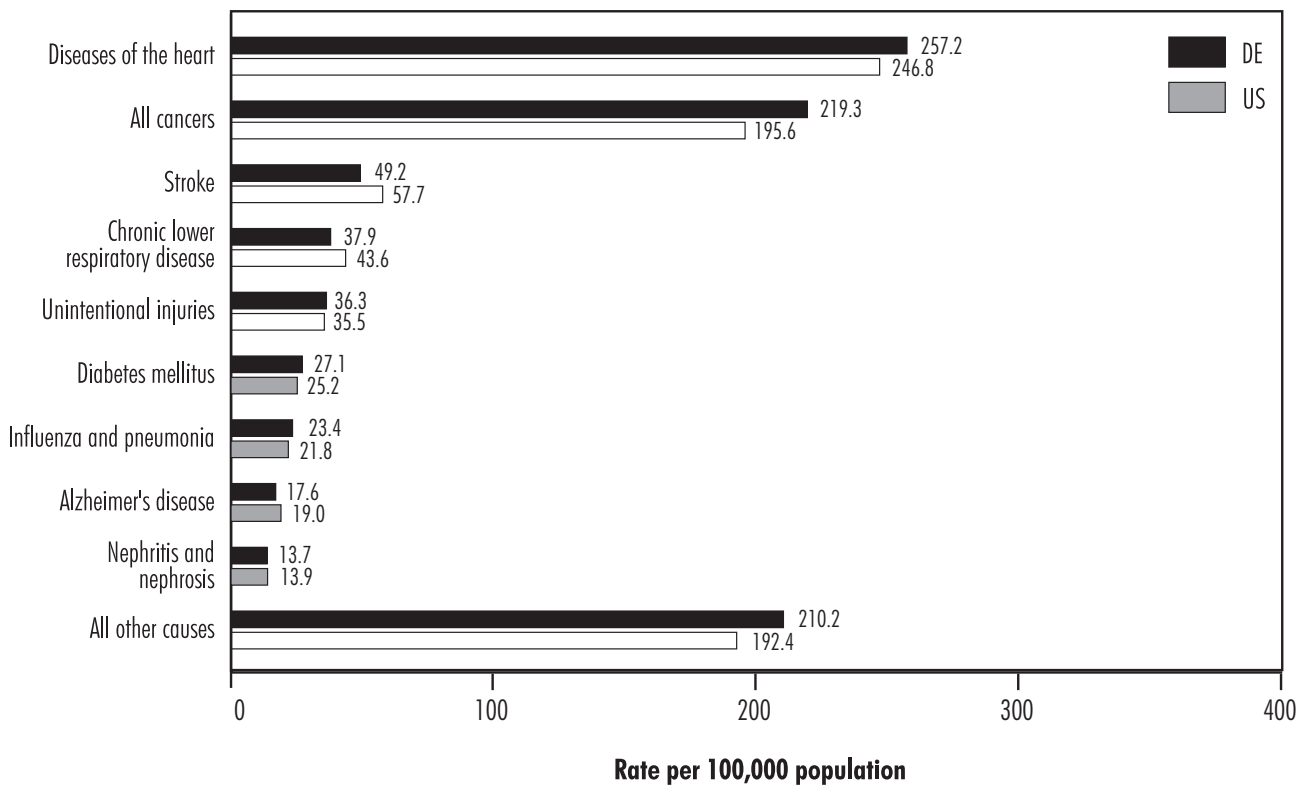
Diabetes

- In 2002,† 43,000 adults in Delaware had diagnosed diabetes.
- In 2001, diabetes accounted for 218 deaths in Delaware.
- The rate of death from diabetes was 106% higher among blacks than among whites.

* American Cancer Society data are rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Delaware Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Delaware: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, 26% of whites and blacks, 18% of Hispanics, and 8% of Asians/Pacific Islanders in Delaware reported current cigarette smoking.
- No leisure-time physical activity was reported by 49% of Hispanics, 43% of blacks, 38% of Asians/Pacific Islanders, and 23% of whites.
- Eating fewer than five servings of fruits and vegetables per day was reported by 86% of men and 76% of women.
- According to self-reported height and weight, 68% of men and 50% of women were overweight.
- In 2001, 32% of whites, 24% of blacks, and 19% of Hispanics in Delaware reported having high blood cholesterol.
- In 2001, high blood pressure was reported by 48% of multiracial adults, 33% of blacks, 27% of whites, and 13% of Hispanics.

Risk Factors Among High School Students

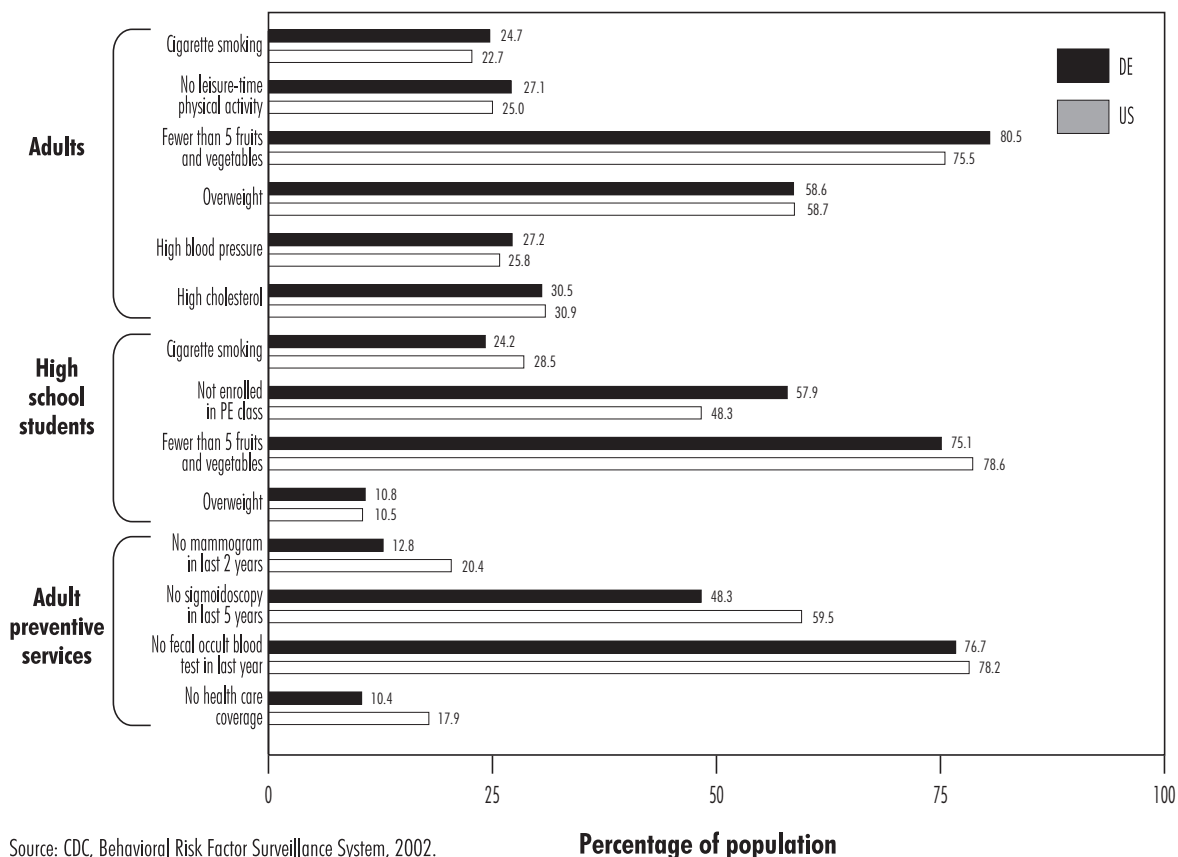
- In 2001, cigarette smoking was reported by 28% of white, 27% of Hispanic, and 13% of black students.
- Fifty-eight percent of students were not enrolled in physical education class.

- Thirteen percent of male and 9% of female students were overweight.
- Seventy-five percent of students ate fewer than five servings per day of fruits and vegetables during the 7 days preceding the survey.

Preventive Services

- Among women aged 50 years or older, whites were more than two times as likely as blacks to report not having had a mammogram within the last 2 years.
- Among adults aged 50 years or older, 53% of blacks and 49% of whites reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Among adults aged 50 years or older, 78% of women and 75% of men reported not having had a fecal occult blood test within the past year.
- Among adults aged 18–64, no health care coverage was reported by 22% of Hispanics, 13% of blacks, and 9% of whites.

Risk Factors and Preventive Services, Delaware Compared With United States



Source: CDC, Behavioral Risk Factor Surveillance System, 2002.
 CDC, Youth Risk Behavior Surveillance System, 2001.

District of Columbia: Burden of Chronic Diseases, 2001

Heart Disease

- In 2001, heart disease was the most common cause of death in the District of Columbia, accounting for 1,754 deaths or 30% of all deaths.
- The rate of death from heart disease was 41% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 265 deaths in the District of Columbia.
- The rate of death from stroke was 23% higher among blacks than among whites.

Cancer

- Cancer accounted for 22% of all deaths in the District of Columbia in 2001.
- The American Cancer Society estimates that 2,900

of new cases of cancer will be diagnosed in the District of Columbia in 2004, including 300 new cases of lung cancer, 300 new cases of colorectal cancer, and 600 new cases of breast cancer in women.*

- The American Cancer Society estimates that 1,200 District of Columbia residents will die of cancer in 2004.
- The rate of death from all cancers was 37% higher among blacks than among whites.

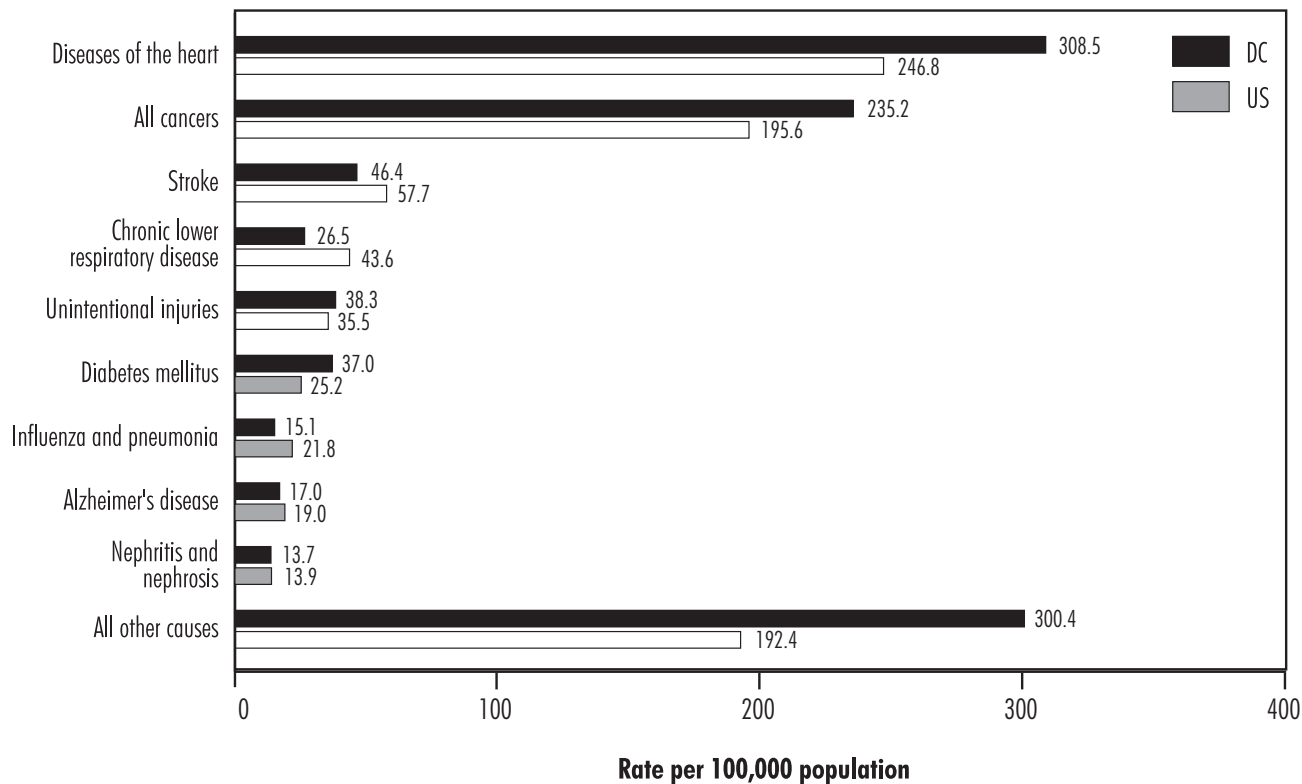
Diabetes

- In 2002,† 36,000 adults in the District of Columbia had diagnosed diabetes.
- In 2001, diabetes accounted for 209 deaths in the District of Columbia.
- The rate of death from diabetes was 254% higher among blacks than among whites.

* American Cancer Society data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, District of Columbia Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

District of Columbia: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, 28% of Hispanics, 25% of Asians/Pacific Islanders, 22% of blacks, and 15% of whites in the District of Columbia reported current cigarette smoking.
- No leisure-time physical activity was reported by 28% of blacks, 22% of Hispanics, and 19% of Asians/Pacific Islanders.
- Seventy-two percent of men and 62% of women reported eating fewer than five servings of fruits and vegetables per day.
- According to self-reported height and weight, 67% of blacks, 34% of Hispanics, and 33% of whites were overweight.
- In 2001, 33% of blacks, 28% of whites, and 20% of Hispanics reported having high blood cholesterol.
- In 2001, 31% of women and 26% of men in the District of Columbia reported having high blood pressure.

Risk Factors Among High School Students

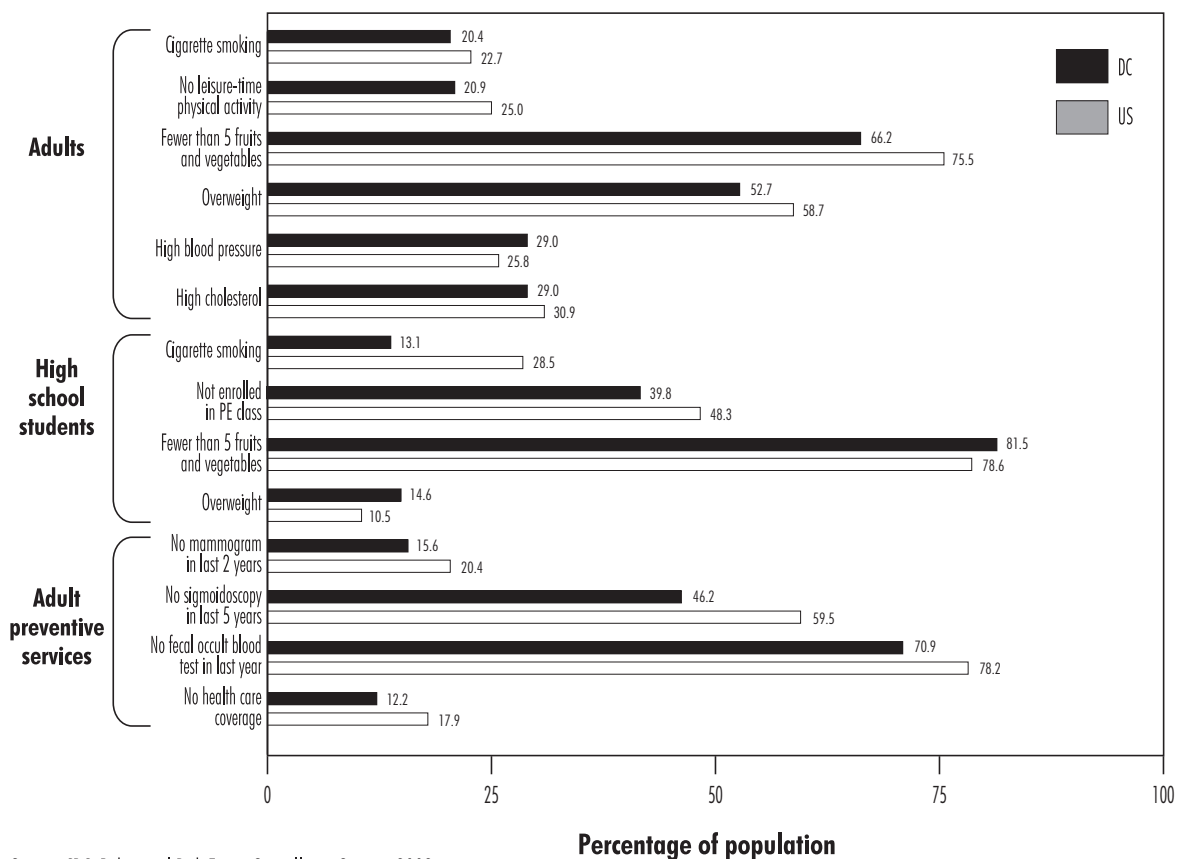
- In 2001, 16% of male and 11% of female students in the District of Columbia reported smoking cigarettes.
- Forty percent of students were not enrolled in PE class.

- Sixteen percent of male and 13% of female students were overweight.
- In 2001, 82% of students in the District of Columbia reported eating fewer than five servings of fruits and vegetables per day during the 7 days preceding the survey.

Preventive Services

- Of women aged 50 years or older, 19% of whites and 14% of blacks reported not having had a mammogram within the last 2 years.
- Among adults aged 50 years or older, 47% of men and 46% of women reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Among adults aged 50 years or older, 74% of blacks and 66% of whites reported not having had a fecal occult blood test within the past year.
- Among adults aged 18–64, no health care coverage was reported by 23% of Hispanics, 14% of blacks, and 7% of whites.

Risk Factors and Preventive Services, District of Columbia Compared With United States



Source: CDC, Behavioral Risk Factor Surveillance System, 2002.

CDC, Youth Risk Behavior Surveillance System, 2001.

Florida: Burden of Chronic Diseases, 2001

Heart Disease

- In 2001, heart disease was the most common cause of death in Florida, accounting for 50,621 deaths, or 30% of all deaths.
- The rate of death from heart disease was 50% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 10,413 deaths in Florida.
- The rate of death from stroke was 88% higher among blacks than among whites.

Cancer

- Cancer accounted for 39,088 deaths, or 23% of all deaths in Florida in 2001.
- The American Cancer Society estimates that 97,300 new cases

of cancer will be diagnosed in Florida in 2004, including 13,400 new cases of lung cancer, 10,000 new cases of colorectal cancer, and 13,400 new cases of breast cancer in women.

- The American Cancer Society estimates that 40,100 Florida residents will die of cancer in 2004.
- The rate of death from lung cancer was 70% higher among men than among women.*

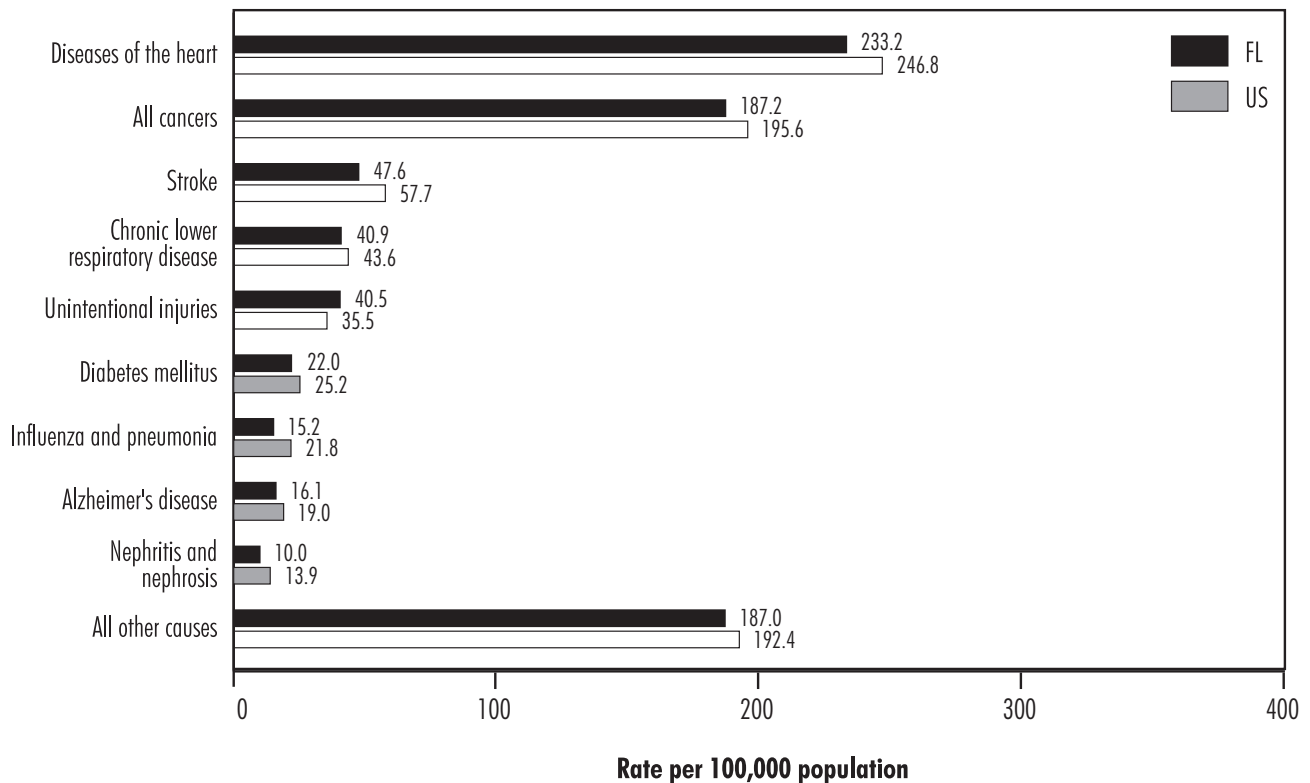
Diabetes

- In 2002,† 1,000,000 adults in Florida had diagnosed diabetes.
- In 2001, diabetes accounted for 4,631 deaths in Florida.
- The rate of death from diabetes was 174% higher among blacks than among whites.

* American Cancer Society are data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Florida Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Florida: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, current cigarette smoking was reported by 33% of American Indians/Alaska Natives, 23% of whites, 20% of Asians/Pacific Islanders, 19% of Hispanics, and 18% of blacks in Florida.
- No leisure-time physical activity was reported by 37% of blacks, 35% of Hispanics, 32% of Asians/Pacific Islanders, 30% of American Indians/Alaska Natives, and 24% of whites.
- Seventy-seven percent of men and 69% of women reported eating fewer than five servings of fruits and vegetables per day.
- According to self-reported height and weight, 65% of men and 49% of women were overweight.
- In 2001, 32% of women and 30% of men reported having high blood cholesterol.
- In 2001, 31% of blacks, 28% of whites, 22% of Hispanics, and 14% of Asians/Pacific Islanders in Florida reported having high blood pressure.

Risk Factors Among High School Students

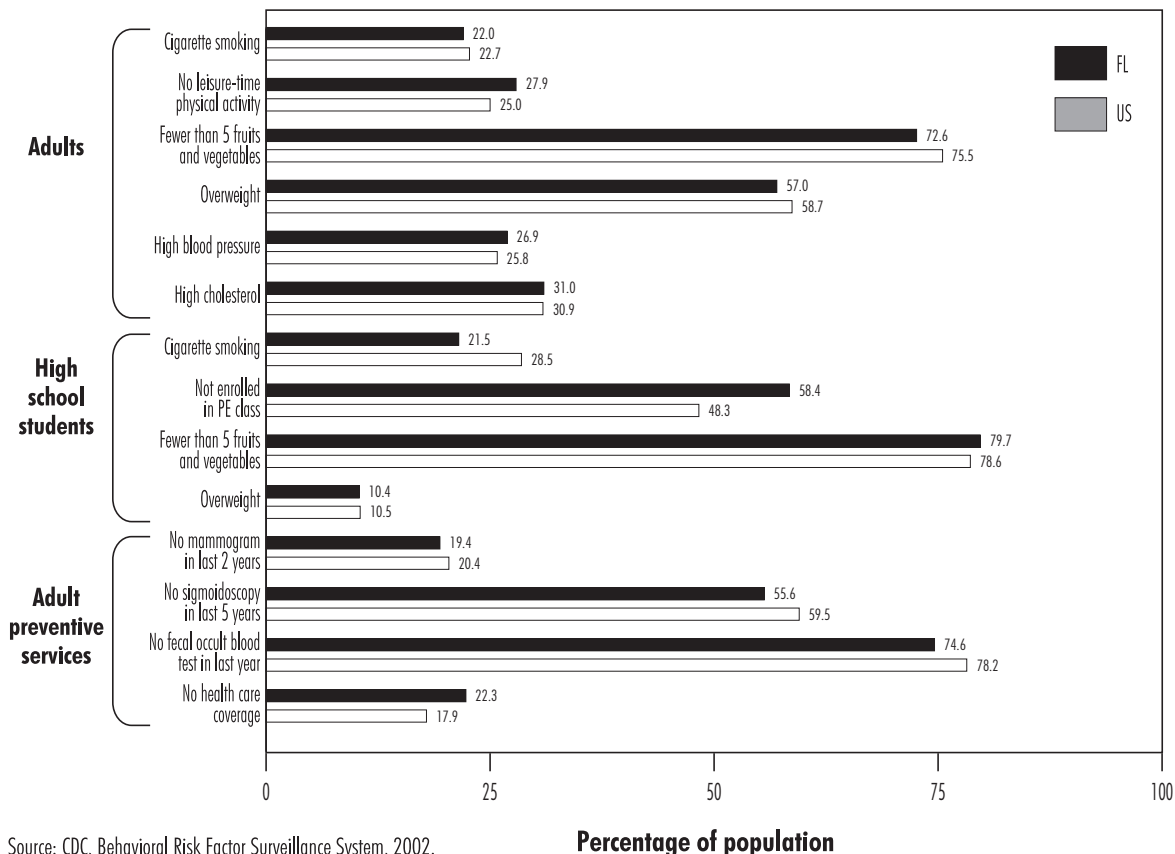
- Cigarette smoking was reported by 27% of white, 22% of Hispanic, and 9% of black students in 2001.

- Fifty-eight percent of students were not enrolled in physical education class.
- Fourteen percent of male and 7% of female students were overweight.
- Eighty percent of students ate fewer than five servings per day of fruits and vegetables during the 7 days preceding the survey.

Preventive Services

- Of women aged 50 years or older, 31% of Hispanics, 21% of blacks, and 18% of whites reported not having had a mammogram within the last 2 years.
- Among adults aged 50 years or older, 61% of Hispanics, 61% of blacks, and 54% of whites reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Among adults aged 50 years or older, 85% of Hispanics, 82% of blacks, and 72% of whites reported not having had a fecal occult blood test within the past year.
- Among adults aged 18-64, 32% of Hispanics, 29% of blacks, 20% of Asians/Pacific Islanders, and 18% of whites reported having no health care coverage.

Risk Factors and Preventive Services, Florida Compared With United States



Source: CDC, Behavioral Risk Factor Surveillance System, 2002.
 CDC, Youth Risk Behavior Surveillance System, 2001.

Georgia: Burden of Chronic Diseases, 2001

Heart Disease

- Heart disease accounted for 17,476 deaths or 27% of all deaths in 2001.
- The rate of death from heart disease was 51% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 7% of all deaths in Georgia.
- The rate of death from stroke was 42% higher among blacks than among whites.

Cancer

- Cancer accounted for 21% of all deaths in Georgia in 2001.
- The American Cancer Society estimates that 35,400 new cases

of cancer will be diagnosed in Georgia in 2004, including 5,100 new cases of lung cancer; 3,400 new cases of colorectal cancer, and 6,100 new cases of breast cancer in women.*

- The American Cancer Society estimates that 14,600 Georgia residents will die of cancer in 2004.
- The rate of death from all cancers was 59% higher among men than among women.

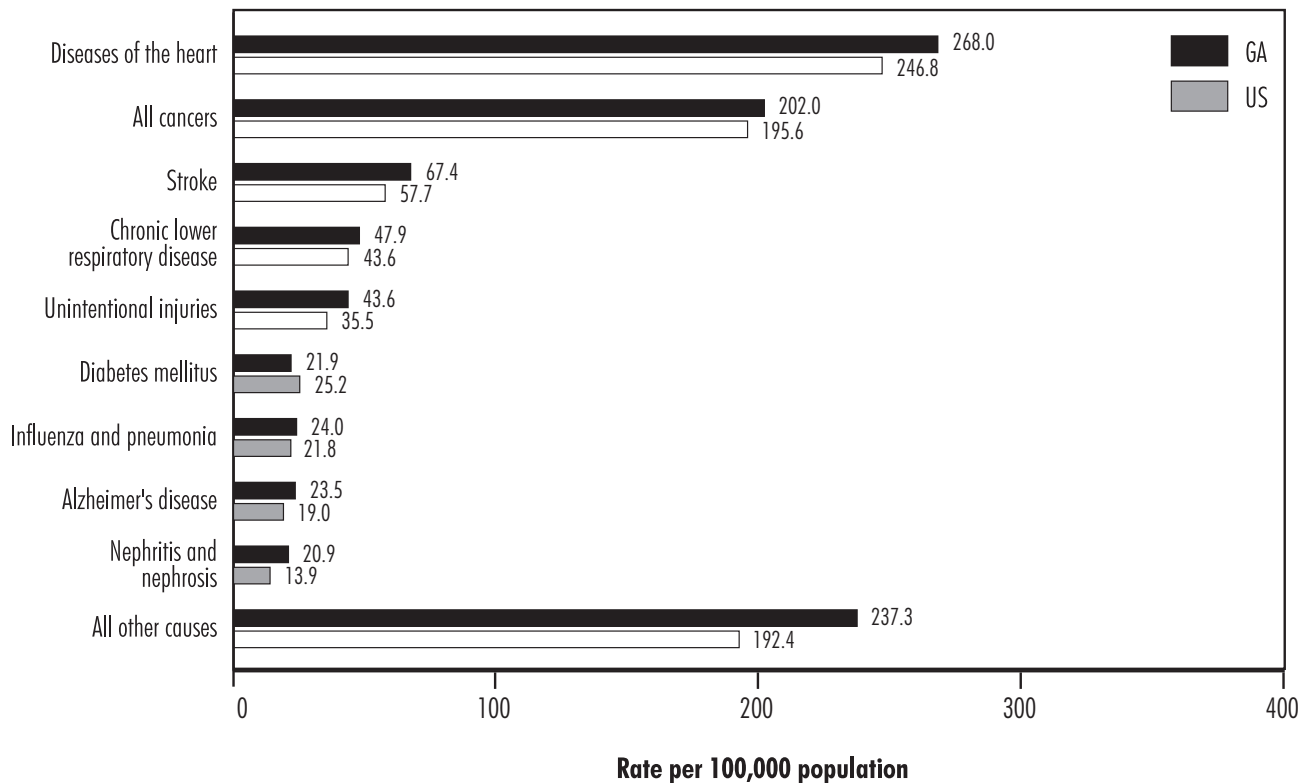
Diabetes

- In 2002,† 432,000 adults in Georgia had diagnosed diabetes.
- In 2001, diabetes accounted for 1,475 deaths in Georgia.
- The rate of death from diabetes was 124% higher among blacks than among whites.

* American Cancer Society are data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Georgia Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Georgia: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, 27% of men and 20% of women in Georgia reported current cigarette smoking.
- No leisure-time physical activity was reported by 40% of Hispanics, 32% of blacks, 24% of multiracial adults, and 22% of whites.
- Eighty percent of men and 75% of women in Georgia reported eating fewer than five servings of fruits and vegetables per day.
- According to self-reported height and weight, 69% of Hispanics, 67% of blacks, and 56% of whites and multiracial adults were overweight.
- In 2001, 35% of whites, 31% of Hispanics, and 27% of blacks in Georgia reported having high blood cholesterol.
- In 2001, 31% of blacks, 26% of whites, and 20% of Hispanics reported having high blood pressure.

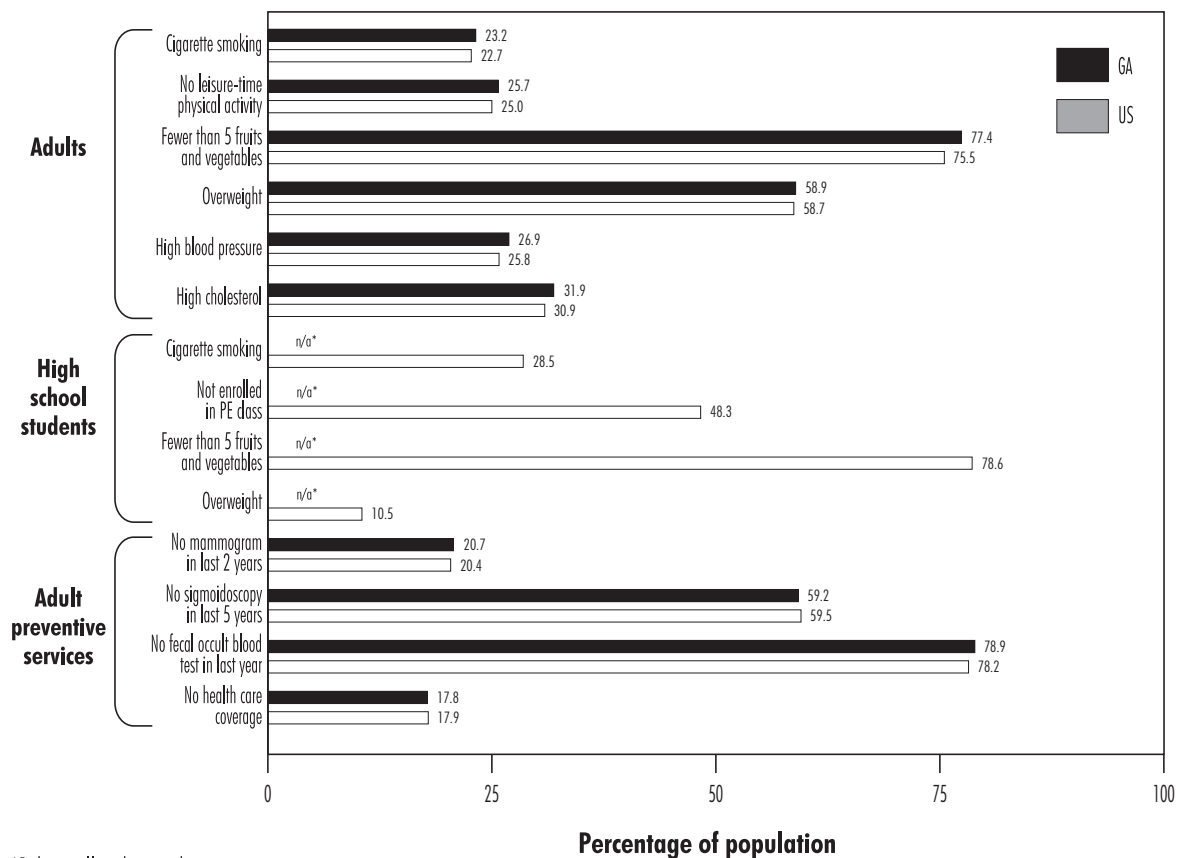
Risk Factors Among High School Students

- The 2001 YRBS was not conducted in Georgia.

Preventive Services

- Among women aged 50 years or older, 23% of blacks and 20% of whites reported not having had a mammogram within the last 2 years.
- Among adults aged 50 years or older, 62% of blacks and 59% of whites reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Among adults aged 50 years or older, 80% of women and 77% of men reported not having had a fecal occult blood test within the past year.
- Among adults aged 18–64, no health care coverage was reported by 29% of Hispanics, 25% of blacks, and 13% of whites.

Risk Factors and Preventive Services, Georgia Compared With United States



*Did not collect data on this topic.

Source: CDC, Behavioral Risk Factor Surveillance System, 2002.

CDC, Youth Risk Behavior Surveillance System, 2001.

Hawaii: Burden of Chronic Diseases, 2001

Heart Disease

- Heart disease was the most common cause of death in Hawaii in 2001, accounting for 2,310 deaths.
- The rate of death from heart disease was 63% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 766 deaths, or 9% of all deaths in Hawaii.
- The rate of death from stroke was 24% lower among Asians/Pacific Islanders and 81% higher among Hispanics than among whites.

Cancer

- In 2001, cancer accounted for 24% of all deaths in Hawaii.

- The American Cancer Society estimates that 5,100 new cases of cancer will be diagnosed in Hawaii in 2004, including 600 new cases of lung cancer, 500 new cases of colorectal cancer, and 800 new cases of breast cancer in women.*
- The American Cancer Society estimates that 2,100 Hawaii residents will die of cancer in 2004.
- The rate of death from all cancers was 51% higher among men than among women.

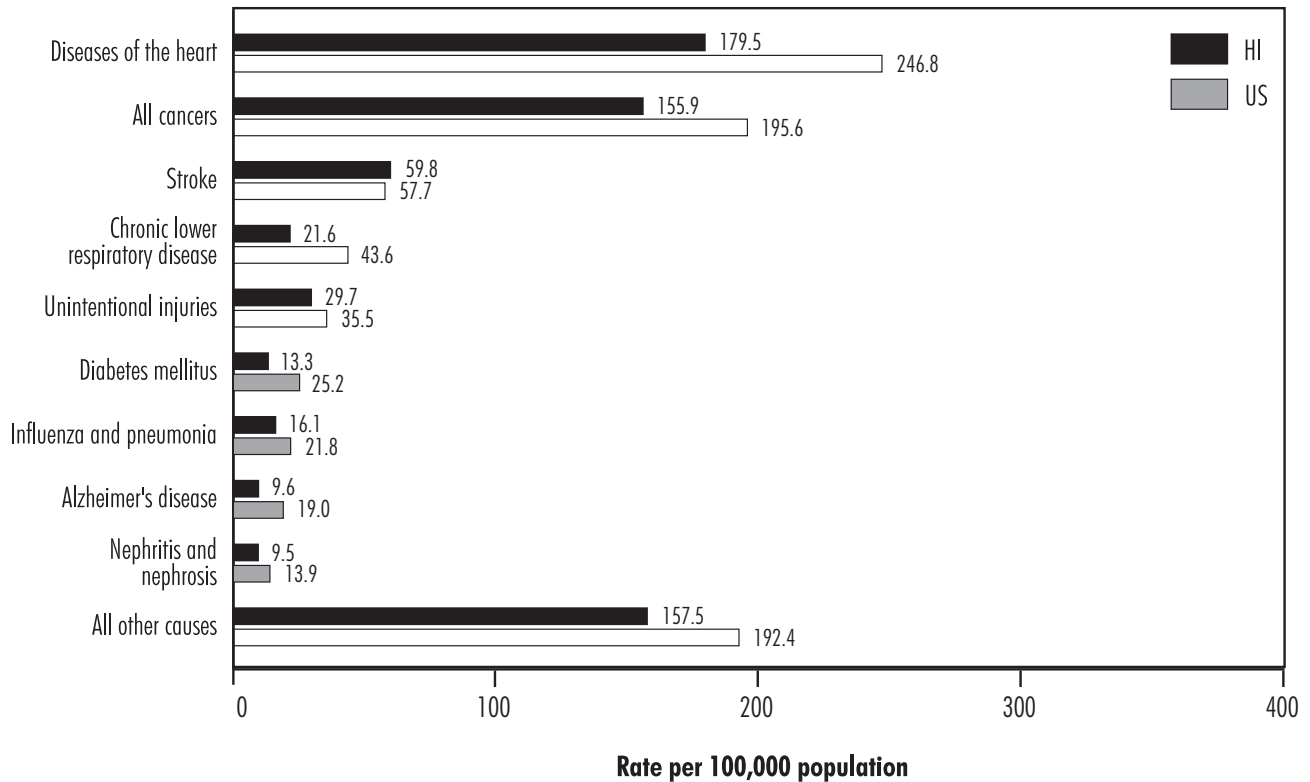
Diabetes

- In 2002,† 55,000 adults in Hawaii had diagnosed diabetes.
- In 2001, diabetes accounted for 173 deaths in Hawaii.
- The rate of death from diabetes was 116% higher among Asians/Pacific Islanders than among whites.

* American Cancer Society are data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Hawaii Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Hawaii: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, current cigarette smoking was reported by 26% of men and 16% of women in Hawaii.
- No leisure-time physical activity was reported by 21% of Asians/Pacific Islanders, 18% of Hispanics, 14% of multiracial adults, 10% of whites, and 5% of blacks.
- Eighty-four percent of men and 76% of women in Hawaii reported eating fewer than five servings of fruits and vegetables per day.
- According to self-reported height and weight, 67% of blacks, 65% of multiracial adults, 51% of Hispanics and whites, and 49% of Asians/Pacific Islanders were overweight.
- In 2001, 28% of Asians/Pacific Islanders, 24% of Hispanics, and 22% of whites and multiracial persons in Hawaii reported having high blood cholesterol.
- In 2001, 28% of Asians/Pacific Islanders, 25% of multiracial persons, 21% of blacks, 19% of whites, and 15% of Hispanics reported having high blood pressure.

Risk Factors Among High School Students

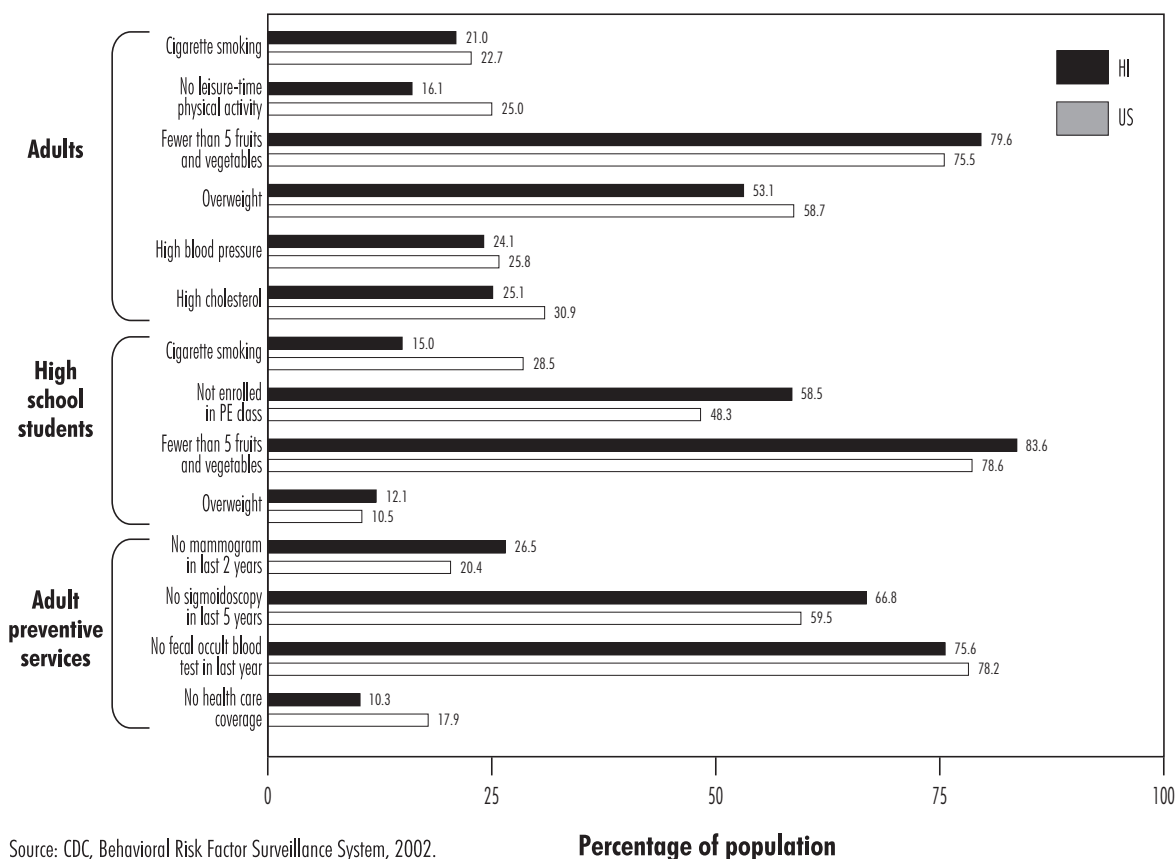
- In 2001, 15% of students in Hawaii reported cigarette smoking.

- Fifty-nine percent of students were not enrolled in physical education class.
- Seventeen percent of male and 8% of female students were overweight.
- Eighty-four percent of students ate fewer than five servings per day of fruits and vegetables during the 7 days preceding the survey.

Preventive Services

- Among women aged 50 years or older, 29% of Asians/Pacific Islanders, 24% of whites, and 24% of multiracial adults reported not having had a mammogram within the last 2 years.
- Sixty-seven percent of adults aged 50 years or older reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Among adults aged 50 years or older, 80% of multiracial adults, 78% of Hispanics, 75% of Asians/Pacific Islanders, and 74% of whites reported not having had a fecal occult blood test within the past year.
- Among adults aged 18–64 years old, no health care coverage was reported by 11% of men and 9% of women.

Risk Factors and Preventive Services, Hawaii Compared With United States



Source: CDC, Behavioral Risk Factor Surveillance System, 2002.
 CDC, Youth Risk Behavior Surveillance System, 2001.

Idaho: Burden of Chronic Diseases, 2001

Heart Disease

- In 2001, heart disease was the most common cause of death in Idaho, accounting for 2,489 deaths, or 26% of all deaths.
- The rate of death from heart disease was 63% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 781 deaths, or 8% of all deaths in Idaho.
- The rate of death from stroke was 14% higher among women than among men.

Cancer

- Cancer accounted for 22% of all deaths in Idaho in 2001.

- The American Cancer Society estimates that 5,500 new cases of cancer will be diagnosed in Idaho in 2004, including 700 new cases of lung cancer, 500 new cases of colorectal cancer, and 900 new cases of breast cancer in women.*
- The American Cancer Society estimates that 2,300 Idaho residents will die of cancer in 2004.
- The rate of death from lung cancer was 66% higher among men than among women.

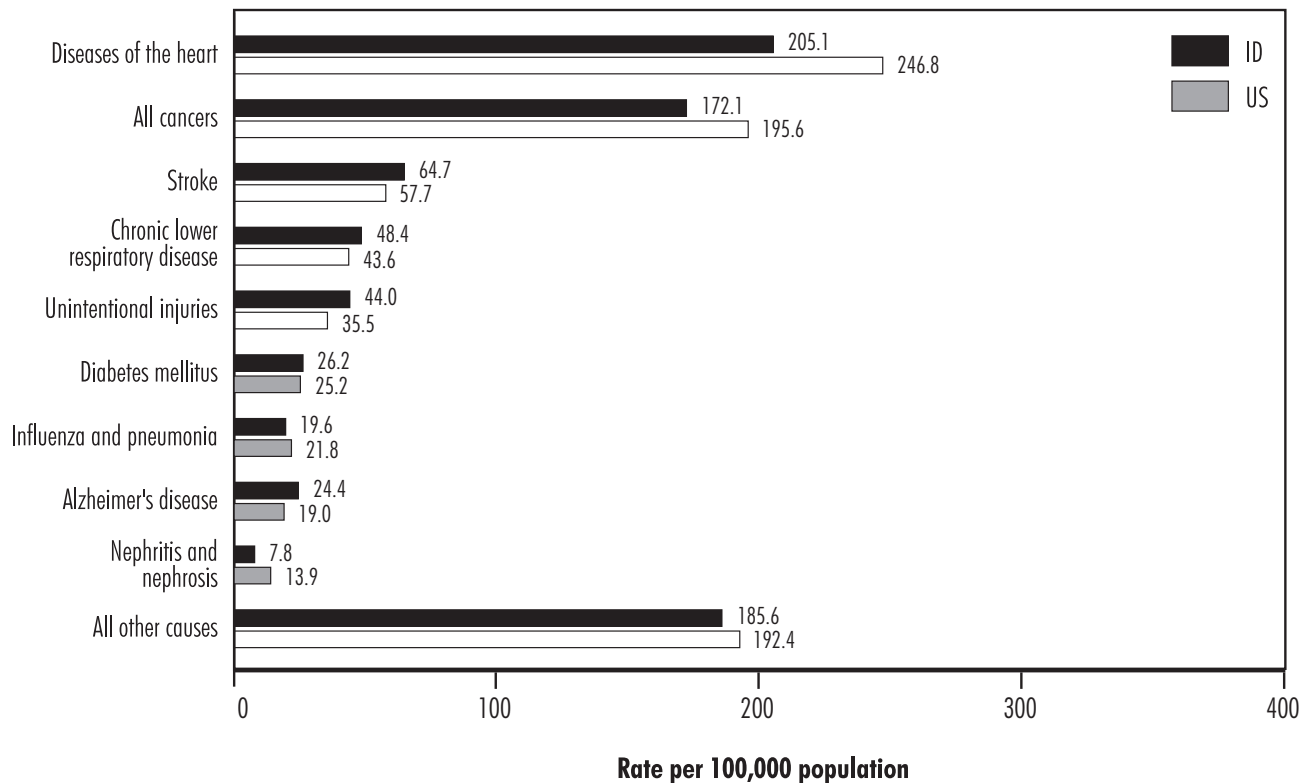
Diabetes

- In 2002,† 55,000 adults in Idaho had diagnosed diabetes.
- In 2001, diabetes accounted for 318 deaths in Idaho.

* American Cancer Society data are rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Idaho Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Idaho: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, current cigarette smoking was reported by 33% of American Indians/Alaska Natives, 30% of multiracial adults, 21% of Hispanics, and 20% of whites.
- No leisure-time physical activity was reported by 29% of Hispanics, 19% of American Indians/Alaska Natives and whites, and 13% of multiracial adults.
- Eighty-four percent of men and 73% of women reported eating fewer than five servings of fruits and vegetables per day.
- According to self-reported height and weight, 66% of men and 48% of women were overweight.
- In 2001, 30% of whites and multiracial persons and 24% of Hispanics in Idaho reported having high blood cholesterol.
- In 2001, 32% of multiracial persons, 25% of whites, 20% of American Indians/Alaska Natives, and 19% of Hispanics reported having high blood pressure.

- Fifty-seven percent of students were not enrolled in physical education class.
- Ten percent of male and 5% of female students were overweight.
- Eighty-two percent of students ate fewer than five servings per day of fruits and vegetables during the 7 days preceding the survey.

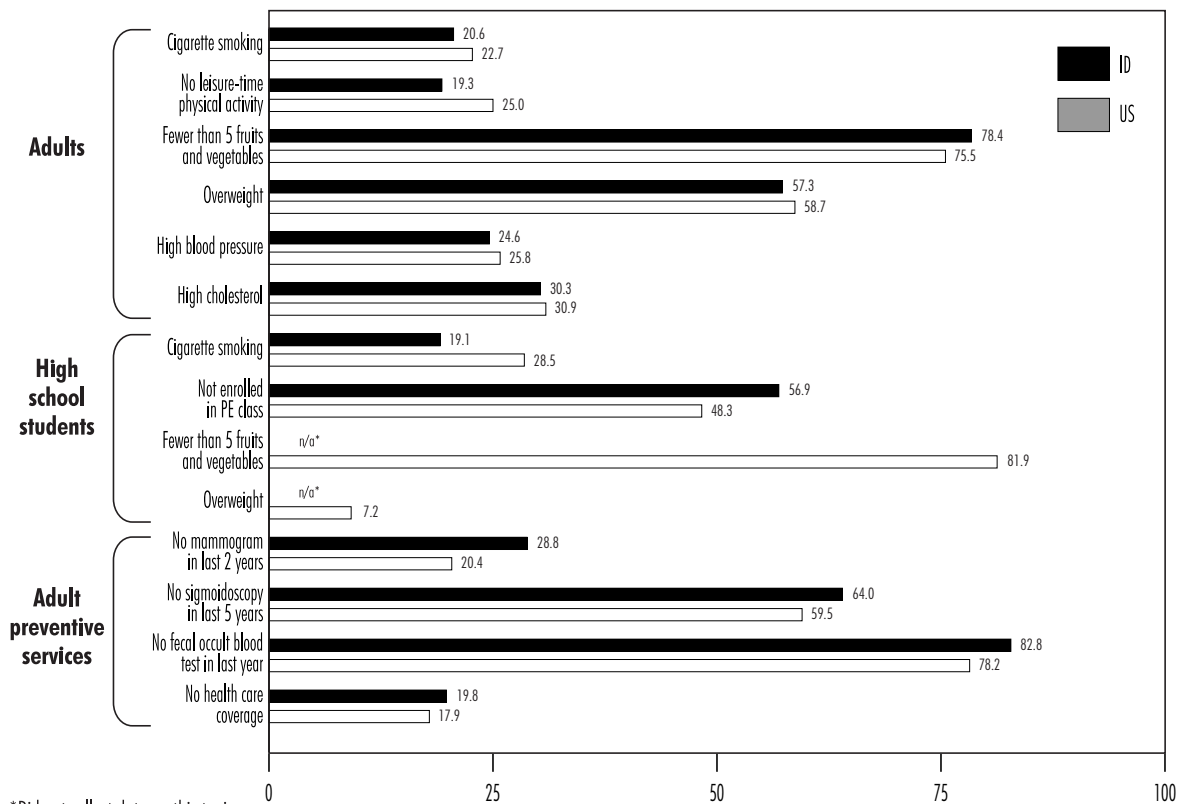
Preventive Services

- Among women aged 50 years or older, 29% reported not having had a mammogram within the last 2 years.
- Sixty-four percent of adults aged 50 years or older reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Among adults aged 50 years or older, 84% of men and 82% of women reported not having had a fecal occult blood test within the past year.
- Among adults aged 18–64, no health care coverage was reported by 34% of Hispanics, 31% of multiracial adults, and 19% of whites.

Risk Factors Among High School Students

- Nineteen percent of high school students in Idaho reported cigarette smoking in 2001.

Risk Factors and Preventive Services, Idaho Compared With United States



*Did not collect data on this topic.

Source: CDC, Behavioral Risk Factor Surveillance System, 2002.

CDC, Youth Risk Behavior Surveillance System, 2001.

Illinois: Burden of Chronic Diseases, 2001

Heart Disease

- In 2001, heart disease was the most common cause of death in Illinois, accounting for 30,990 deaths or 29% of all deaths.
- The rate of death from heart disease was 48% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 7,230 deaths, or 7% of all deaths in Illinois.
- The rate of death from stroke was 35% higher among blacks than among whites.

Cancer

- Cancer accounted for 24,778 deaths, or 24% of all deaths in Illinois in 2001.

- The American Cancer Society estimates that 60,300 new cases of cancer will be diagnosed in Illinois in 2004, including 7,300 new cases of lung cancer, 6,700 new cases of colorectal cancer, and 9,600 new cases of breast cancer in women.*
- The American Cancer Society estimates that 24,800 Illinois residents will die of cancer in 2004.
- The rate of death from lung cancer was 92% higher among men than among women.

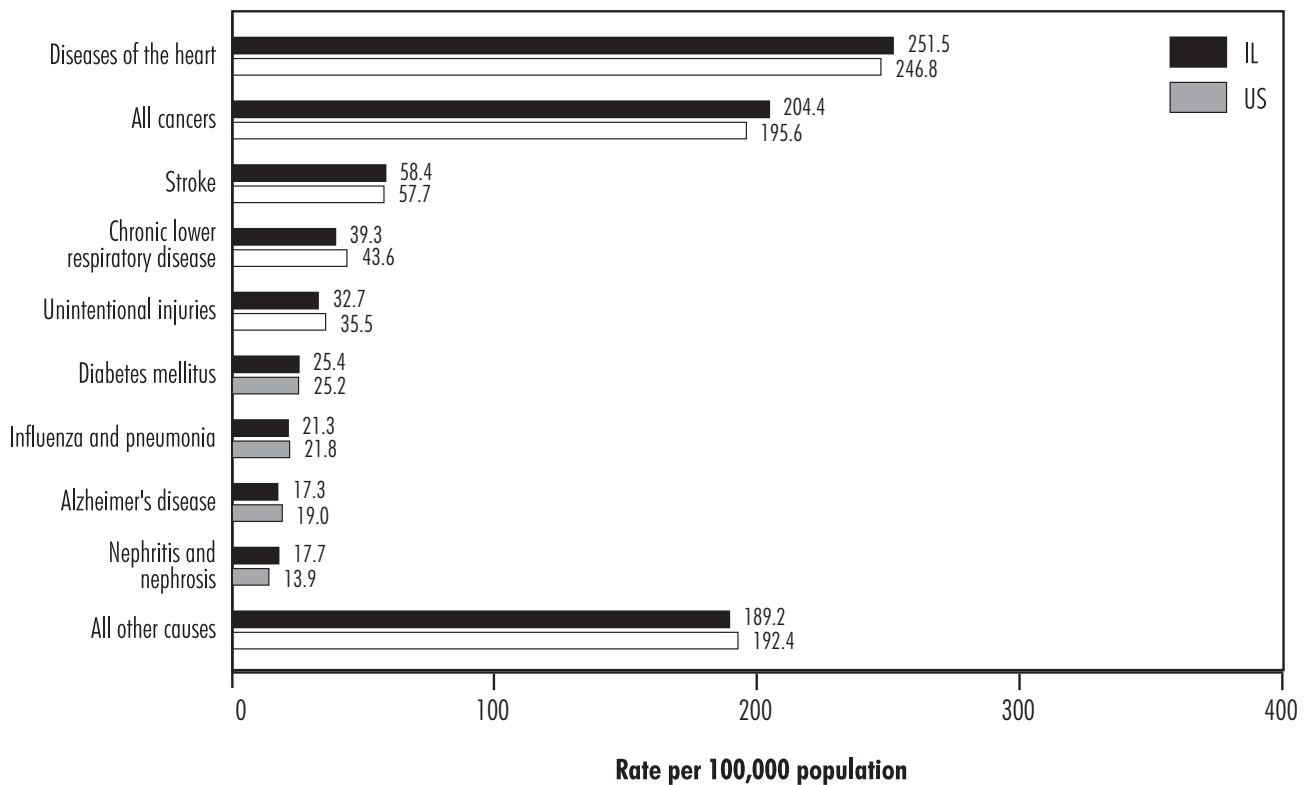
Diabetes

- In 2002,† 625,000 adults in Illinois had diagnosed diabetes.
- In 2001, diabetes accounted for 3,092 deaths in Illinois.
- The rate of death from diabetes was 90% higher among blacks and 40% higher among Hispanics than among whites.

* American Cancer Society are data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Illinois Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Illinois: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, 26% of men and 20% of women in Illinois reported current cigarette smoking.
- No leisure-time physical activity was reported by 47% of Hispanics, 34% of blacks, 26% of Asians/Pacific Islanders, and 24% of whites.
- Eating fewer than five servings of fruits and vegetables per day was reported by 83% of men and 76% of women.
- According to self-reported height and weight, 71% of blacks, 66% of Hispanics, 57% of whites, and 37% of Asians/Pacific Islanders were overweight.
- In 2001, 31% of whites, 30% of blacks, and 18% of Hispanics in Illinois reported having high blood cholesterol.
- In 2001, 32% of blacks, 27% of multiracial persons, 26% of whites, and 13% of Hispanics reported having high blood pressure.

Risk Factors Among High School Students

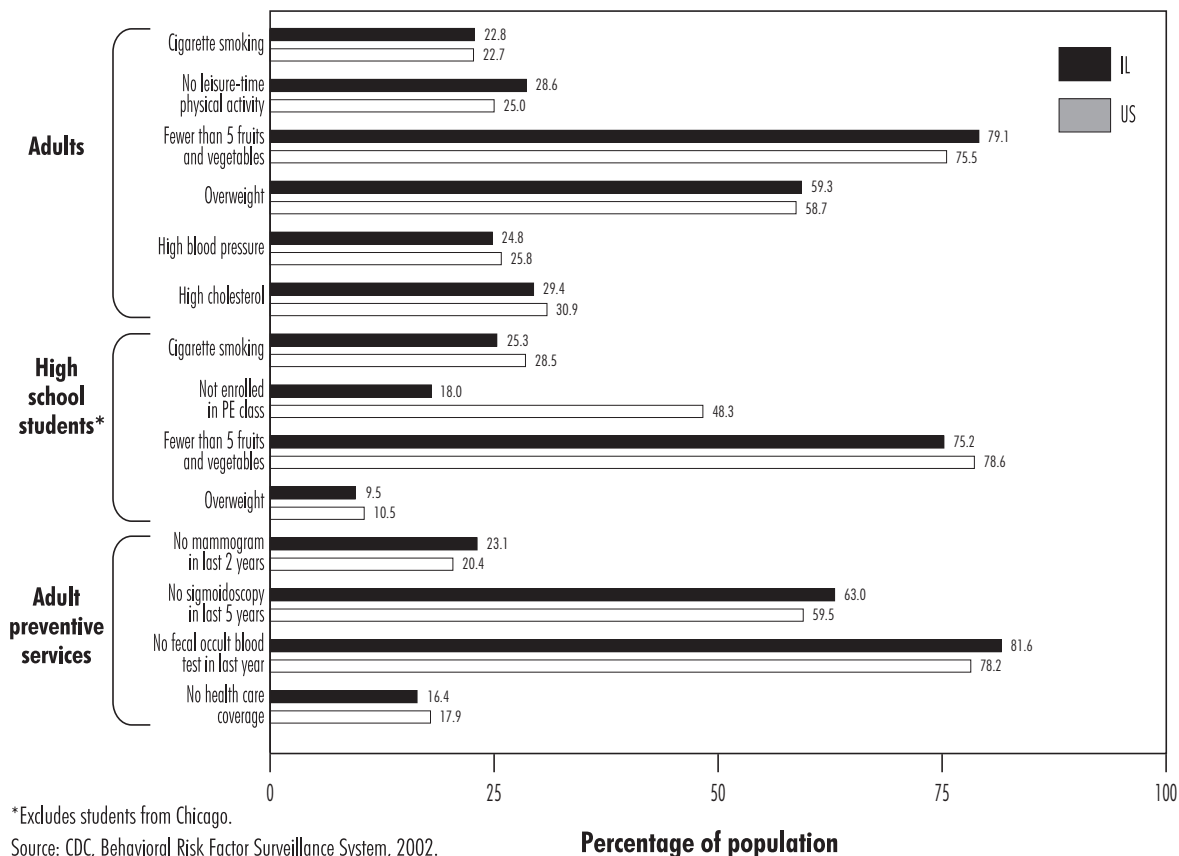
- In 2001, 25% of students reported cigarette smoking.

- Eighteen percent of students were not enrolled in physical education class.
- Fifteen percent of male and 5% of female students were overweight.
- Seventy-five percent of students ate fewer than five servings per day of fruits and vegetables during the 7 days preceding the survey.

Preventive Services

- Of women aged 50 years or older, 23% reported not having had a mammogram within the last 2 years.
- Among adults aged 50 years or older, 65% of men and 62% of women reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Among adults aged 50 years or older, 82% reported not having had a fecal occult blood test within the past year.
- Among adults aged 18–64, no health care coverage was reported by 37% of Hispanics, 23% of blacks, 11% of whites, and 6% of Asians/Pacific Islanders.

Risk Factors and Preventive Services, Illinois Compared With United States



Indiana: Burden of Chronic Diseases, 2001

Heart Disease

- In 2001, heart disease was the most common cause of death in Indiana, accounting for 15,682 deaths, or 28% of all deaths.
- The rate of death from heart disease was 55% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 3,877 deaths, or 7% of all deaths in Indiana.
- The rate of death from stroke was 30% higher among blacks than among whites.

Cancer

- In 2001, cancer accounted for 23% of all deaths in Indiana.

- The American Cancer Society estimates that 32,200 new cases of cancer will be diagnosed in Indiana in 2004, including 4,500 new cases of lung cancer, 3,500 new cases of colorectal cancer, and 4,800 new cases of breast cancer in women.*
- The American Cancer Society estimates that 13,300 Indiana residents will die of cancer in 2004.
- The rate of death from lung cancer was 106% higher among men than among women.

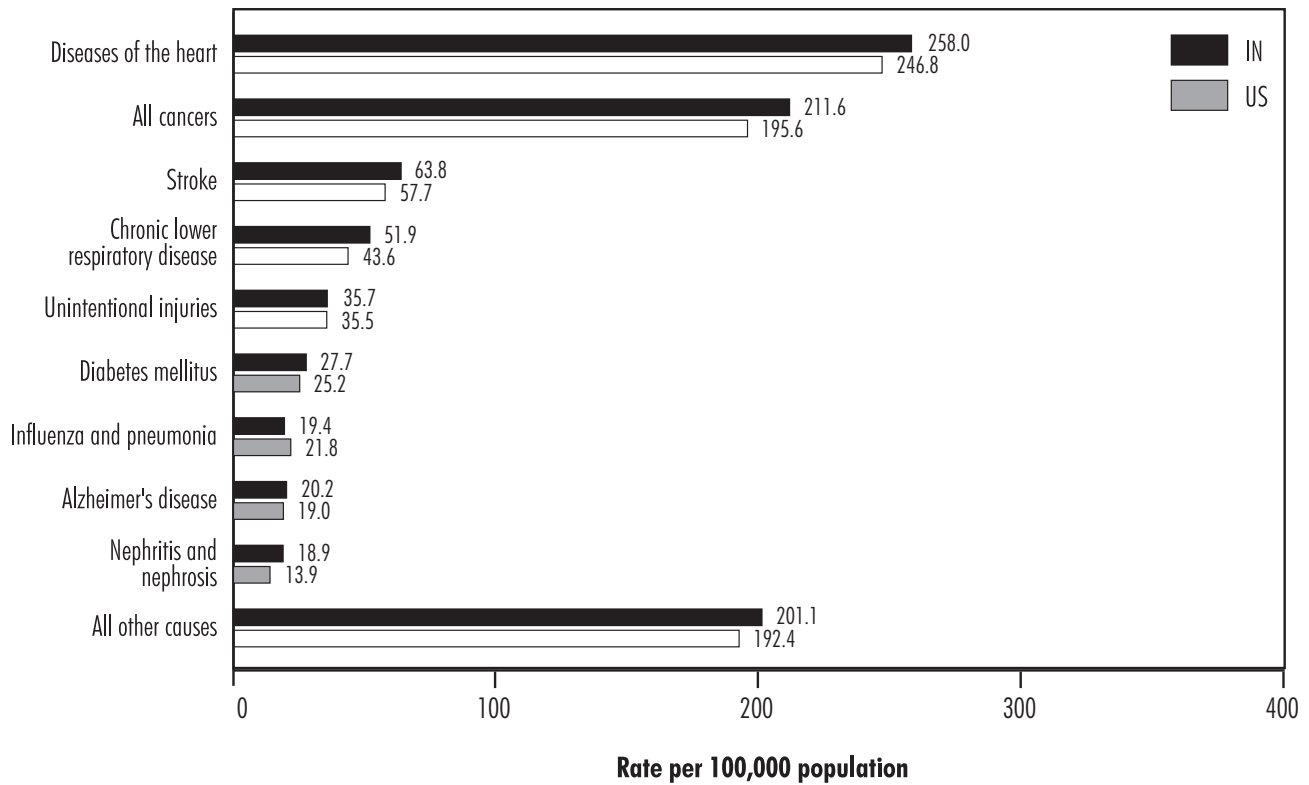
Diabetes

- In 2002,† 317,000 adults in Indiana had diagnosed diabetes.
- In 2001, diabetes accounted for 1,677 deaths in Indiana.
- The rate of death from diabetes was 128% higher among blacks than among whites.

* American Cancer Society are data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Indiana Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Indiana: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, 30% of men and 26% of women in Indiana reported cigarette smoking.
- No leisure-time physical activity was reported by 38% of Hispanics, 34% of blacks, 27% of multiracial adults, 26% of whites, and 25% of Asians/Pacific Islanders.
- Eating fewer than five servings of fruits and vegetables per day was reported by 83% of men and 74% of women.
- According to self-reported height and weight, 71% of blacks, 66% of multiracial adults, 61% of whites and Hispanics, and 39% of Asians/Pacific Islanders were overweight.
- In 2001, 31% of whites, 28% of Hispanics, and 21% of blacks in Indiana reported having high blood cholesterol.
- In 2001, 47% of multiracial persons, 36% of blacks, 25% of whites, and 16% of Hispanics reported having high blood pressure.

Risk Factors Among High School Students

- In Indiana in 2001, 29% of high school students reported cigarette smoking.
- Sixty-two percent of students were not enrolled in physical

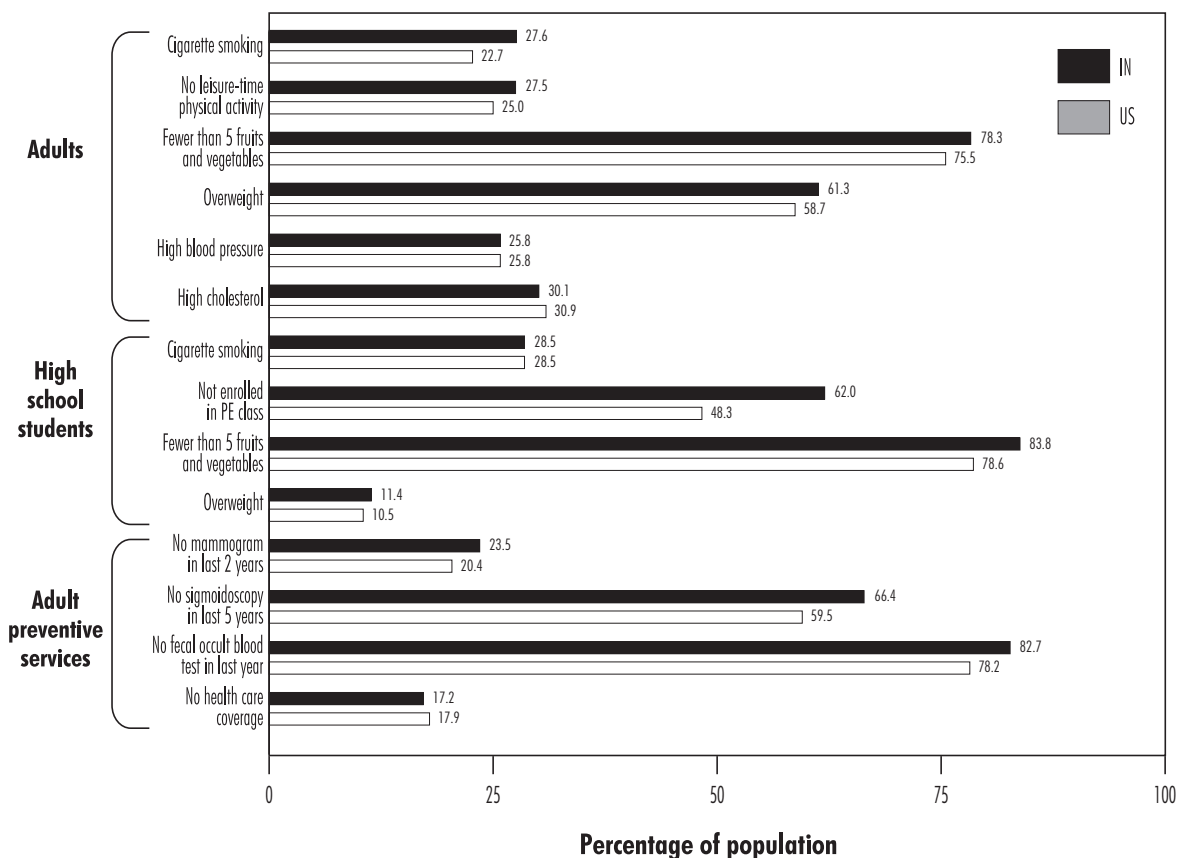
education class.

- Fifteen percent of male and 8% of female students were overweight.
- Eighty-four percent of students ate fewer than five servings per day of fruits and vegetables during the 7 days preceding the survey.

Preventive Services

- Among women aged 50 years or older, 24% of whites and 15% of blacks reported not having had a mammogram within the last 2 years.
- Among adults aged 50 years or older, 66% of whites and 62% of blacks reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Among adults aged 50 years or older, 88% of blacks and 82% of whites reported not having had a fecal occult blood test within the past year.
- Among adults aged 18–64, no health care coverage was reported by 38% of Hispanics, 32% of multiracial adults, 23% of blacks, and 15% of whites.

Risk Factors and Preventive Services, Indiana Compared With United States



Source: CDC, Behavioral Risk Factor Surveillance System, 2002.
 CDC, Youth Risk Behavior Surveillance System, 2001.

Iowa: Burden of Chronic Diseases, 2001

Heart Disease

- In 2001, 8,250 deaths, or 30% of deaths in Iowa were due to heart disease.
- The rate of death from heart disease was 62% higher among men than among women.

Stroke

- In Iowa, stroke was the cause of 2,218 deaths, or 8% of all deaths in 2001.
- The rate of death from stroke was 52% higher among Hispanics and 43% higher among blacks than among whites.

Cancer

- In 2001, cancer accounted for 23% of all deaths in Iowa.

- The American Cancer Society estimates that 15,900 new cases of cancer will be diagnosed in Iowa in 2004, including 1,800 new cases of lung cancer, 1,800 new cases of colorectal cancer, and 2,300 new cases of breast cancer in women.*
- The American Cancer Society estimates that 6,600 Iowa residents will die of cancer in 2004.
- The rate of death from all cancers was 47% higher among blacks than among whites.

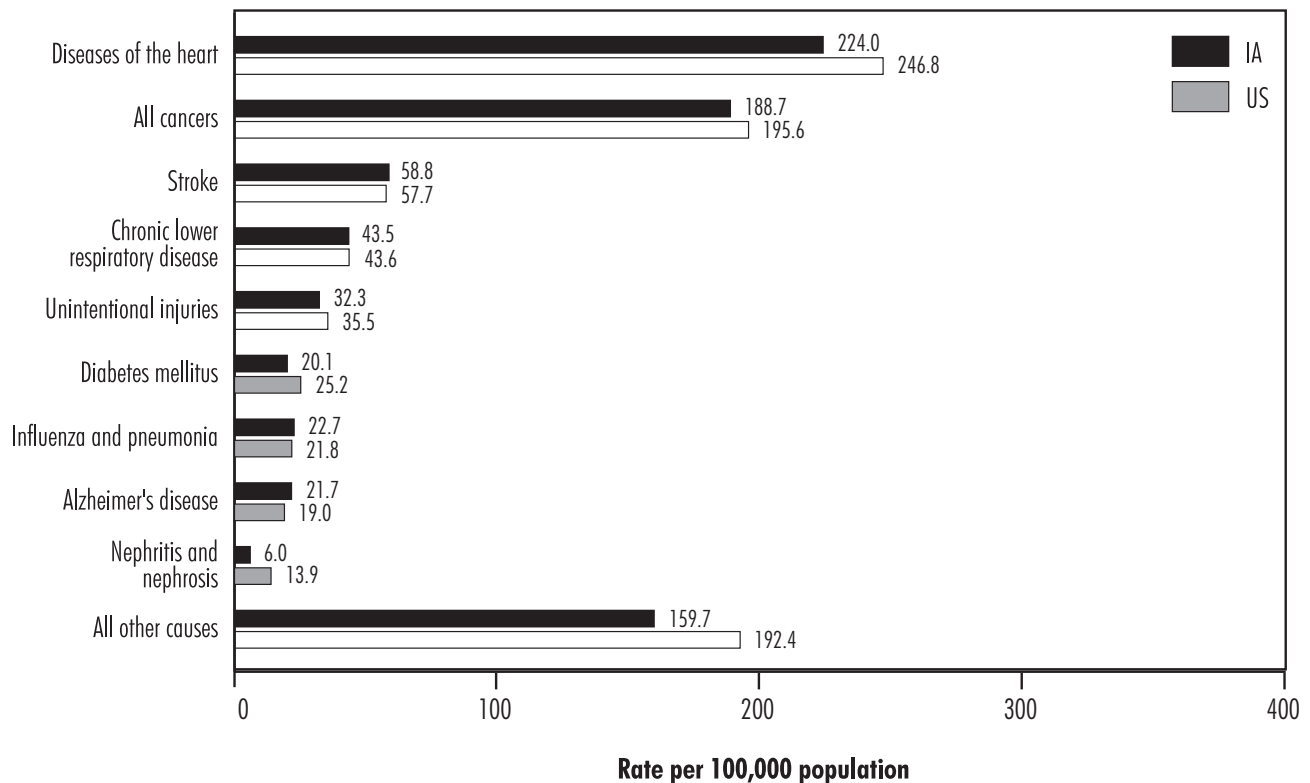
Diabetes

- In 2002,† 134,000 adults in Iowa had diagnosed diabetes.
- In 2001, diabetes accounted for 709 deaths in Iowa.
- The rate of death from diabetes was 287% higher among blacks than among whites.

* American Cancer Society data are rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Iowa Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Iowa: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, current cigarette smoking was reported by 26% of men and 20% of women.
- No leisure-time physical activity was reported by 31% of Hispanics and 22% of whites.
- Eating fewer than five servings of fruits and vegetables per day was reported by 85% of men and 76% of women.
- According to self-reported height and weight, 62% of whites and 55% of Hispanics were overweight.
- In 2001, 33% of men and 28% of women in Iowa reported having high blood cholesterol.
- In 2001, 26% of whites and 24% of Hispanics reported having high blood pressure.

Risk Factors Among High School Students

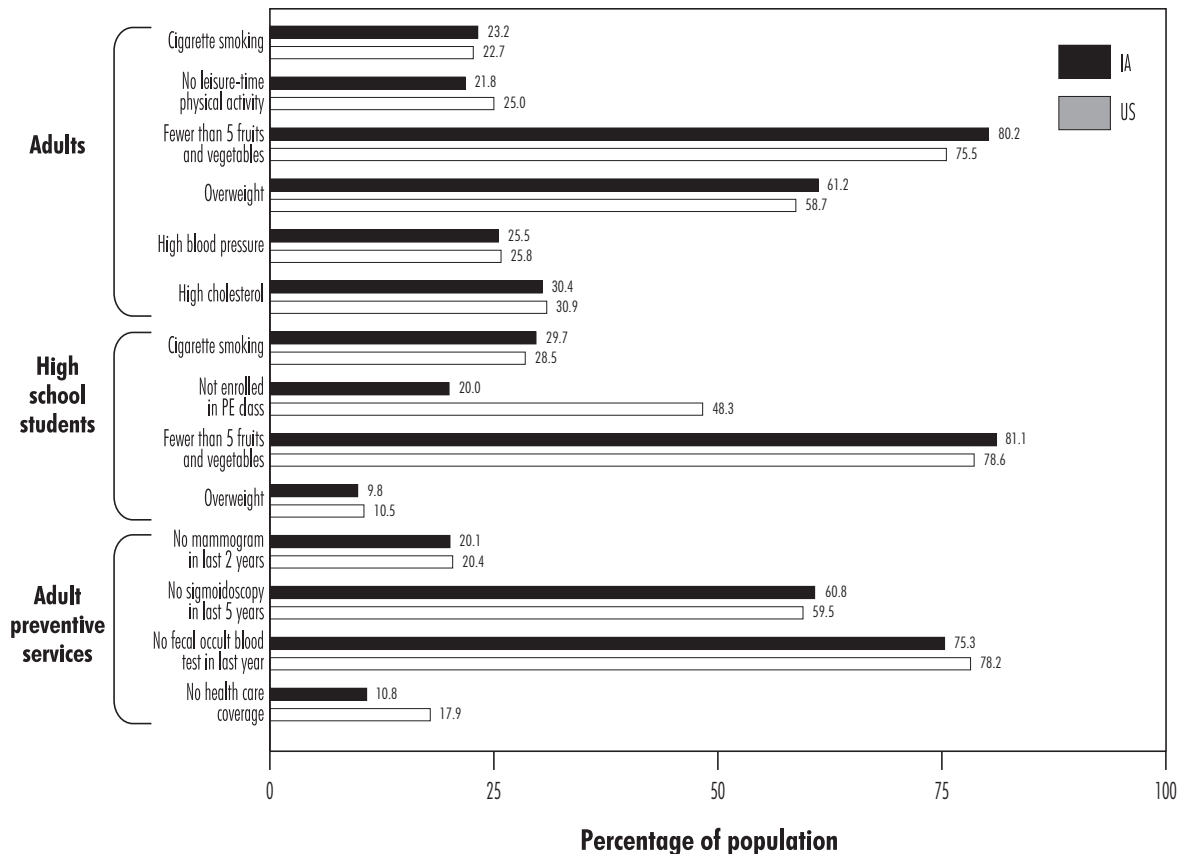
- In 2001, 30% of high school students reported cigarette smoking.
- Twenty percent of students were not enrolled in physical education class.

- Thirteen percent of male and 7% of female students were overweight.
- Eighty-one percent of students ate fewer than five servings per day of fruits and vegetables during the 7 days preceding the survey.

Preventive Services

- Of women aged 50 years or older, 20% reported not having had a mammogram within the last 2 years.
- More than 61% of adults aged 50 years or older reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Among adults aged 50 years or older, 75% reported not having had a fecal occult blood test within the past year.
- Among adults aged 18–64, no health care coverage was reported by 11%.

Risk Factors and Preventive Services, Iowa Compared With United States



Source: CDC, Behavioral Risk Factor Surveillance System, 2002.
 CDC, Youth Risk Behavior Surveillance System, 2001.

Kansas: Burden of Chronic Diseases, 2001

Heart Disease

- Heart disease was the most common cause of death in Kansas in 2001, accounting for 27% of all deaths.
- The rate of death from heart disease was 50% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 1,848 deaths, or 8% of all deaths in Kansas.
- The rate of death from stroke was 41% higher among blacks than among whites.

Cancer

- In 2001, cancer accounted for 22% of all deaths in Kansas.
- The American Cancer Society estimates that 12,900 new cases

of cancer will be diagnosed in Kansas in 2004, including 1,700 new cases of lung cancer, 1,500 new cases of colorectal cancer, and 1,900 new cases of breast cancer in women.*

- The American Cancer Society estimates that 5,300 Kansas residents will die of cancer in 2004.
- The rate of death from lung cancer was 87% higher among men than among women.

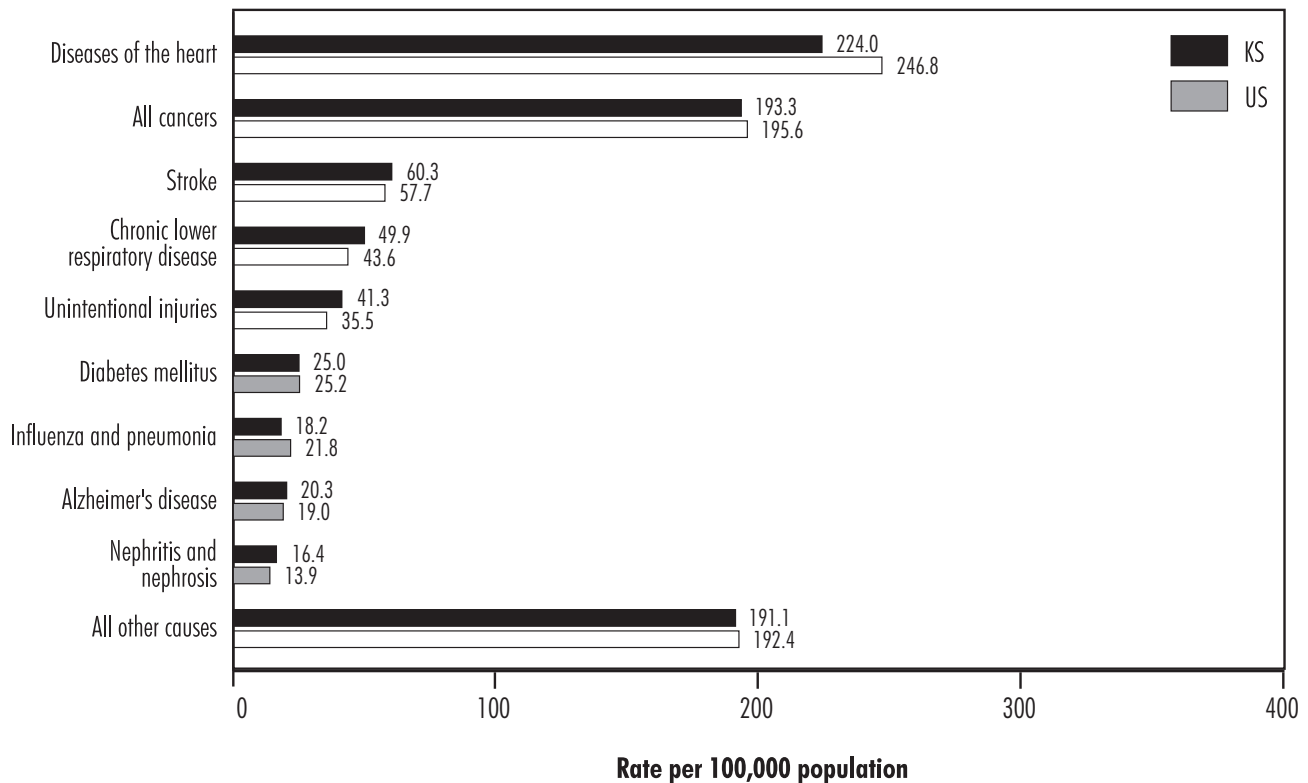
Diabetes

- In 2002,† 122,000 adults in Kansas had diagnosed diabetes.
- In 2001, diabetes accounted for 721 deaths in Kansas.
- The rate of death from diabetes was 100% higher among blacks and 74% higher among Hispanics than among whites.

* American Cancer Society are data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Kansas Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Kansas: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, 27% of multiracial adults, 25% of blacks, 22% of whites, and 20% of Hispanics in Kansas reported current cigarette smoking.
- No leisure-time physical activity was reported by 34% of Hispanics, 22% of whites and multiracial adults, and 20% of blacks.
- Eating fewer than five servings of fruits and vegetables per day was reported by 86% of men and 78% of women.
- According to self-reported height and weight, 70% of men and 51% of women were overweight.
- In 2001, 30% of whites, 21% of Hispanics, and 20% of blacks in Kansas reported having high blood cholesterol.
- In 2001, 31% of blacks, 24% of whites and multiracial persons, and 17% of Hispanics reported having high blood pressure.

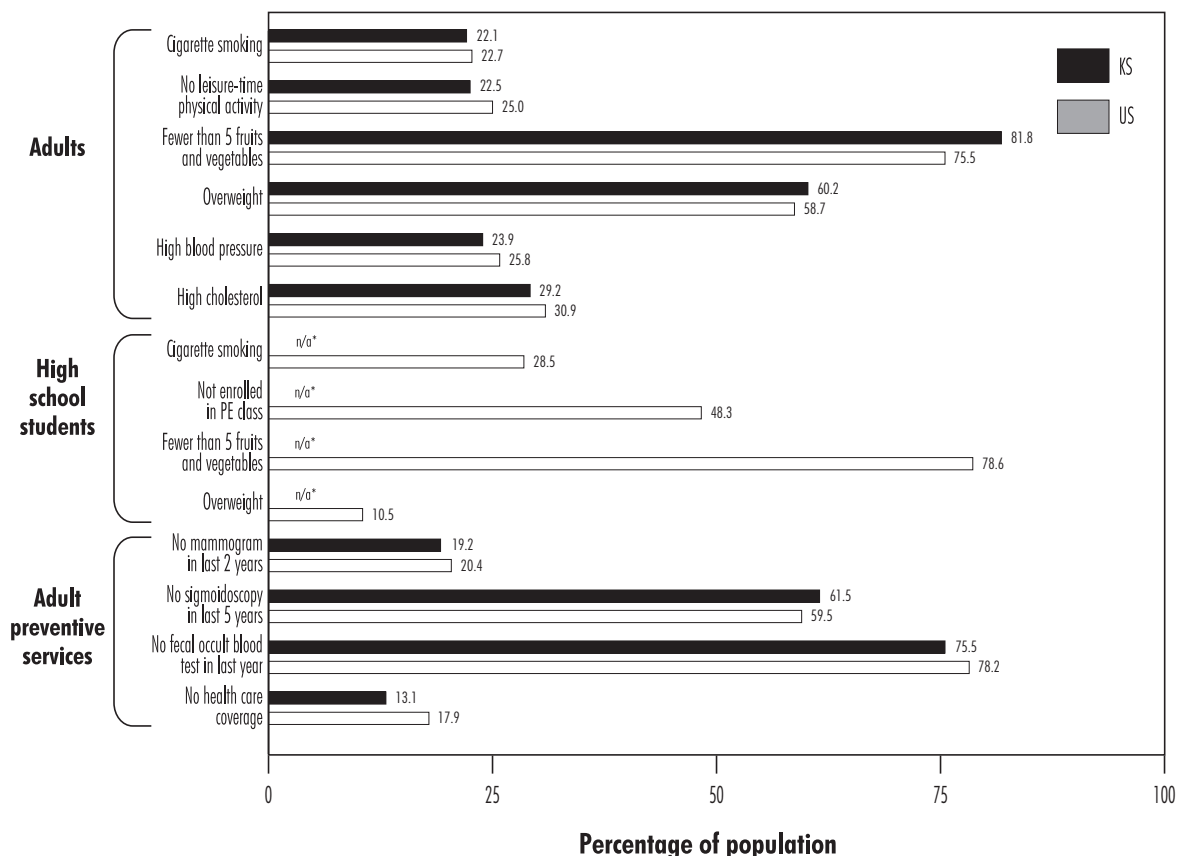
Preventive Services

- Of women aged 50 years or older, 19% reported not having had a mammogram within the last 2 years.
- Among adults aged 50 years or older, 63% of women and 60% of men reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Among adults aged 50 years or older, 80% of Hispanics and 75% of whites reported not having had a fecal occult blood test within the past year.
- Among adults aged 18–64, 33% of Hispanics, 21% of blacks, and 11% of whites reported having no health care coverage.
- In 2001, 37% of Hispanics, 32% of whites, and 17% of blacks in Kentucky reported having high blood cholesterol.
- In 2001, 36% of blacks, 32% of Hispanics, and 30% of whites reported having high blood pressure.

Risk Factors Among High School Students

- The 2001 YRBS was not conducted in Kansas.

Risk Factors and Preventive Services, Kansas Compared With United States



*Did not collect data on this topic.

Source: CDC, Behavioral Risk Factor Surveillance System, 2002.

CDC, Youth Risk Behavior Surveillance System, 2001.

Kentucky: Burden of Chronic Diseases, 2001

Heart Disease

- In 2001, heart disease was the most common cause of death in Kentucky, accounting for 30% of all deaths.
- The rate of death from heart disease was 51% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 2,557 deaths in Kentucky.
- The rate of death from stroke was 46% higher among blacks than among whites.

Cancer

- Cancer accounted for 24% of all deaths in Kentucky in 2001.
- The American Cancer Society estimates that 22,700 new cases of cancer will be diagnosed in Kentucky in 2004, including 3,700

new cases of lung cancer, 2,300 new cases of colorectal cancer, and 3,300 new cases of breast cancer in women.*

- The American Cancer Society estimates that 9,400 Kentucky residents will die of cancer in 2004.
- The rate of death from lung cancer was 124% higher among men than among women.

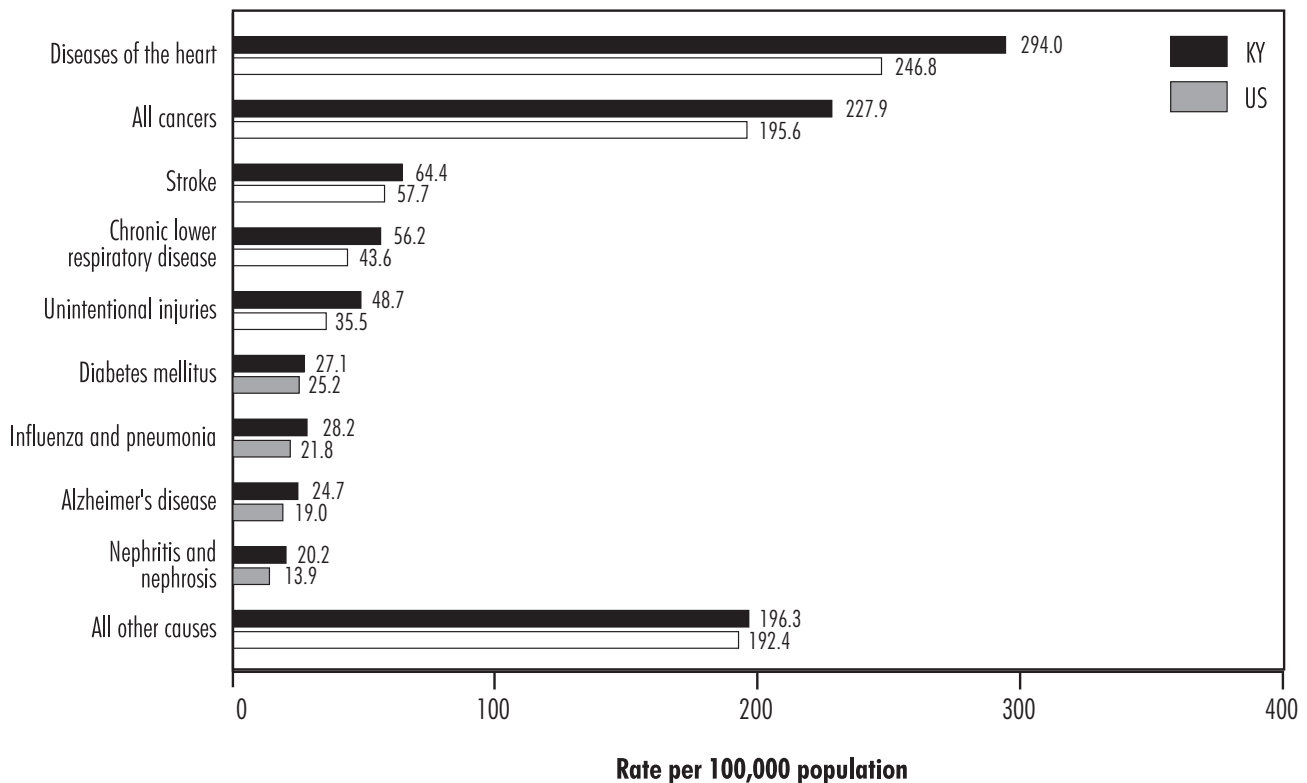
Diabetes

- In 2002, † 209,000 adults in Kentucky had diagnosed diabetes.
- In 2001, diabetes accounted for 1,099 deaths in Kentucky.
- The rate of death from diabetes was 76% higher among blacks than among whites.

* American Cancer Society are data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Kentucky Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Kentucky: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, 35% of men and 31% of women in Kentucky reported current cigarette smoking.
- No leisure-time physical activity was reported by 28% of Hispanics and blacks and 27% of whites.
- Eating fewer than five servings of fruits and vegetables per day was reported by 83% of men and 77% of women.
- According to self-reported height and weight, 72% of blacks, 62% of whites, and 59% of Hispanics were overweight.
- In 2001, 37% of Hispanics, 32% of whites, and 17% of blacks reported having high blood cholesterol.
- In 2001, 36% of blacks, 32% of Hispanics, and 30% of whites reported having high blood pressure.

Risk Factors Among High School Students

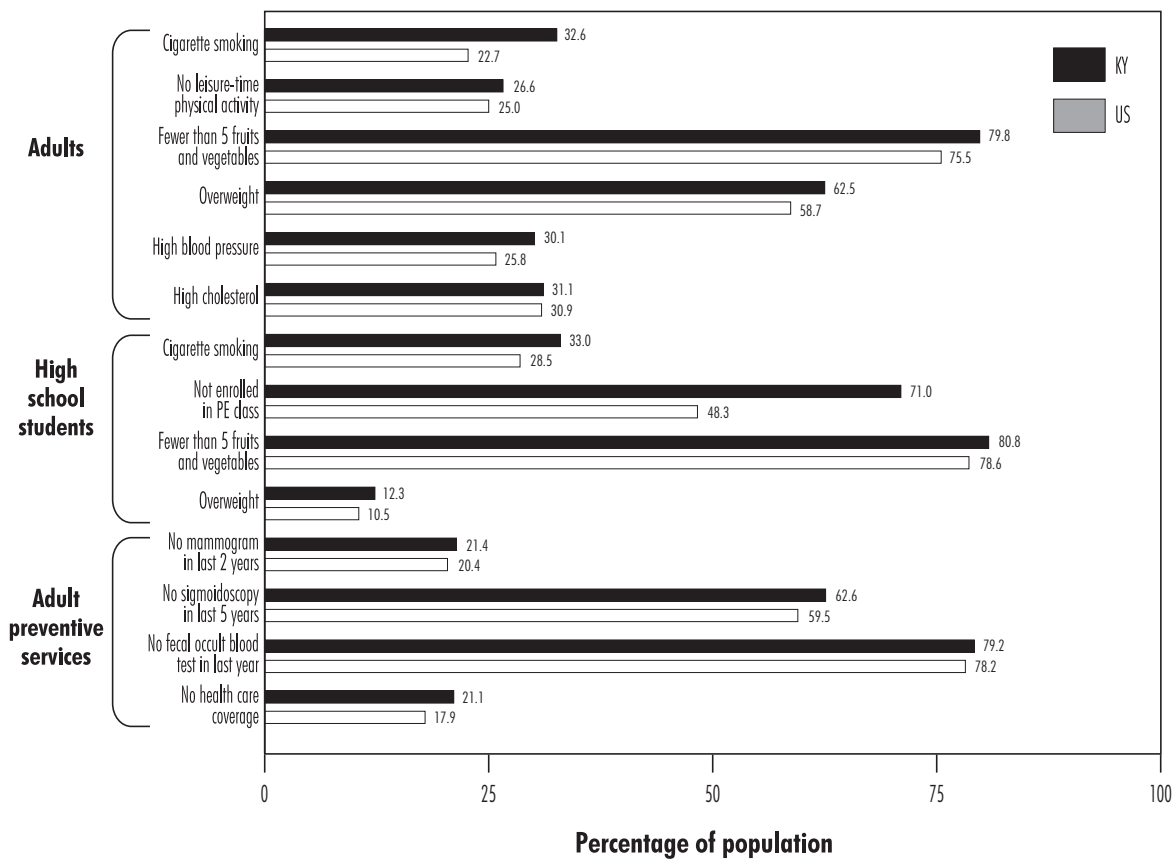
- Cigarette smoking was reported by 33% of students in 2001.
- Seventy-one percent of students were not enrolled in physical education class.

- Sixteen percent of male and 9% of female students were overweight.
- Eighty-one percent of students ate fewer than five servings per day of fruits and vegetables during the 7 days preceding the survey.

Preventive Services

- Of women aged 50 years or older, 22% of whites and 11% of blacks reported not having had a mammogram within the last 2 years.
- Among adults aged 50 years or older, 63% of whites, 55% of blacks, and 53% of Hispanics reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Among adults aged 50 years or older, 87% of Hispanics, 80% of whites, and 72% of blacks reported not having had a fecal occult blood test within the past year.
- Among adults aged 18–64, no health care coverage was reported by 27% of Hispanics, 23% of blacks, and 21% of whites.

Risk Factors and Preventive Services, Kentucky Compared With United States



Source: CDC, Behavioral Risk Factor Surveillance System, 2002.
 CDC, Youth Risk Behavior Surveillance System, 2001.

Louisiana: Burden of Chronic Diseases, 2001

Heart Disease

- In 2001, heart disease accounted for 28% of all deaths in Louisiana.
- The rate of death from heart disease was 52% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 2,638 deaths in Louisiana.
- The rate of death from stroke was 44% higher among blacks than among whites.

Cancer

- Cancer accounted for 23% of all deaths in Louisiana in 2001.

- The American Cancer Society estimates that 23,500 new cases of cancer will be diagnosed in Louisiana in 2004, including 3,200 new cases of lung cancer, 2,600 new cases of colorectal cancer, and 3,900 new cases of breast cancer in women.*
- The American Cancer Society estimates that 9,700 Louisiana residents will die of cancer in 2004.
- The rate of death from all cancers was 67% higher among men than among women.

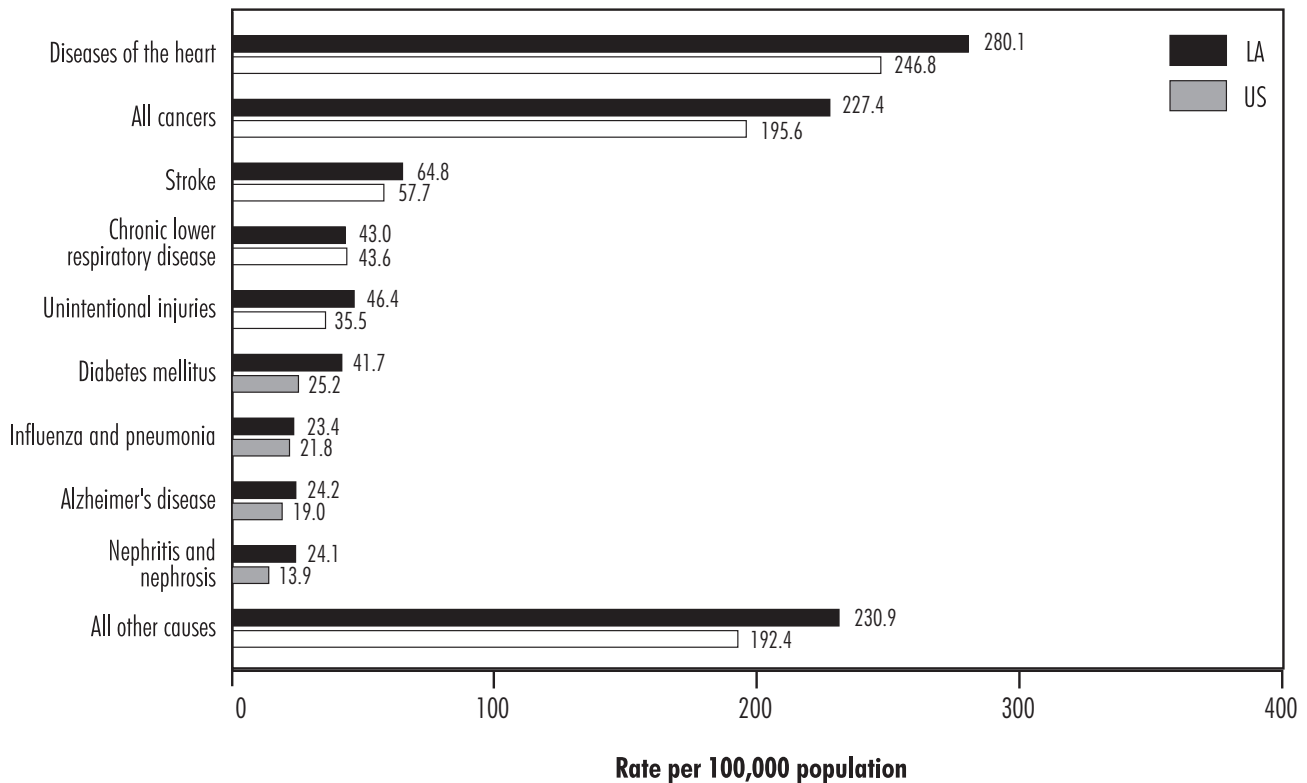
Diabetes

- In 2002,† 237,000 adults in Louisiana had diagnosed diabetes.
- In 2001, diabetes accounted for 1,734 deaths in Louisiana.
- The rate of death from diabetes was 147% higher among blacks than among whites.

* American Cancer Society are data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Louisiana Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Louisiana: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, 27% of men and 22% of women in Louisiana reported current cigarette smoking.
- No leisure-time physical activity was reported by 43% of blacks, 40% of Hispanics, 35% of American Indians/Alaska Natives and multiracial adults, and 29% of whites.
- Eating fewer than five servings of fruits and vegetables per day was reported by 86% of men and 80% of women.
- According to self-reported height and weight, 74% of multiracial adults, 68% of blacks, 65% of American Indians/Alaska Natives, and 58% of whites and Hispanics were overweight.
- In 2001, 30% of whites and 23% of blacks and Hispanics in Louisiana reported having high blood cholesterol.
- In 2001, 32% of blacks, 26% of whites, and 25% of Hispanics reported having high blood pressure.

Risk Factors Among High School Students

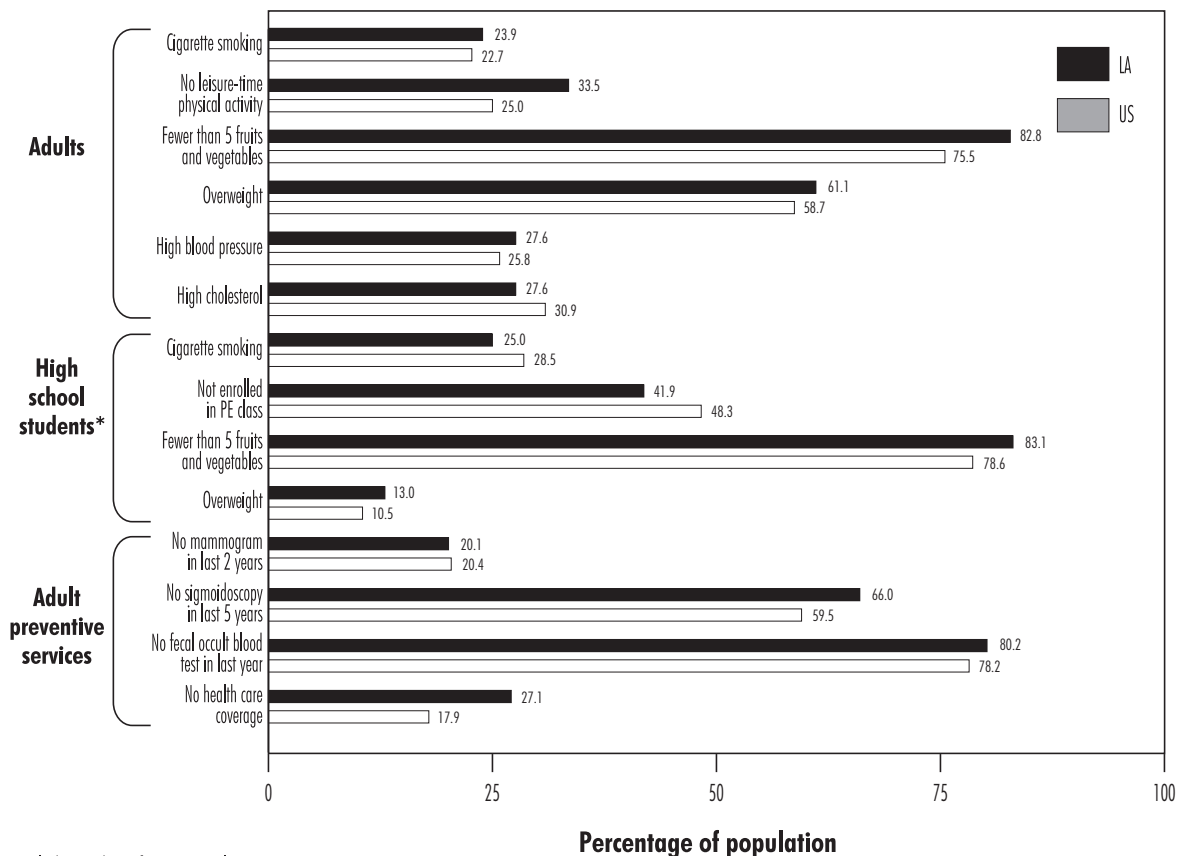
- In 2001, 38% of white students and 10% of black students reported cigarette smoking.

- Forty-two percent of students were not enrolled in physical education class.
- Seventeen percent of male and 10% of female students were overweight.
- Eighty-three percent of students ate fewer than five servings per day of fruits and vegetables during the 7 days preceding the survey.

Preventive Services

- Of women aged 50 years and older, 20% reported not having had a mammogram within the last 2 years.
- Among adults aged 50 years or older, 73% of Hispanics, 69% of blacks, and 65% of whites reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Among adults aged 50 years or older, 81% of women and 80% of men reported not having had a fecal occult blood test within the past year.
- Twenty-seven percent of adults aged 18-64 reported having no health care coverage.

Risk Factors and Preventive Services, Louisiana Compared With United States



*Excludes students from New Orleans.

Source: CDC, Behavioral Risk Factor Surveillance System, 2002.

CDC, Youth Risk Behavior Surveillance System, 2001.

Maine: Burden of Chronic Diseases, 2001

Heart Disease

- Heart disease was the most common cause of death in Maine in 2001, accounting for 26% of all deaths.
- The rate of death from heart disease was 46% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 822 deaths in Maine.
- The rate of death from stroke was 32% higher among men than among women.

Cancer

- In 2001, cancer accounted for 25% of all deaths in Maine.

- The American Cancer Society estimates that 7,500 new cases of cancer will be diagnosed in Maine in 2004, including 1,000 new cases of lung cancer, 800 new cases of colorectal cancer, and 900 new cases of breast cancer in women.*
- The American Cancer Society estimates that 3,100 Maine residents will die of cancer in 2004.
- The rate of death from lung cancer was 77% higher among men than among women.

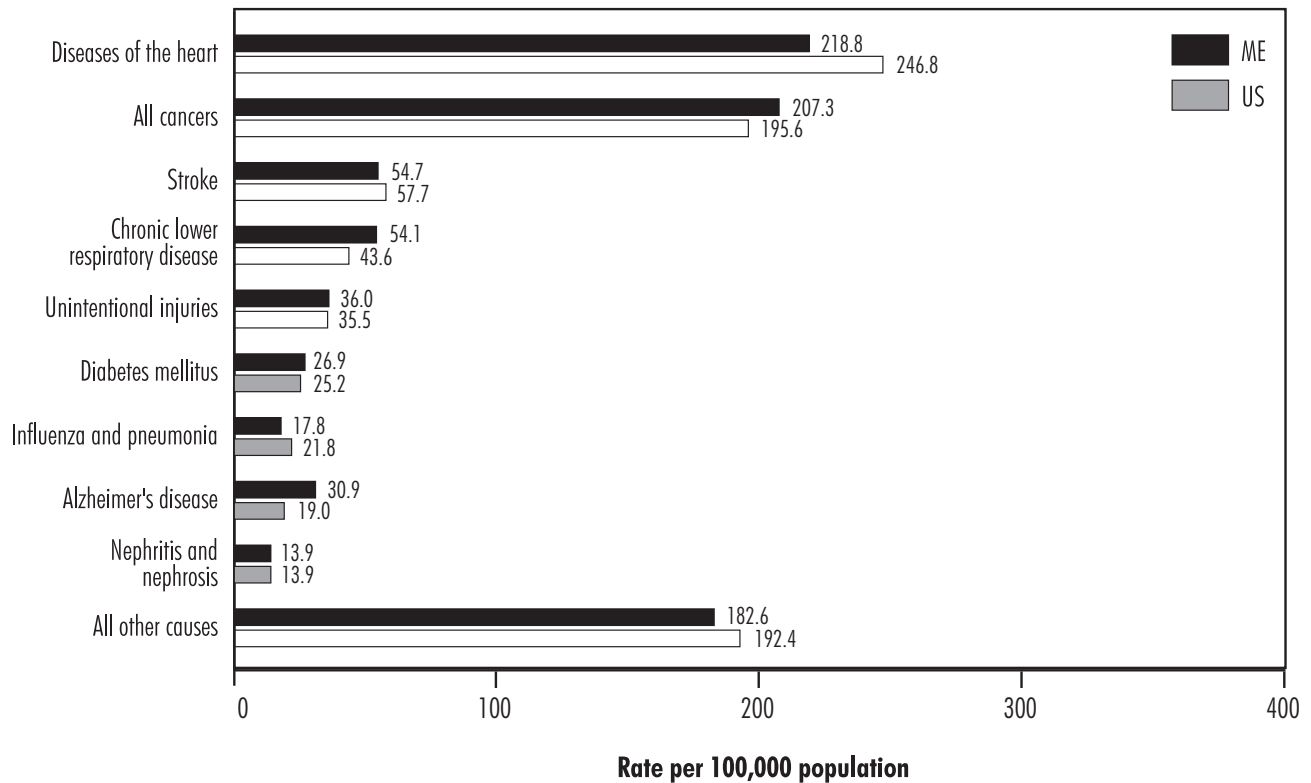
Diabetes

- In 2002,† 68,000 adults in Maine had diagnosed diabetes.
- In 2001, diabetes accounted for 398 deaths in Maine.
- The rate of death from diabetes was 28% higher among men than among women.

* American Cancer Society data are rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Maine Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Maine: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, 26% of men and 21% of women in Maine reported current cigarette smoking.
- No leisure-time physical activity was reported by 28% of women and 24% of men.
- Eating fewer than five servings of fruits and vegetables per day was reported by 77% of men and 65% of women.
- According to self-reported height and weight, 68% of men and 50% of women were overweight.
- In 2001, 31% of men and 29% of women in Maine reported having high blood cholesterol.
- In 2001, 25% of both men and women reported having high blood pressure.

Risk Factors Among High School Students

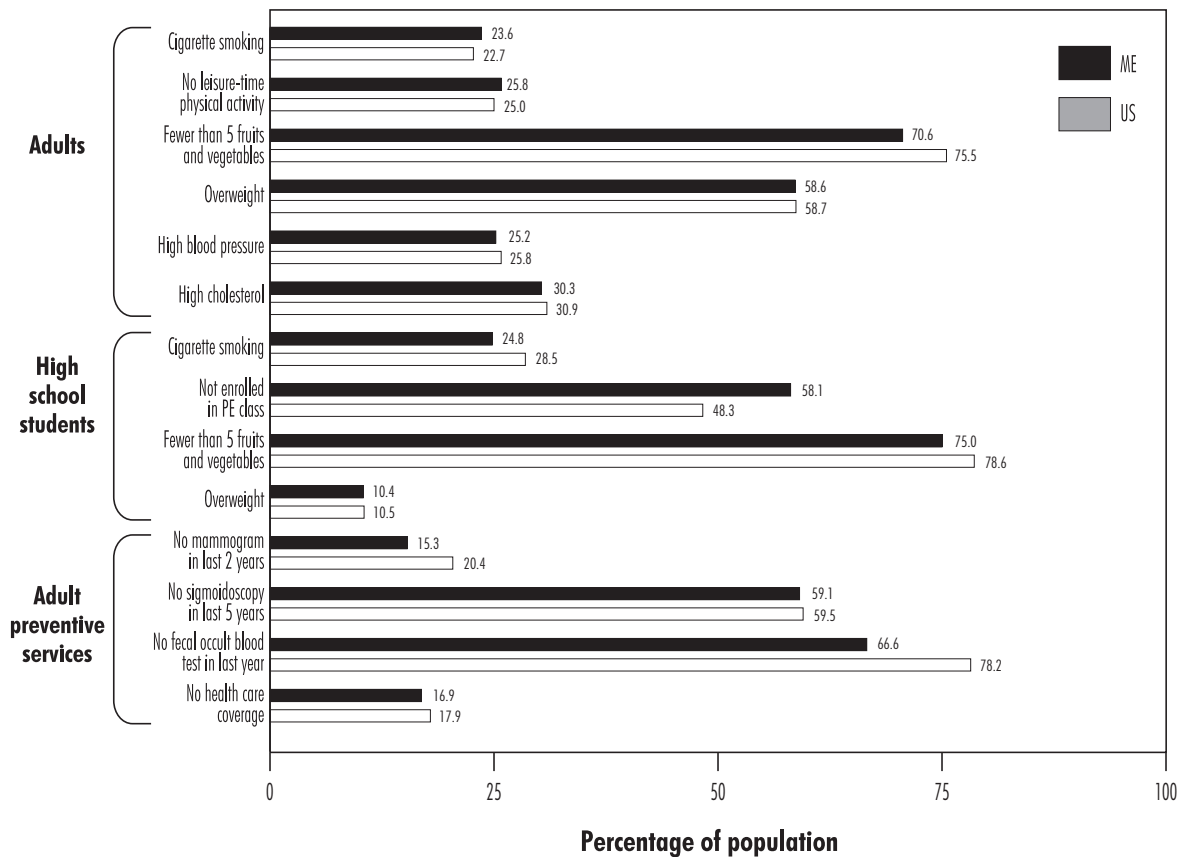
- In 2001, 25% of high school students reported cigarette smoking.
- Fifty-eight percent of students were not enrolled in physical education class.

- Fifteen percent of male and 6% of female students were overweight.
- Seventy-five percent of students ate fewer than five servings per day of fruits and vegetables during the 7 days preceding the survey.

Preventive Services

- Of women aged 50 years or older, 15% reported not having had a mammogram within the last 2 years.
- Fifty-nine percent of adults aged 50 years or older reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Among adults aged 50 years or older, 68% of women and 65% of men reported not having had a fecal occult blood test within the past year.
- No health care coverage was reported by 17% of adults aged 18–64 years old.

Risk Factors and Preventive Services, Maine Compared With United States



Source: CDC, Behavioral Risk Factor Surveillance System, 2002.
 CDC, Youth Risk Behavior Surveillance System, 2001.

Maryland: Burden of Chronic Diseases, 2001

Heart Disease

- Heart disease was the most common cause of death in Maryland in 2001, accounting for 28% of all deaths.
- The rate of death from heart disease was 46% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 2,881 deaths in Maryland.
- The rate of death from stroke was 22% higher among blacks than among whites.

Cancer

- Cancer accounted for 24% of all deaths in Maryland in 2001.

- The American Cancer Society estimates that 25,300 new cases of cancer will be diagnosed in Maryland in 2004, including 3,200 new cases of lung cancer, 2,800 new cases of colorectal cancer, and 4,100 new cases of breast cancer in women.*
- The American Cancer Society estimates that 10,400 Maryland residents will die of cancer in 2004.
- The rate of death from all cancers was 47% higher among men than among women.

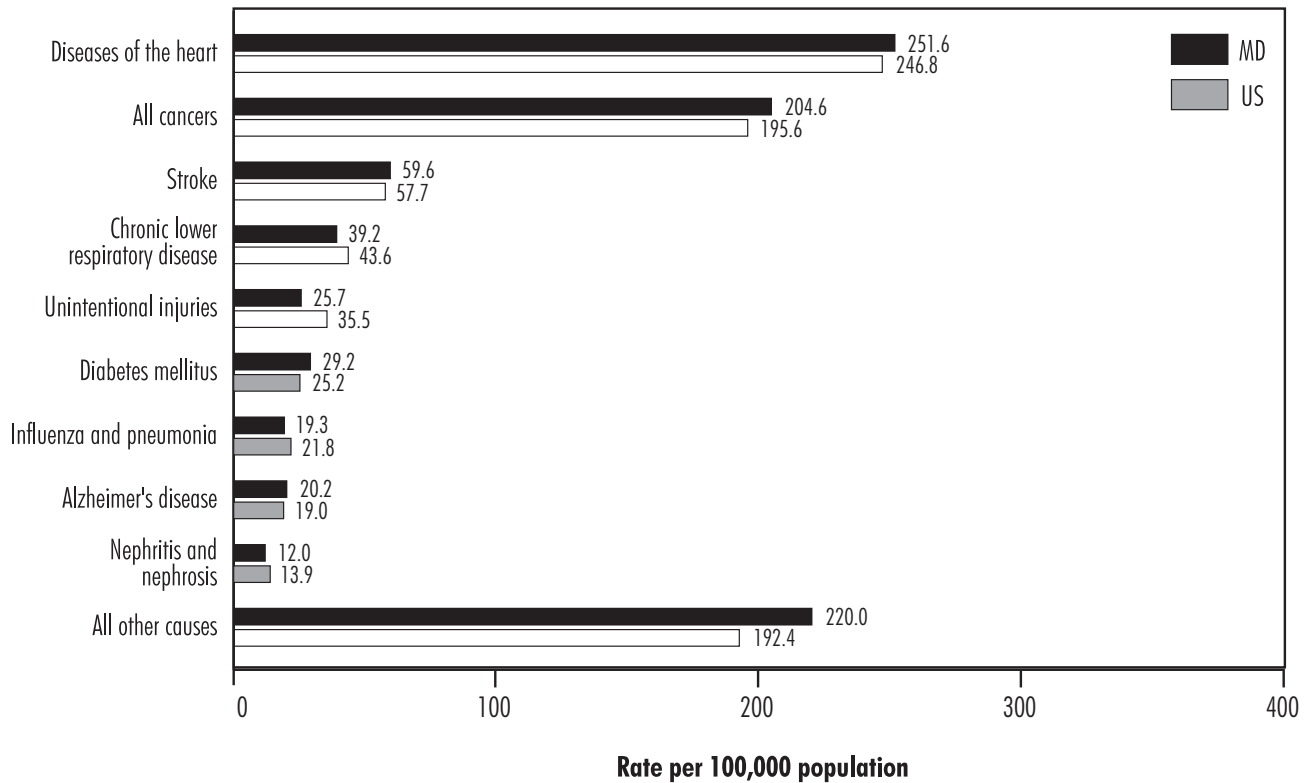
Diabetes

- In 2002,† 277,000 adults in Maryland had diagnosed diabetes.
- In 2001, diabetes accounted for 1,458 deaths in Maryland.
- The rate of death from diabetes was 120% higher among blacks than among whites.

* American Cancer Society are data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Maryland Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Maryland: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, 26% of men and 19% of women in Maryland reported current cigarette smoking.
- No leisure-time physical activity was reported by 29% of Asians/Pacific Islanders, 28% of blacks, 25% of Hispanics, and 20% of whites.
- Eating fewer than five servings of fruits and vegetables per day was reported by 74% of men and 67% of women.
- According to self-reported height and weight, 67% of blacks, 50% of Hispanics, 56% of whites, and 38% of Asians/Pacific Islanders were overweight.
- In 2001, 33% of whites and Asians/Pacific Islanders, 28% of blacks, and 25% of Hispanics in Maryland reported having high blood cholesterol.
- In 2001, 30% of blacks, 26% of whites, 19% of Asians/Pacific Islanders, and 18% of Hispanics reported having high blood pressure.

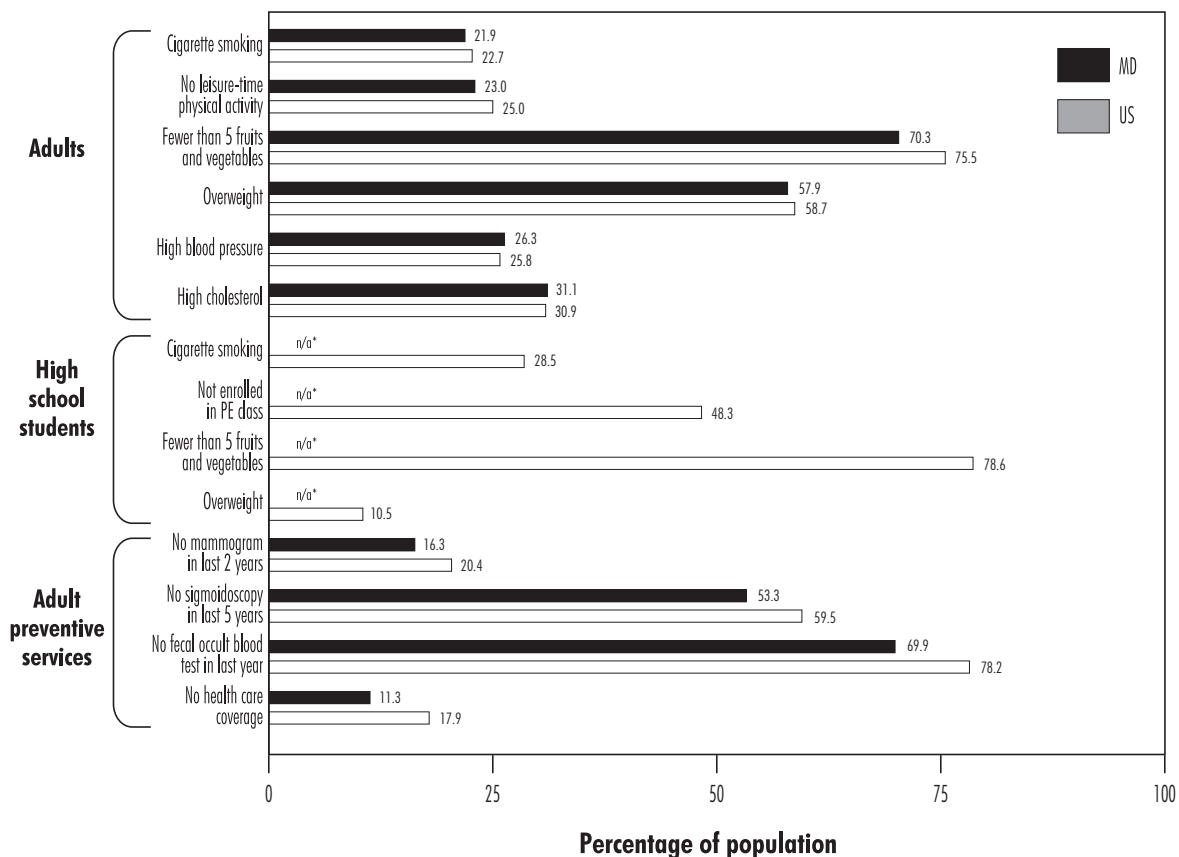
Risk Factors Among High School Students

The 2001 YRBS was not conducted in Maryland.

Preventive Services

- Of women aged 50 years or older, 17% of whites and 15% of blacks reported not having had a mammogram in the last 2 years.
- Among adults aged 50 years or older, 56% of women and 50% of men reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Seventy percent of adults aged 50 years or older reported not having had a fecal occult blood test within the past year.
- Among adults aged 18–64, no health care coverage was reported by 16% of Hispanics, 16% of blacks, 11% of Asians/Pacific Islanders and 9% of whites.

Risk Factors and Preventive Services, Maryland Compared With United States



*Did not collect data on this topic.

Source: CDC, Behavioral Risk Factor Surveillance System, 2002.

CDC, Youth Risk Behavior Surveillance System, 2001.

Massachusetts: Burden of Chronic Diseases, 2001

Heart Disease

- In 2001, heart disease was the most common cause of death in Massachusetts, accounting for 15,143 deaths, or 27% of all deaths.
- The rate of death from heart disease was 53% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 3,535 deaths in Massachusetts.
- The rate of death from stroke was 23% higher among blacks than among whites.

Cancer

- Cancer accounted for 24% of all deaths in Massachusetts in 2001.

- The American Cancer Society estimates that 33,100 new cases of cancer will be diagnosed in Massachusetts in 2004, including 4,100 new cases of lung cancer, 3,500 new cases of colorectal cancer, and 5,200 new cases of breast cancer in women.*
- The American Cancer Society estimates that 13,600 Massachusetts residents will die of cancer in 2004.
- The rate of death from all cancers was 43% higher among men than among women.

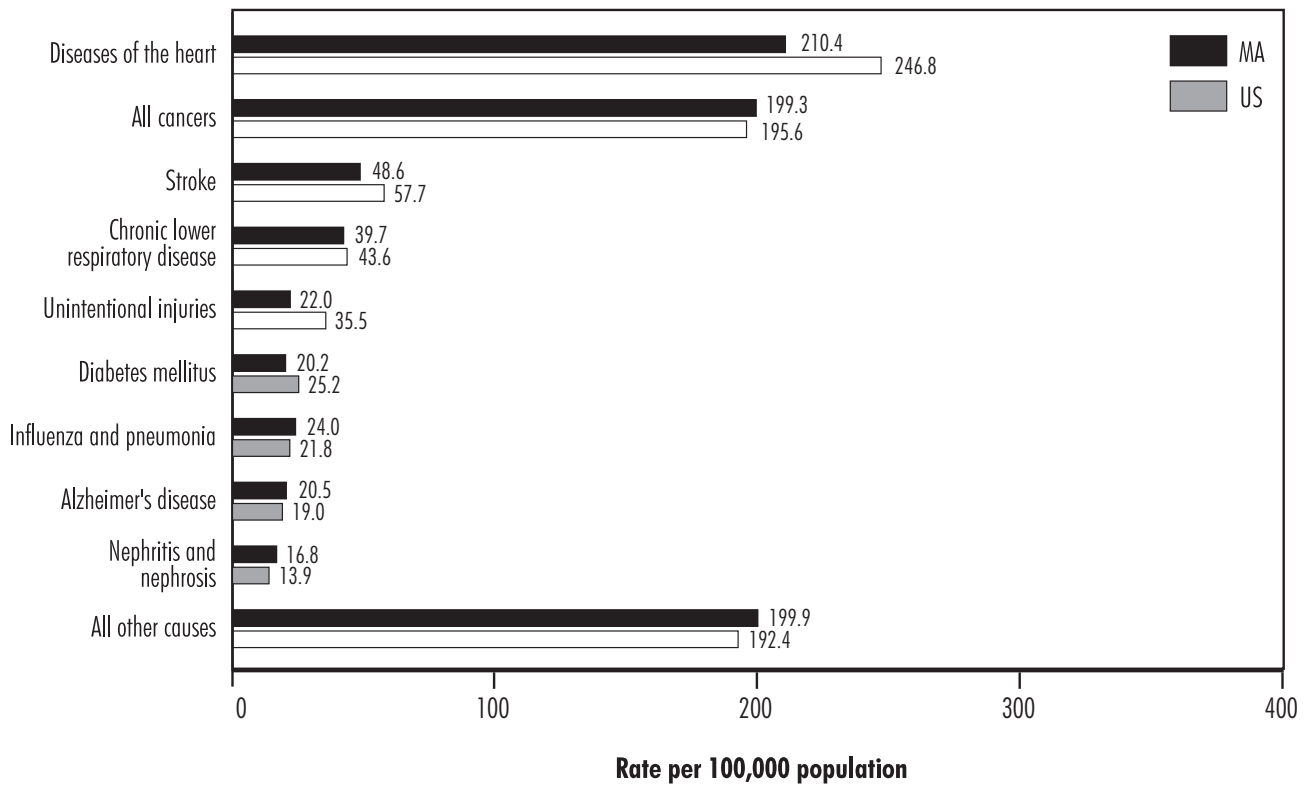
Diabetes

- In 2002,† 279,000 adults in Massachusetts had diagnosed diabetes.
- In 2001, diabetes accounted for 1,422 deaths in Massachusetts.
- The rate of death from diabetes was 132% higher among blacks and 38% higher among Hispanics than among whites.

* American Cancer Society data are rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Massachusetts Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Massachusetts: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, 20% of men and 18% of women in Massachusetts reported current cigarette smoking.
- No leisure-time physical activity was reported by 45% of Hispanics, 29% of blacks, 27% of Asians/Pacific Islanders, and 18% of whites.
- In Massachusetts, 76% of men and 65% of women reported eating fewer than five servings of fruits and vegetables per day.
- According to self-reported height and weight, 66% of blacks, 59% of Hispanics, 55% of whites, and 30% of Asians/Pacific Islanders were overweight.
- In 2001, 31% of whites, 27% of blacks, 23% of Hispanics, and 22% of Asians/Pacific Islanders reported having high blood cholesterol.
- In 2001, 31% of blacks, 24% of whites, 18% of Hispanics, and 6% of Asians/Pacific Islanders reported having high blood pressure.

- Thirty-two percent of students were not enrolled in physical education class.
- Fourteen percent of male students and 6% of female students were overweight.

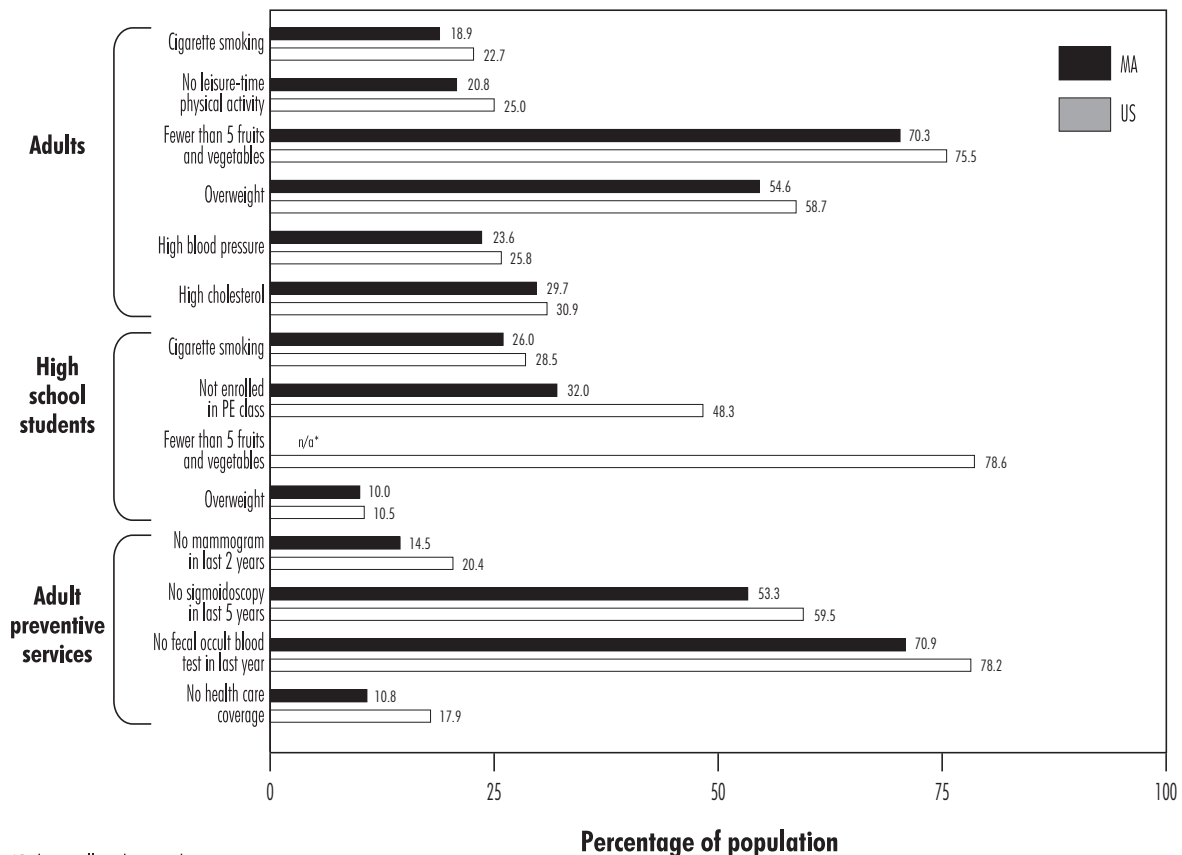
Preventive Services

- Of women aged 50 years or older, 14% of whites and 12% of Hispanics reported not having had a mammogram within the last 2 years.
- Among adults aged 50 years or older, 65% of Hispanics, 52% of whites, and 49% of blacks reported not having had a sigmoidoscopy or colonoscopy within the past year.
- Seventy-one percent of adults aged 50 years or older reported not having had a fecal occult blood test within the past year.
- Among adults aged 18–64 years old, 35% of Hispanics, 17% of blacks, 15% of Asians/Pacific Islanders, and 8% of whites reported having no health care coverage.

Risk Factors Among High School Students

- In 2001, 28% of white, 20% of Hispanic, and 16% of black students reported cigarette smoking.

Risk Factors and Preventive Services, Massachusetts Compared With United States



*Did not collect data on this topic.

Source: CDC, Behavioral Risk Factor Surveillance System, 2002.

CDC, Youth Risk Behavior Surveillance System, 2001.

Michigan: Burden of Chronic Diseases, 2001

Heart Disease

- Heart disease was the most common cause of death in Michigan in 2001, accounting for 26,896 deaths, or 31% of all deaths.
- The rate of death from heart disease was 48% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 5,701 deaths in Michigan.
- The rate of death from stroke was 29% higher among blacks than among whites.

Cancer

- In 2001, cancer accounted for 23% of all deaths in Michigan.

- The American Cancer Society estimates that 48,200 new cases of cancer will be diagnosed in Michigan in 2004, including 6,200 new cases of lung cancer, 4,900 new cases of colorectal cancer, and 7,300 new cases of breast cancer in women.*
- The American Cancer Society estimates that 19,900 Michigan residents will die of cancer in 2004.
- The rate of death from lung cancer was 70% higher among men than among women.

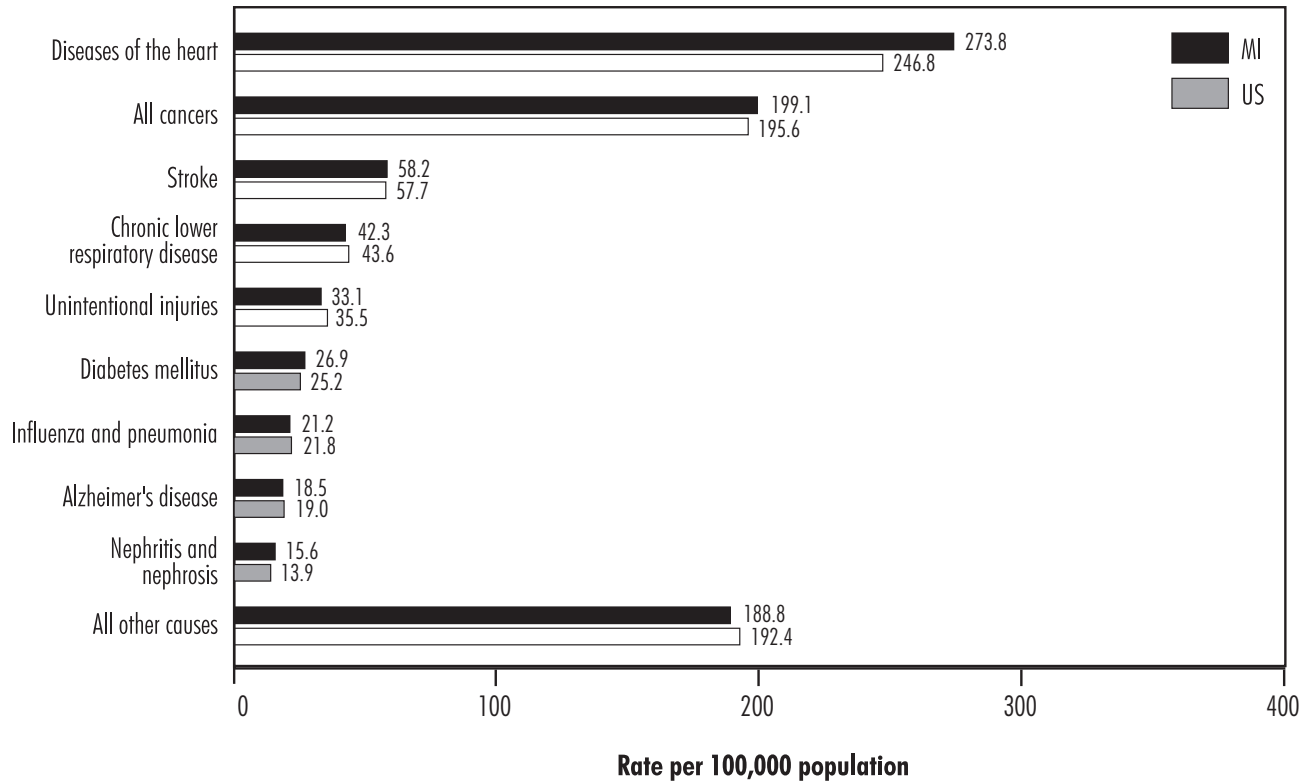
Diabetes

- In 2002,† 560,000 adults in Michigan had diagnosed diabetes.
- In 2001, diabetes accounted for 2,655 deaths in Michigan.
- The rate of death from diabetes was 68% higher among Hispanics and 63% higher among blacks than among whites.

* American Cancer Society are data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Michigan Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Michigan: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, current cigarette smoking was reported by 35% of multiracial adults, 30% of Hispanics, 25% of blacks, 24% of whites, and 7% of Asians/Pacific Islanders.
- No leisure-time physical activity was reported by 34% of multiracial adults, 32% of blacks, 28% of Hispanics, 22% of whites, and 19% of Asians/Pacific Islanders.
- Eighty-two percent of men and 73% of women reported eating fewer than five servings of fruits and vegetables per day.
- According to self-reported height and weight, 70% of men and 55% of women were overweight.
- In 2001, 36% of Hispanics, 34% of whites, 31% of multiracial persons, and 30% of blacks in Michigan reported having high blood cholesterol.
- In 2001, 34% of blacks, 27% of whites and multiracial persons, 19% of Hispanics, and 6% of Asians/Pacific Islanders reported having high blood pressure.

- Fifty-six percent of high school students reported not being enrolled in physical education class.
- Fourteen percent of male and 7% of female students were overweight.
- Seventy-nine percent of students ate fewer than five servings per day of fruits and vegetables during the 7 days preceding the survey.

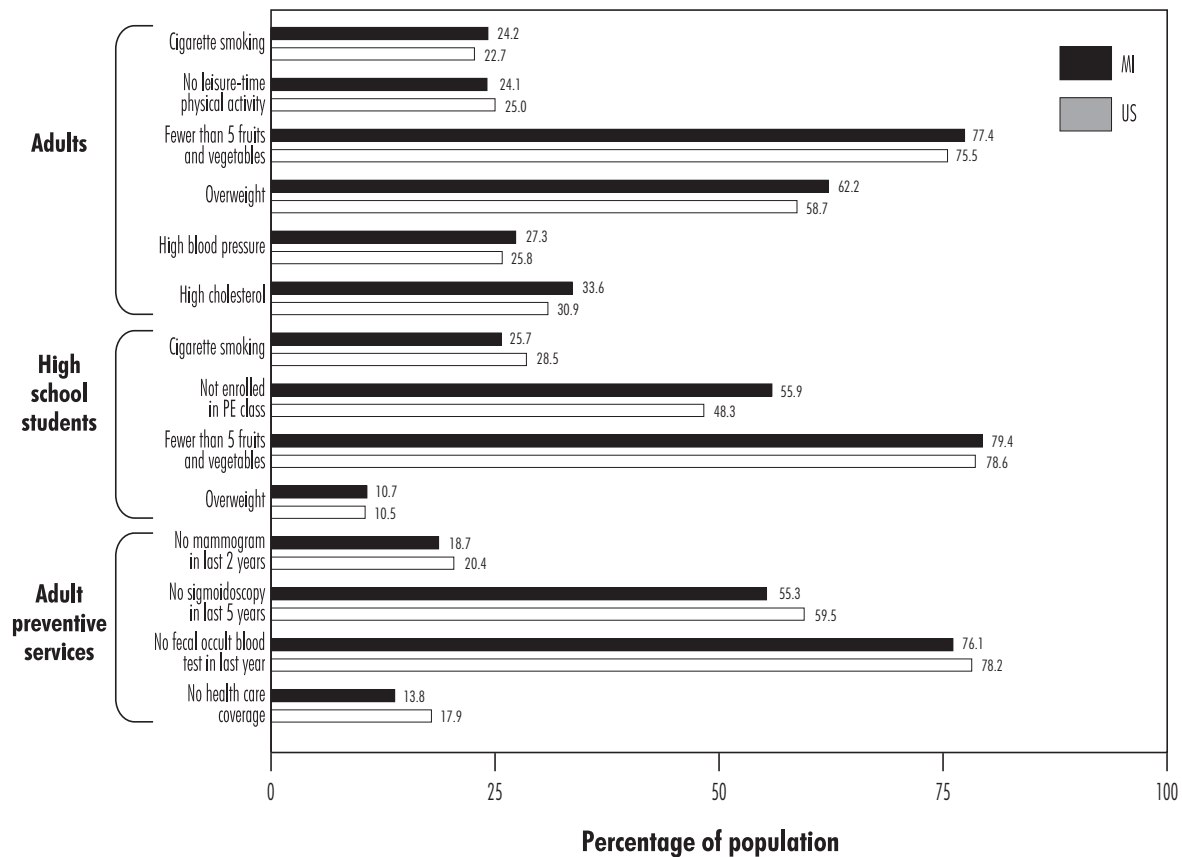
Preventive Services

- Of women aged 50 years or older, 19% reported not having had a mammogram within the last 2 years.
- Among adults aged 50 years or older, 55% of whites and 50% of blacks reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Among adults aged 50 years or older, 76% reported not having had a fecal occult blood test within the past year.
- Among adults aged 18–64, no health care coverage was reported by 28% of Hispanics, 19% of blacks, 15% of Asians/Pacific Islanders, and 12% of whites.

Risk Factors Among High School Students

- Cigarette smoking was reported by 28% of white, 28% of Hispanic, and 12% of black students in 2001.

Risk Factors and Preventive Services, Michigan Compared With United States



Source: CDC, Behavioral Risk Factor Surveillance System, 2002.
 CDC, Youth Risk Behavior Surveillance System, 2001.

Minnesota: Burden of Chronic Diseases, 2001

Heart Disease

- Heart disease was the most common cause of death in Minnesota in 2001, accounting for 23% of all deaths.
- The rate of death from heart disease was 78% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 2,727 deaths, or 7% of all deaths in Minnesota.
- The rate of death from stroke was 41% higher among blacks than among whites.

Cancer

- Cancer accounted for 24% of all deaths in Minnesota in 2001.
- The American Cancer Society estimates that 22,700 new cases

of cancer will be diagnosed in Minnesota in 2004, including 2,600 new cases of lung cancer, 2,200 new cases of colorectal cancer, and 3,600 new cases of breast cancer in women.*

- The American Cancer Society estimates that 9,400 Minnesota residents will die of cancer in 2004.
- The rate of death from lung cancer was 44% higher among blacks than among whites.

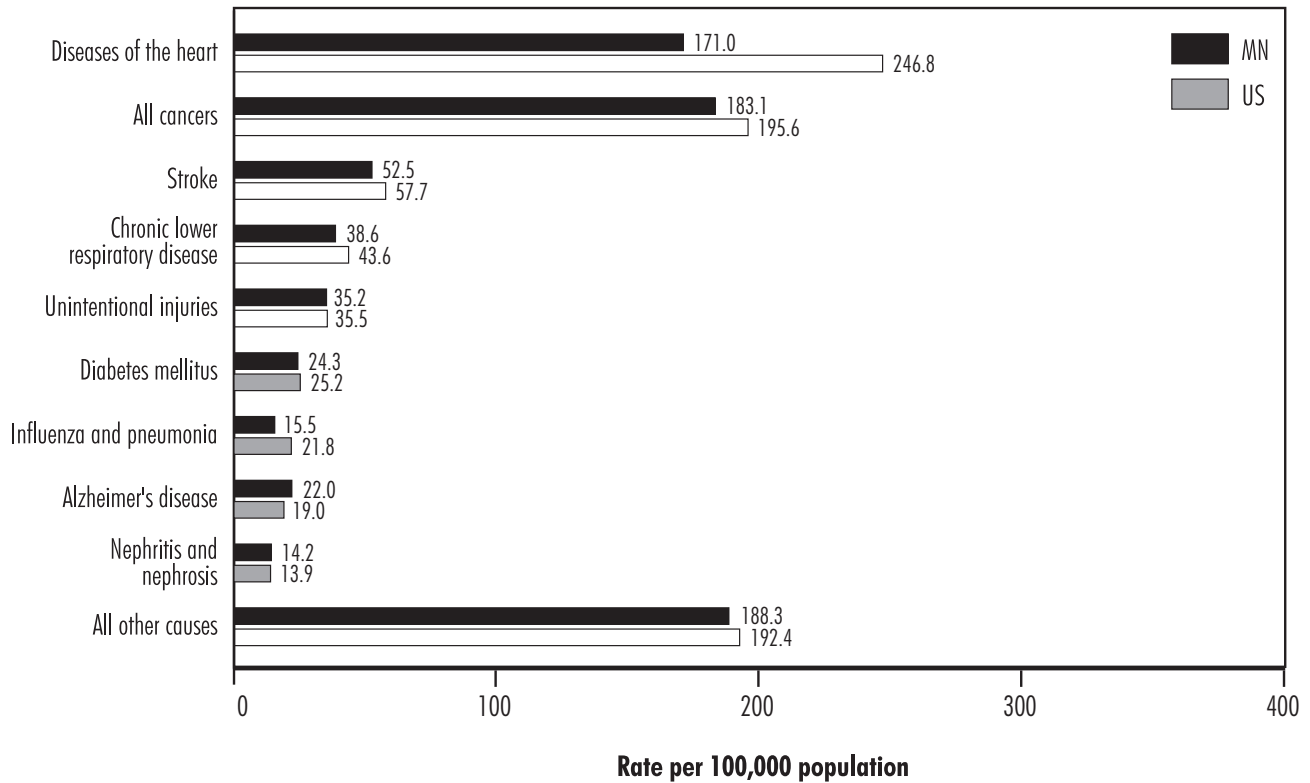
Diabetes

- In 2002,† 169,000 adults in Minnesota had diagnosed diabetes.
- In 2001, diabetes accounted for 1,213 deaths in Minnesota.
- The rate of death from diabetes was 272% higher among American Indians/Alaska Natives and 147% higher among blacks than among whites.

* American Cancer Society are data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Minnesota Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Minnesota: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, current cigarette smoking was reported by 27% of blacks, 25% of Hispanics, 21% of whites, and 18% of Asians/Pacific Islanders.
- No leisure-time physical activity was reported by 31% of blacks, 24% of Hispanics, 21% of Asians/Pacific Islanders, and 16% of whites.
- In 2002, 84% of men and 71% of women reported eating fewer than five servings of fruits and vegetables per day.
- According to self-reported height and weight, 68% of men and 50% of women were overweight.
- In 2001, 31% of whites and 16% of blacks in Minnesota reported having high blood cholesterol.
- In 2001, 23% of whites, 22% of blacks, 14% of Hispanics, and 8% of Asians/Pacific Islanders reported having high blood pressure.

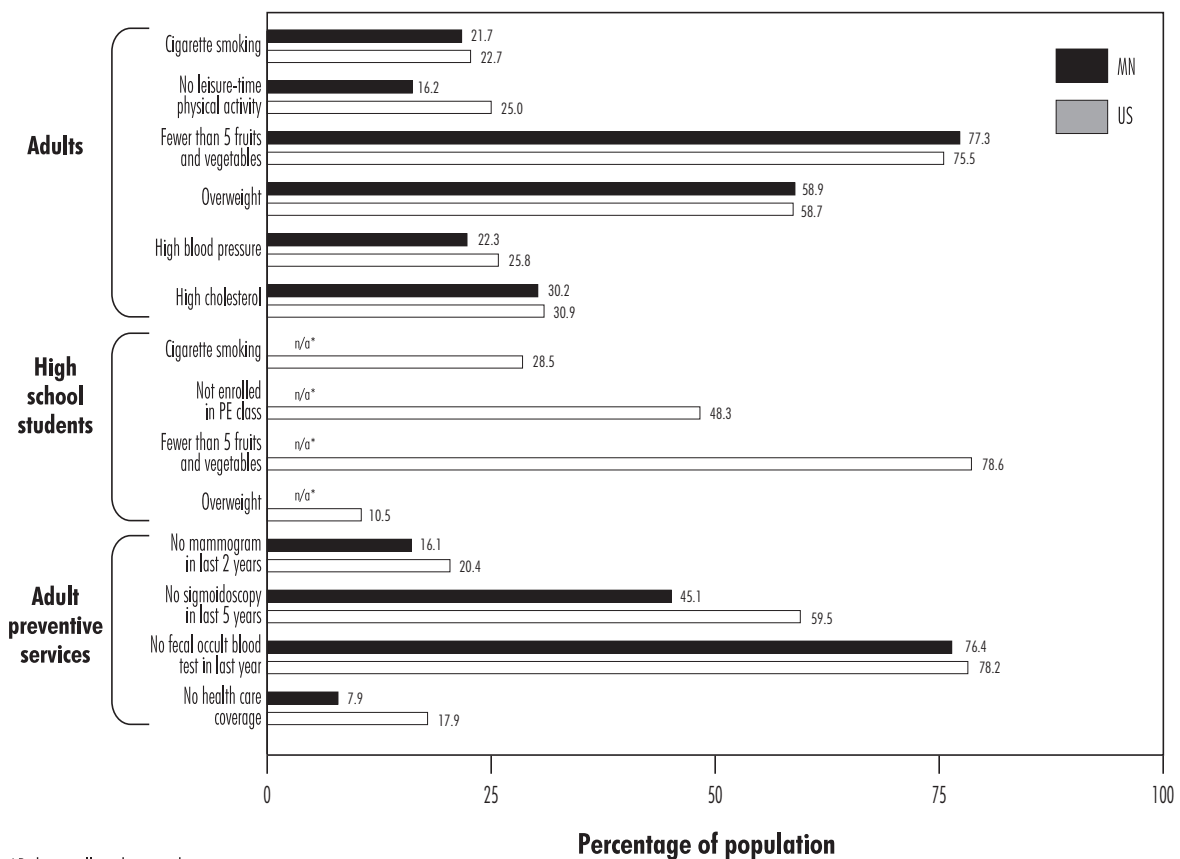
Risk Factors Among High School Students

- The 2001 YRBS was not conducted in Minnesota.

Preventive Services

- Of women aged 50 years or older, 16% reported not having had a mammogram within the last 2 years.
- Forty-five percent of adults aged 50 years or older reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Among adults aged 50 years or older, 77% of women and 75% of men reported not having had a fecal occult blood test within the past year.
- Among adults aged 18–64, no health care coverage was reported by 22% of blacks, 14% of Asians/ Pacific Islanders, 7% of whites, and 5% of Hispanics.

Risk Factors and Preventive Services, Minnesota Compared With United States



*Did not collect data on this topic.

Source: CDC, Behavioral Risk Factor Surveillance System, 2002.

CDC, Youth Risk Behavior Surveillance System, 2001.

Mississippi: Burden of Chronic Diseases, 2001

Heart Disease

- Heart disease accounted for 32% of all deaths.
- The rate of death from heart disease was 34% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 1,935 deaths in Mississippi.
- The rate of death from stroke was 40% higher among blacks than among whites.

Cancer

- In 2001, cancer accounted for 21% of all deaths in Mississippi.
- The American Cancer Society estimates that 15,100 new cases

of cancer will be diagnosed in Mississippi in 2004, including 2,200 new cases of lung cancer, 1,600 new cases of colorectal cancer, and 2,500 new cases of breast cancer in women.*

- The American Cancer Society estimates that 6,200 Mississippi residents will die of cancer in 2004.
- The rate of death from all cancers was 81% higher among men than among women.

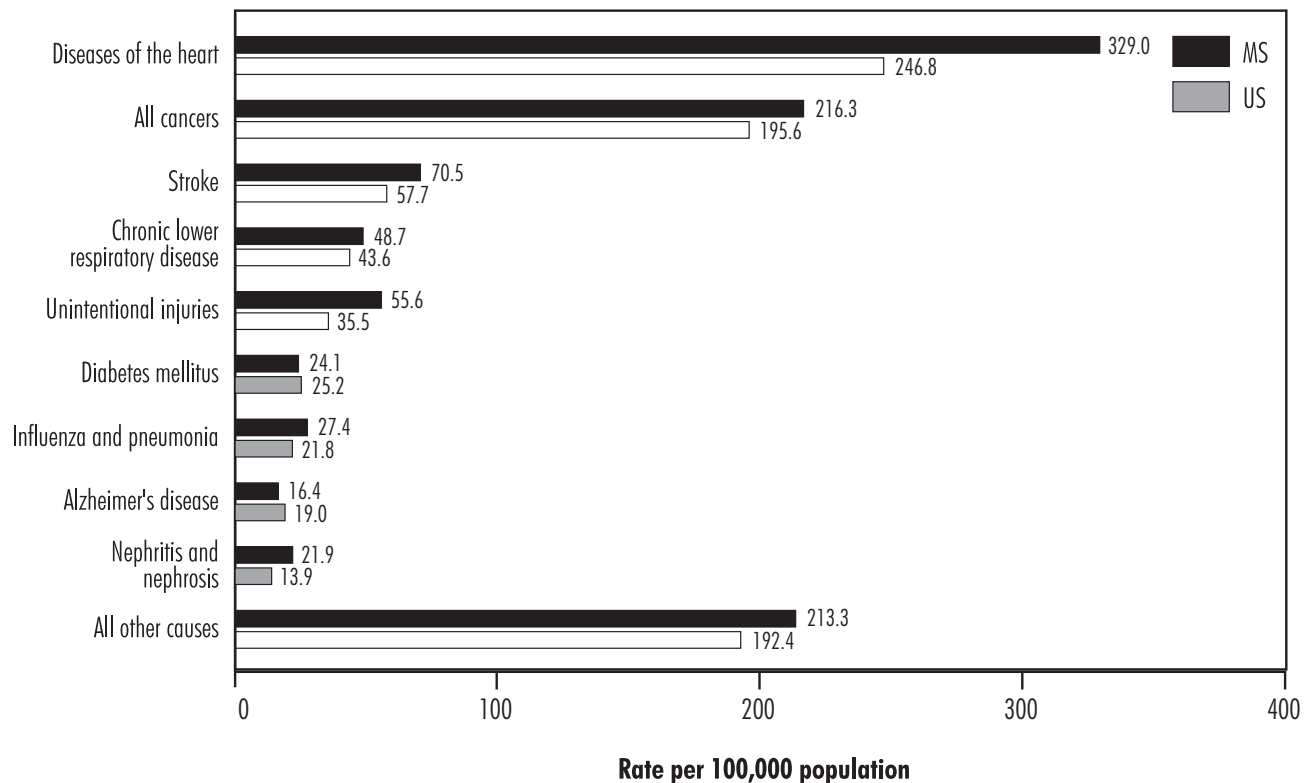
Diabetes

- In 2002,† 185,000 adults in Mississippi had diagnosed diabetes.
- In 2001, diabetes accounted for 661 deaths in Mississippi.
- The rate of death from diabetes was 127% higher among blacks than among whites.

* American Cancer Society data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Mississippi Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Mississippi: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, 33% of men and 22% of women reported current cigarette smoking.
- No leisure-time physical activity was reported by 37% of Hispanics, 36% of blacks, and 29% of whites.
- Eating fewer than five servings of fruits and vegetables per day was reported by 83% of men and 79% of women.
- According to self-reported height and weight, 71% of blacks, 60% of whites, and 57% of Hispanics were overweight.
- In 2001, 33% of whites and 27% of blacks in Mississippi reported having high blood cholesterol.
- In 2001, 37% of blacks, 29% of whites, and 13% of Hispanics reported having high blood pressure.

Risk Factors Among High School Students

- In 2001, cigarette smoking was reported by 34% of white and 13% of black students.
- Sixty-eight percent of high school students reported not being

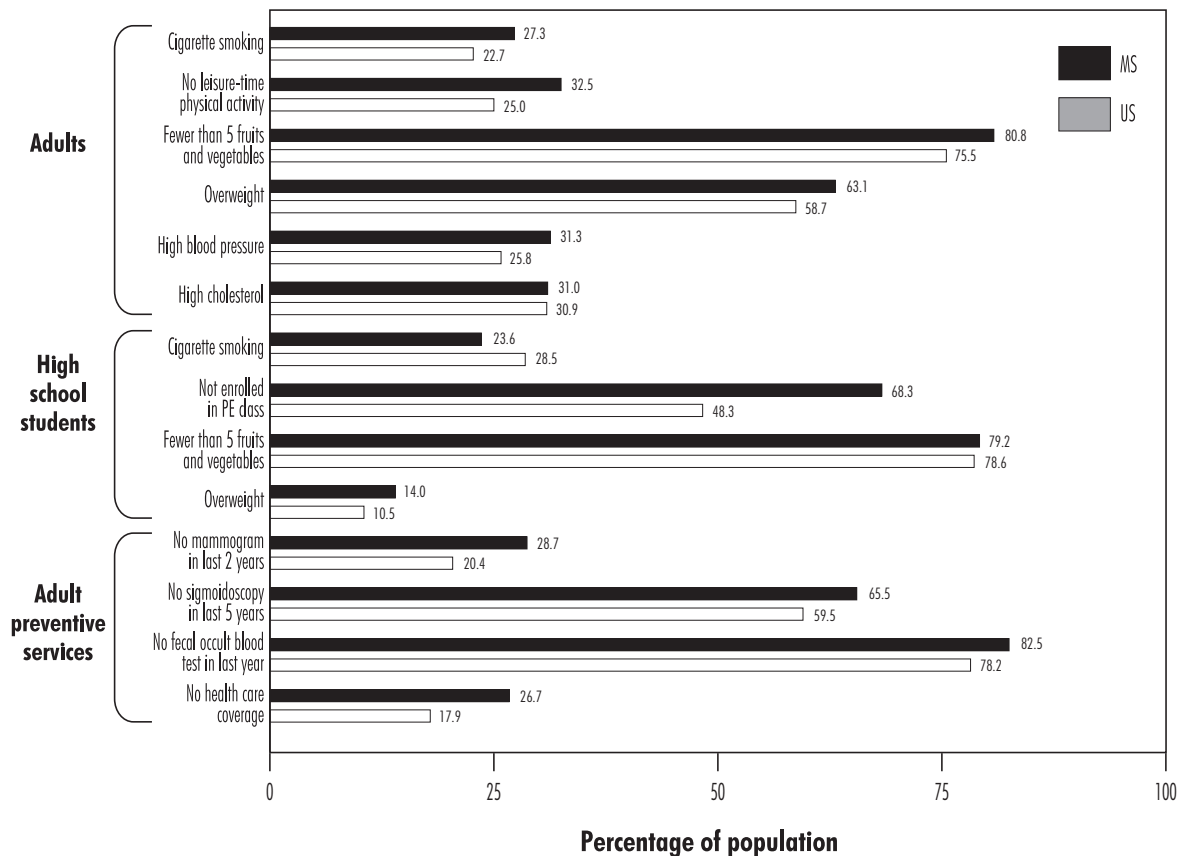
enrolled in physical education class.

- Eighteen percent of male and 10% of female high school students were overweight.
- Seventy-nine percent of students ate fewer than five servings per day of fruits and vegetables during the 7 days preceding the survey.

Preventive Services

- Among women aged 50 years or older, 29% reported not having had a mammogram within the last 2 years.
- Of adults aged 50 years or older, 74% of blacks and 63% of whites reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Eighty-three percent of adults aged 50 years or older reported not having had a fecal occult blood test within the past year.
- Among adults aged 18–64 years, 34% of blacks and 22% of whites reported having no health care coverage.

Risk Factors and Preventive Services, Mississippi Compared With United States



Source: CDC, Behavioral Risk Factor Surveillance System, 2002.
 CDC, Youth Risk Behavior Surveillance System, 2001.

Missouri: Burden of Chronic Diseases, 2001

Heart Disease

- In 2001, heart disease accounted for 16,633 deaths, or 30% of all deaths.
- The rate of death from heart disease was 25% higher among blacks than among whites.
- The rate of death from heart disease was 49% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 3,796 deaths in Missouri.
- The rate of death from stroke was 28% higher among blacks than among whites.

Cancer

- Cancer accounted for 23% of all deaths in Missouri in 2001.

- The American Cancer Society estimates that 30,300 new cases of cancer will be diagnosed in Missouri in 2004, including 4,100 new cases of lung cancer, 3,200 new cases of colorectal cancer, and 4,700 new cases of breast cancer in women.*
- The American Cancer Society estimates that 12,500 Missouri residents will die of cancer in 2004.
- The rate of death from lung cancer was 96% higher among men than among women.

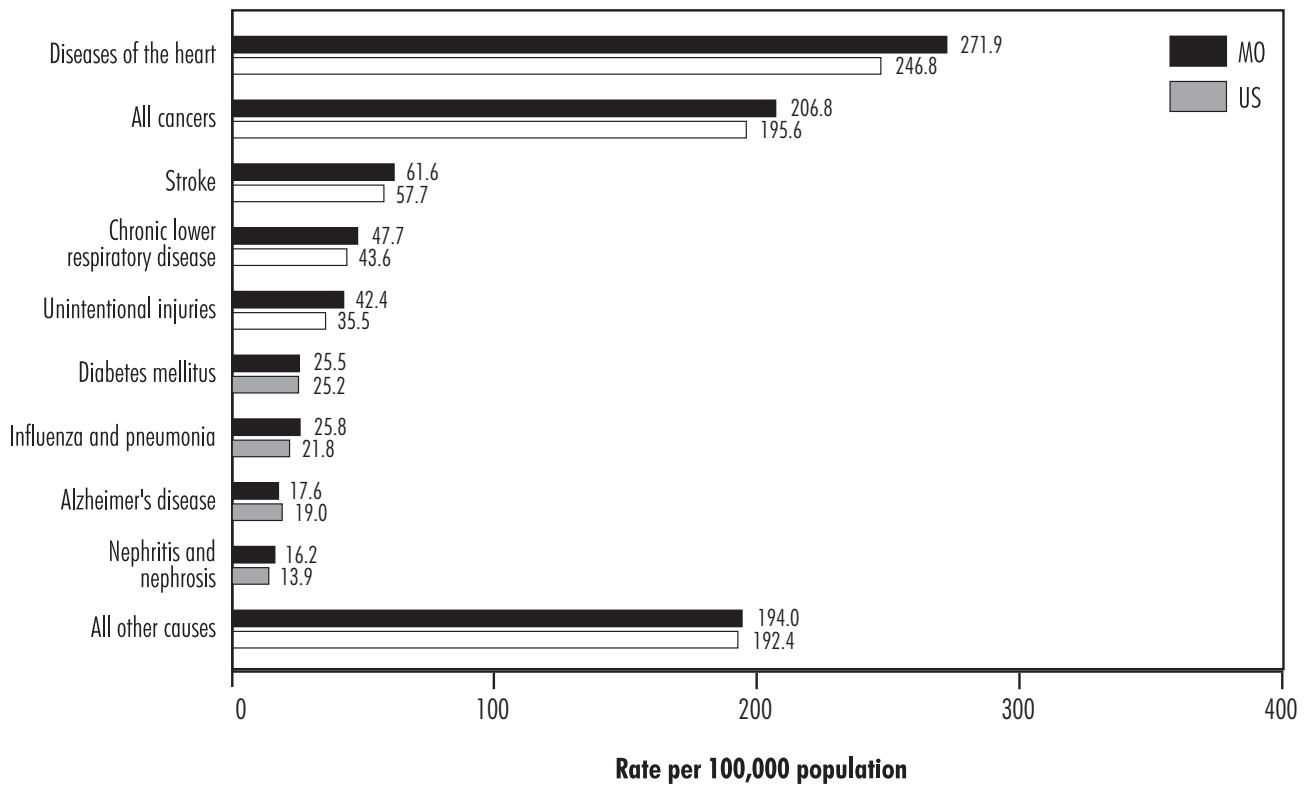
Diabetes

- In 2002,† 291,000 adults in Missouri had diagnosed diabetes.
- In 2001, diabetes accounted for 1,535 deaths in Missouri.
- The rate of death from diabetes was 110% higher among blacks than among whites.

* American Cancer Society are data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Missouri Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Missouri: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, current cigarette smoking was reported by 45% of American Indians/Alaska Natives, 37% of blacks and multiracial adults, and 25% of Hispanics and whites.
- No leisure-time physical activity was reported by 36% of blacks, 26% of whites, 24% of Hispanics, 23% of multiracial adults, and 22% of American Indians/Alaska Natives.
- Eating fewer than five servings of fruits and vegetables per day was reported by 85% of men and 77% of women.
- According to self-reported height and weight, 68% of men and 53% of women were overweight.
- In 2001, 32% of whites and 22% of blacks in Missouri reported having high blood cholesterol.
- In 2001, 32% of blacks, 26% of whites and multiracial persons, and 23% of Hispanics reported having high blood pressure.

Risk Factors Among High School Students

- Cigarette smoking was reported by 33% of white and 14% of black students in 2001.
- Forty-four percent of high school students reported not being

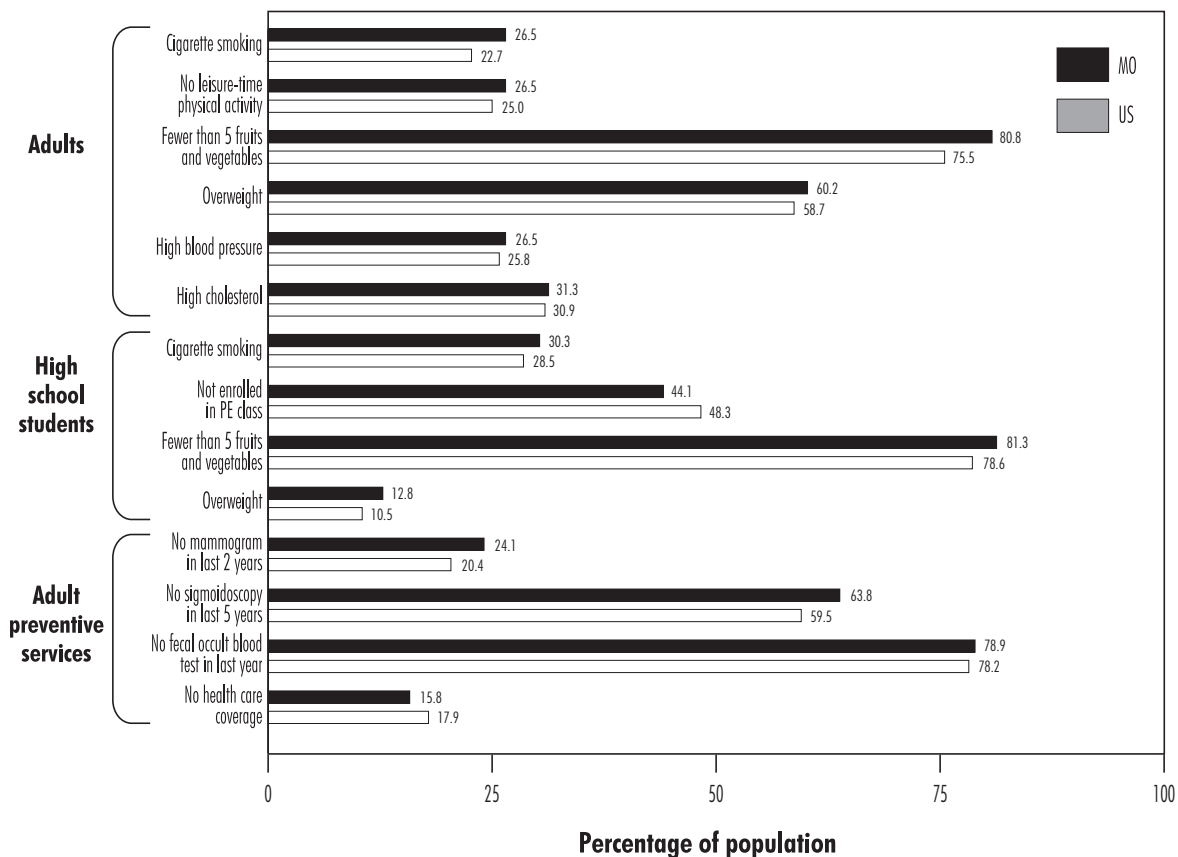
enrolled in physical education class.

- Seventeen percent of male and 9% of female students were overweight.
- Eighty-one percent of students ate fewer than five servings per day of fruits and vegetables during the 7 days preceding the survey.

Preventive Services

- Among women aged 50 years or older, 24% of whites and 15% of blacks reported not having had a mammogram within the last 2 years.
- Sixty-four percent of adults aged 50 years or older reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Among adults aged 50 years or older, 81% of women and 76% of men reported not having had a fecal occult blood test within the past year.
- Among adults aged 18–64, no health care coverage was reported by 27% of blacks, 24% of Hispanics, 15% of multiracial adults, and 14% of whites.

Risk Factors and Preventive Services, Missouri Compared With United States



Source: CDC, Behavioral Risk Factor Surveillance System, 2002.
 CDC, Youth Risk Behavior Surveillance System, 2001.

Montana: Burden of Chronic Diseases, 2001

Heart Disease

- In 2001, heart disease was the most common cause of death in Montana, accounting for 24% of all deaths.
- The rate of death from heart disease was 3% higher among American Indians/Alaska Natives than among whites.
- The rate of death from heart disease was 63% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 578 deaths in Montana.
- The rate of death from stroke was 9% higher among women than among men.

Cancer

- Cancer accounted for 24% of all deaths in Montana in 2001.

- The American Cancer Society estimates that 5,000 new cases of cancer will be diagnosed in Montana in 2004, including 700 new cases of lung cancer, 500 new cases of colorectal cancer, and 600 new cases of breast cancer in women.*
- The American Cancer Society estimates that 2,100 Montana residents will die of cancer in 2004.
- The rate of death from lung cancer was 107% higher among American Indians/Alaska Natives than among whites.

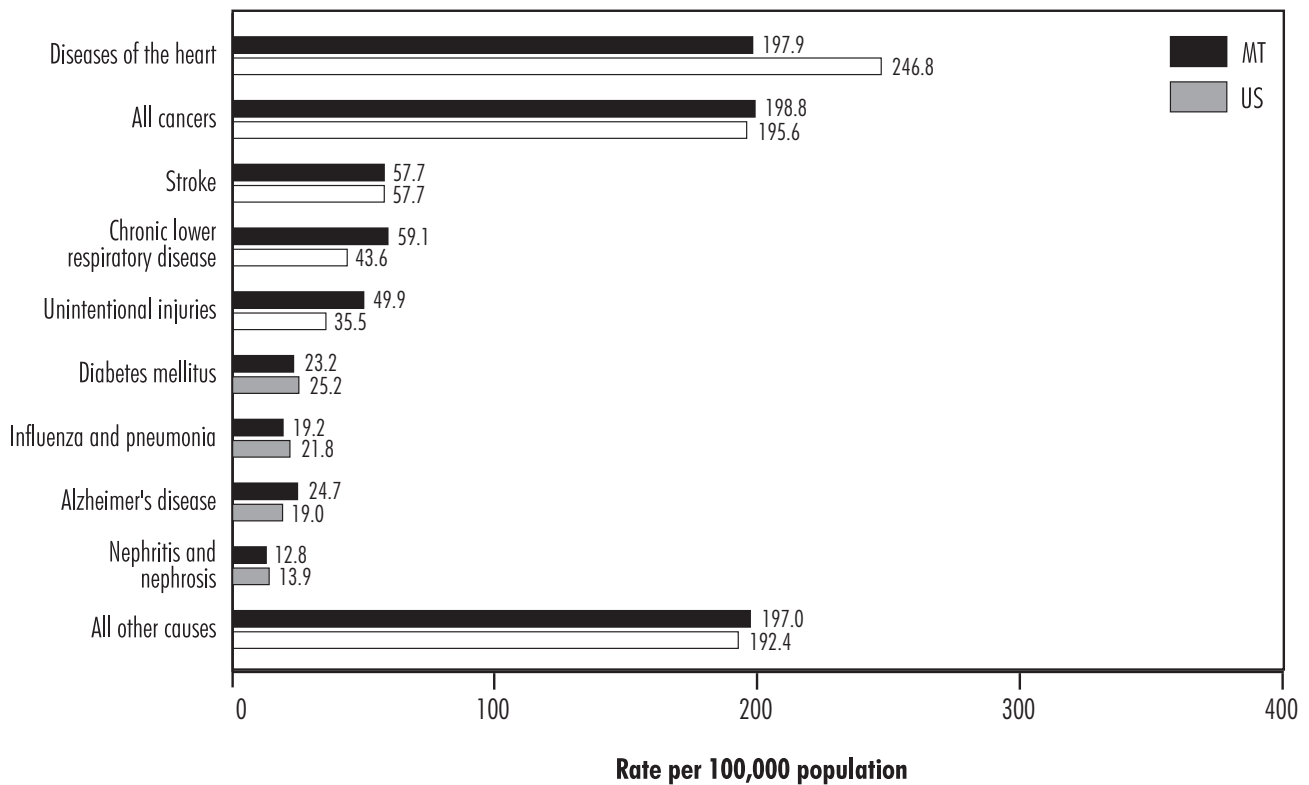
Diabetes

- In 2002,† 37,000 adults in Montana had diagnosed diabetes.
- In 2001, diabetes accounted for 229 deaths in Montana.

* American Cancer Society are data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Montana Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Montana: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, current cigarette smoking was reported by 45% of American Indians/Alaska Natives, 23% of Hispanics, and 20% of whites in Montana.
- No leisure-time physical activity was reported by 26% of American Indians/Alaska Natives, 19% of whites, and 10% of Hispanics.
- Eating fewer than five servings of fruits and vegetables per day was reported by 82% of men and 73% of women.
- According to self-reported height and weight, 66% of men and 47% of women were overweight.
- In 2001, 43% of Hispanics, 34% of American Indians/Alaska Natives, and 29% of whites in Montana reported having high blood cholesterol.
- In 2001, 34% of Hispanics, 32% of American Indians/Alaska Natives, and 27% of whites reported having high blood pressure.

Risk Factors Among High School Students

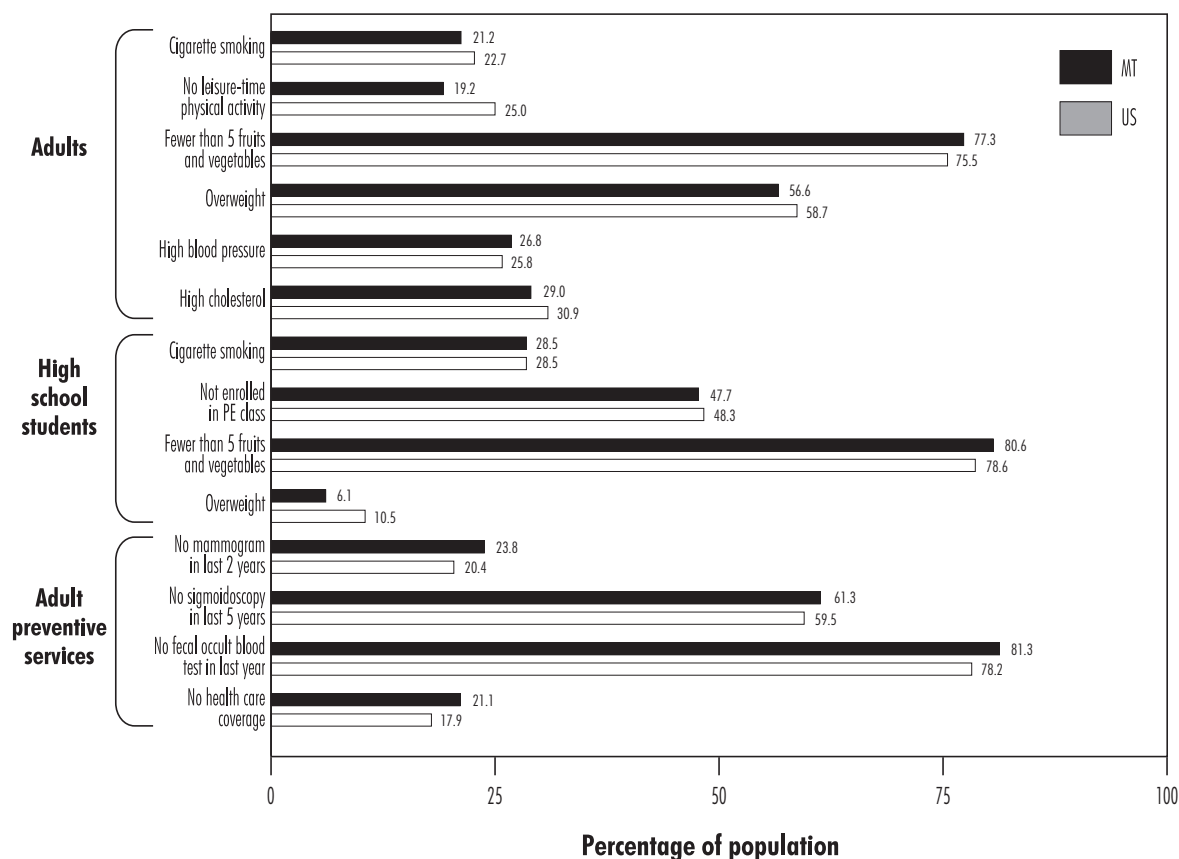
- In 2001, 32% of female and 25% of male students reported cigarette smoking.

- Forty-eight percent of students were not enrolled in physical education class.
- Eight percent of male and 4% of female high school students were overweight.
- Eighty-one percent of students ate fewer than five servings per day of fruits and vegetables during the 7 days preceding the survey.

Preventive Services

- Of women aged 50 years or older, 24% reported not having had a mammogram within the last 2 years.
- Among adults aged 50 years or older, 63% of men and 60% of women reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Among adults aged 50 years or older, 81% reported not having had a fecal occult blood test within the past year.
- Among adults aged 18–64, no health care coverage was reported by 37% of Hispanics, 35% of American Indians/Alaska Natives, and 20% of whites.

Risk Factors and Preventive Services, Montana Compared With United States



Source: CDC, Behavioral Risk Factor Surveillance System, 2002.
 CDC, Youth Risk Behavior Surveillance System, 2001.

Nebraska: Burden of Chronic Diseases, 2001

Heart Disease

- Heart disease was the most common cause of death in Nebraska in 2001, accounting for 4,150 deaths, or 27% of all deaths.
- The rate of death from heart disease was 76% higher among American Indians/Alaska Natives and 35% higher among blacks than among whites.
- The rate of death from heart disease was 53% higher among men than among women.

- The American Cancer Society estimates that 8,300 new cases of cancer will be diagnosed in Nebraska in 2004, including 1,000 new cases of lung cancer, 1,000 new cases of colorectal cancer, and 1,300 new cases of breast cancer in women.*
- The American Cancer Society estimates that 3,400 Nebraska residents will die of cancer in 2004.
- The rate of death from all cancers was 54% higher among blacks than among whites.

Stroke

- In 2001, stroke was the cause of 1,130 deaths, or 7% of all deaths in Nebraska.
- The rate of death from stroke was 78% higher among blacks than among whites.

Diabetes

- In 2002,† 70,000 adults in Nebraska had diagnosed diabetes.
- In 2001, diabetes accounted for 400 deaths in Nebraska.
- The rate of death from diabetes was 15% higher among men than among women.

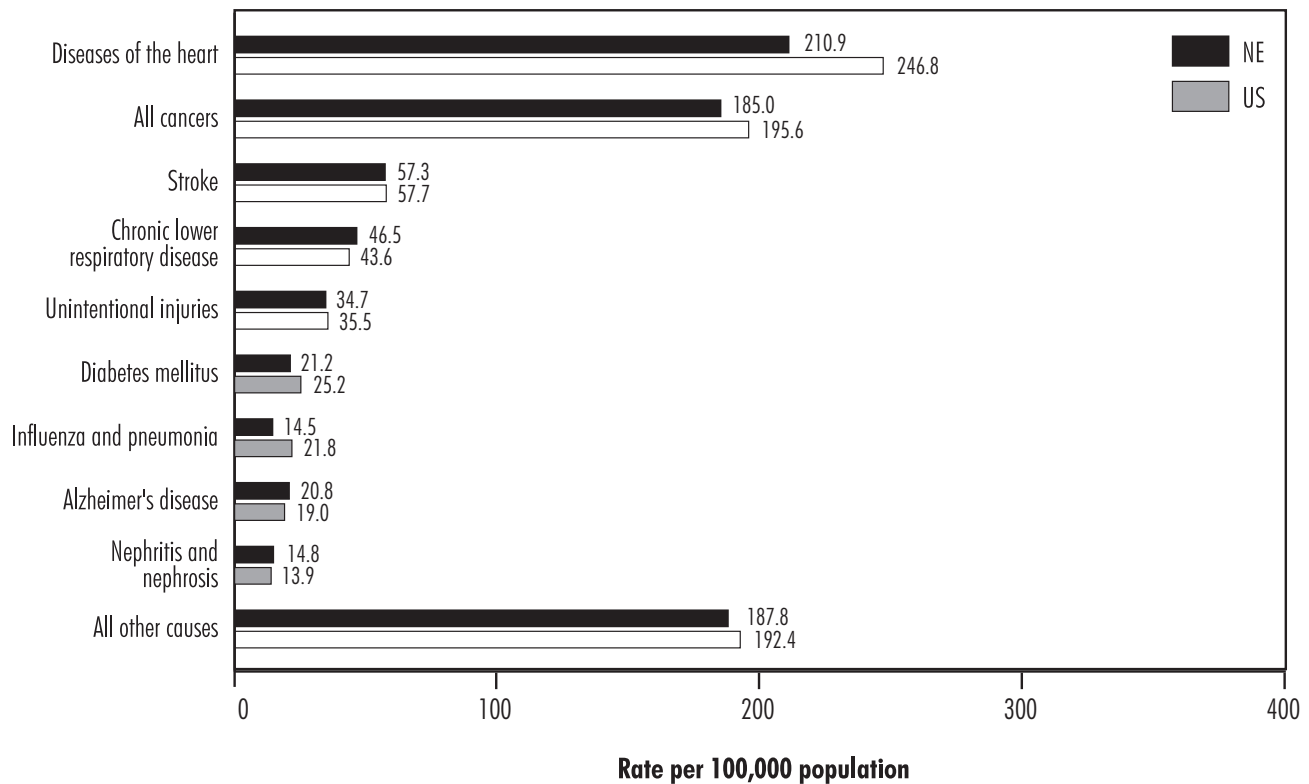
Cancer

- Cancer accounted for 22% of all deaths in Nebraska in 2001.

* American Cancer Society are data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Nebraska Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Nebraska: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, current cigarette smoking was reported by 30% of blacks, 25% of Hispanics, and 22% of whites in Nebraska.
- No leisure-time physical activity was reported by 40% of blacks, 39% of Hispanics, and 20% of whites.
- Eighty-seven percent of men and 77% of women reported eating fewer than five servings of fruits and vegetables per day.
- According to self-reported height and weight, 70% of men and 51% of women were overweight.
- In 2001, 29% of whites, 24% of blacks, and 12% of Hispanics in Nebraska reported having high blood cholesterol.
- In 2001, 29% of blacks, 23% of whites, and 11% of Hispanics reported having high blood pressure.

Risk Factors Among High School Students

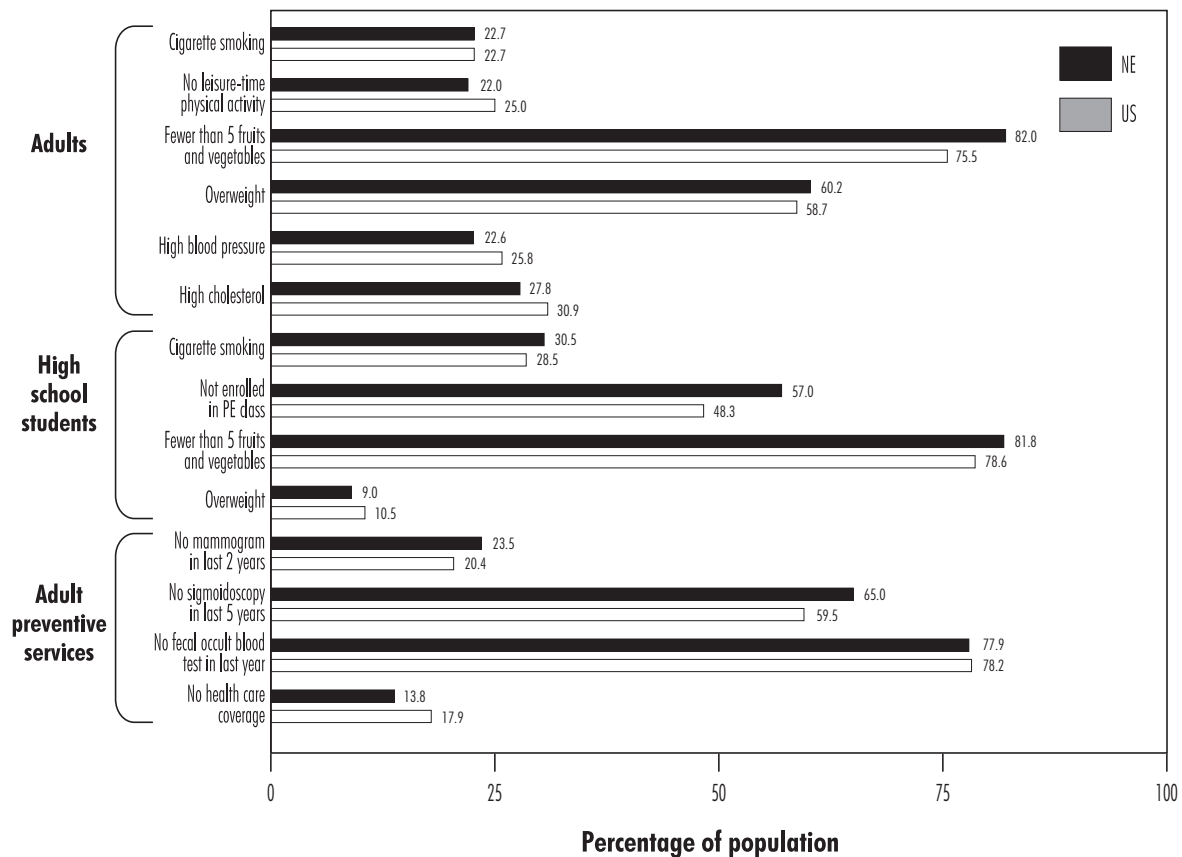
- Cigarette smoking was reported by 31% of high school students in 2001.

- Fifty-seven percent of students were not enrolled in physical education class.
- Twelve percent of male and 6% of female students were overweight.
- Eighty-two percent of students ate fewer than five servings per day of fruits and vegetables during the 7 days preceding the survey.

Preventive Services

- Of women aged 50 years or older, 24% reported not having had a mammogram within the last 2 years.
- Among adults aged 50 years or older, 71% of Hispanics and 65% of whites reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Of adults aged 50 years or older, 78% reported not having had a fecal occult blood test within the past year.
- Among adults aged 18–64, no health care coverage was reported by 40% of Hispanics, 12% of whites, and 9% of blacks.

Risk Factors and Preventive Services, Nebraska Compared With United States



Source: CDC, Behavioral Risk Factor Surveillance System, 2002.
 CDC, Youth Risk Behavior Surveillance System, 2001.

Nevada: Burden of Chronic Diseases, 2001

Heart Disease

- Heart disease was the most common cause of death in Nevada in 2001, accounting for 4,392 deaths, or 27% of all deaths.
- The rate of death from heart disease was 53% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 913 deaths in Nevada.
- The rate of death from stroke was 63% higher among blacks than among whites.

Cancer

- Cancer accounted for 23% of all deaths in Nevada in 2001.

- The American Cancer Society estimates that 11,000 new cases of cancer will be diagnosed in Nevada in 2004, including 1,600 new cases of lung cancer, 1,200 new cases of colorectal cancer, and 1,600 new cases of breast cancer in women.*
- The American Cancer Society estimates that 4,500 Nevada residents will die of cancer in 2004.
- The rate of death from lung cancer was 43% higher among men than among women.

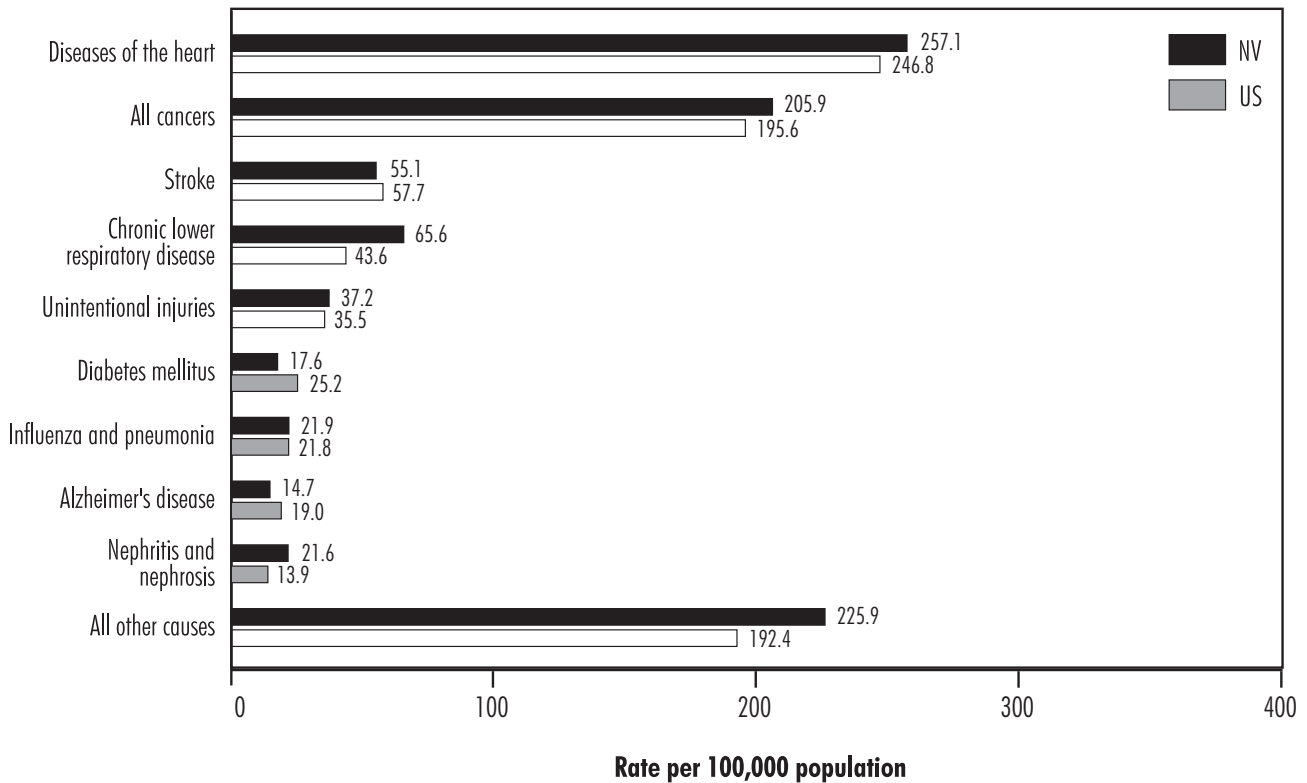
Diabetes

- In 2002,† 94,000 adults in Nevada had diagnosed diabetes.
- In 2001, diabetes accounted for 322 deaths in Nevada.
- The rate of death from diabetes was 98% higher among blacks than among whites.

* American Cancer Society are data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Nevada Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Nevada: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, 29% of men and 24% of women in Nevada reported current cigarette smoking.
- No leisure-time physical activity was reported by 38% of Asians/Pacific Islanders and Hispanics, 27% of blacks, and 20% of whites and multiracial adults.
- Eighty-three percent of men and 72% of women reported eating fewer than five servings of fruits and vegetables per day.
- According to self-reported height and weight, 65% of blacks, 64% of Hispanics, 62% of multiracial adults, 58% of whites, and 39% of Asians/Pacific Islanders were overweight.
- In 2001, 50% of blacks, 43% of multiracial persons, 36% of whites, and 31% of Hispanics in Nevada reported having high blood cholesterol.
- In 2001, 29% of blacks, 26% of whites and multiracial persons, and 21% of Hispanics reported having high blood pressure.

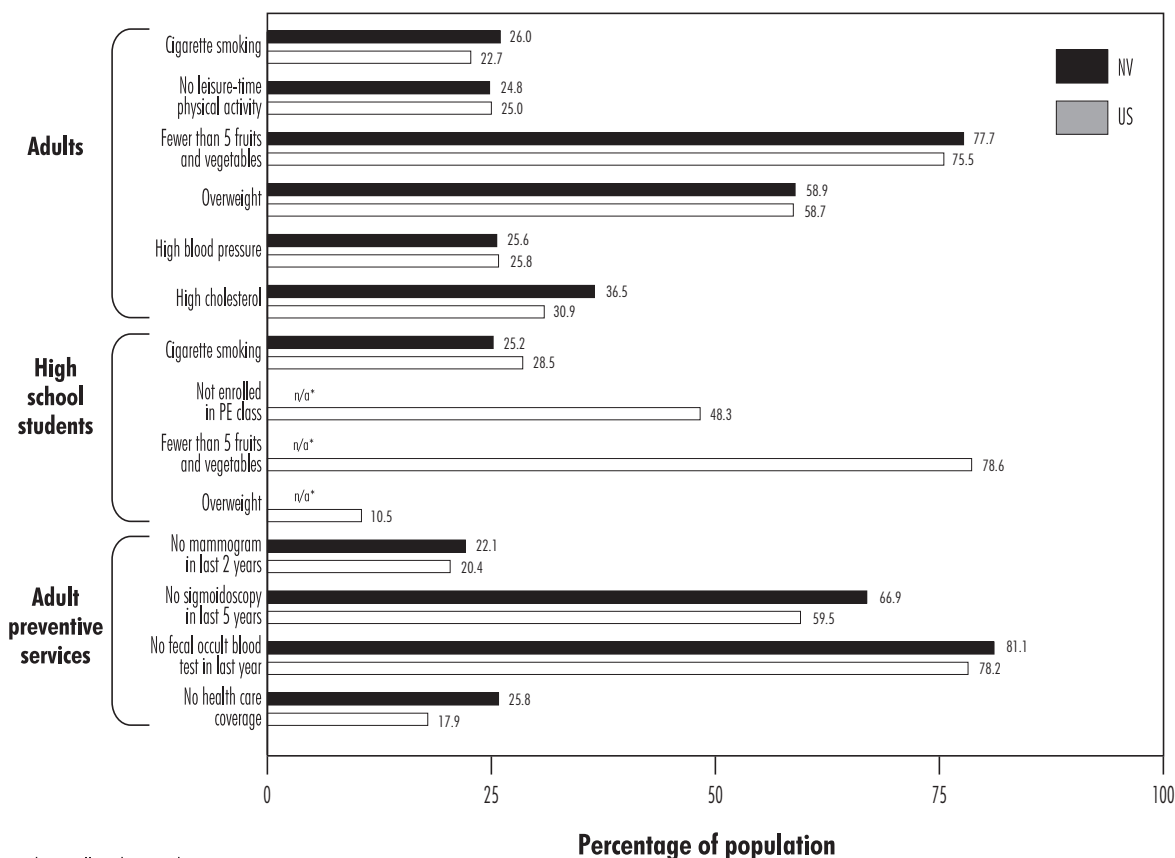
Risk Factors Among High School Students

- In 2001, 25% of students reported cigarette smoking.

Preventive Services

- Of women aged 50 years or older, 22% reported not having had a mammogram within the last 2 years.
- Among adults aged 50 years or older, 70% of Hispanics, 70% of multiracial adults, and 65% of whites reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Among adults aged 50 years or older, 94% of Hispanics, 87% of multiracial adults, and 80% of whites reported not having had a fecal occult blood test within the last year.
- Among adults aged 18–64, no health care coverage was reported by 58% of Hispanics, 27% of multiracial adults, 23% of blacks, 16% of whites, and 5% of Asians/Pacific Islanders.

Risk Factors and Preventive Services, Nevada Compared With United States



*Did not collect data on this topic.

Source: CDC, Behavioral Risk Factor Surveillance System, 2002.

CDC, Youth Risk Behavior Surveillance System, 2001.

New Hampshire: Burden of Chronic Diseases, 2001

Heart Disease

- Heart disease was the most common cause of death in New Hampshire in 2001, accounting for 29% of all deaths.
- The rate of death from heart disease was 56% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 633 deaths in New Hampshire.
- The rate of death from stroke was 4% higher among women than among men.

Cancer

- Cancer accounted for 24% of all deaths in New Hampshire in 2001.
- The American Cancer Society estimates that 6,300 new cases

of cancer will be diagnosed in New Hampshire in 2004, including 800 new cases of lung cancer, 700 new cases of colorectal cancer, and 900 new cases of breast cancer in women.*

- The American Cancer Society estimates that 2,600 New Hampshire residents will die of cancer in 2004.
- The rate of death from lung cancer was 45% higher among men than among women.

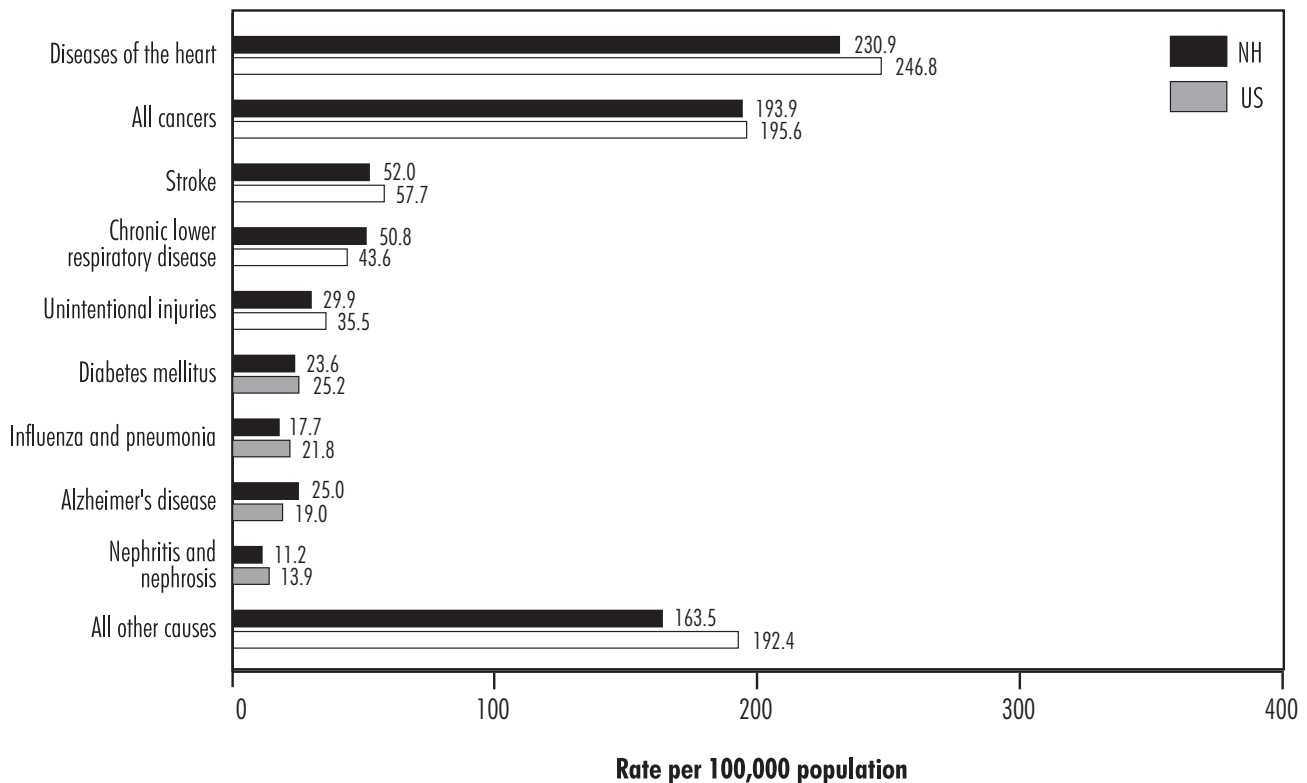
Diabetes

- In 2002,† 55,000 adults in New Hampshire had diagnosed diabetes.
- In 2001, diabetes accounted for 291 deaths in New Hampshire.
- The rate of death from diabetes was 65% higher among men than among women.

* American Cancer Society are data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, New Hampshire Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

New Hampshire: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, 35% of American Indians/Alaska Natives, 34% of Hispanics, and 23% of whites in New Hampshire reported current cigarette smoking.
- No leisure-time physical activity was reported by 32% of Hispanics, 26% of American Indians/Alaska Natives, and 19% of whites.
- Seventy-nine percent of men and 65% of women reported eating fewer than five servings of fruits and vegetables per day.
- According to self-reported height and weight, 67% of men and 45% of women were overweight.
- In 2001, 35% of men and 28% of women in New Hampshire reported having high blood cholesterol.
- In 2001, 23% of whites and 14% of Hispanics reported having high blood pressure.

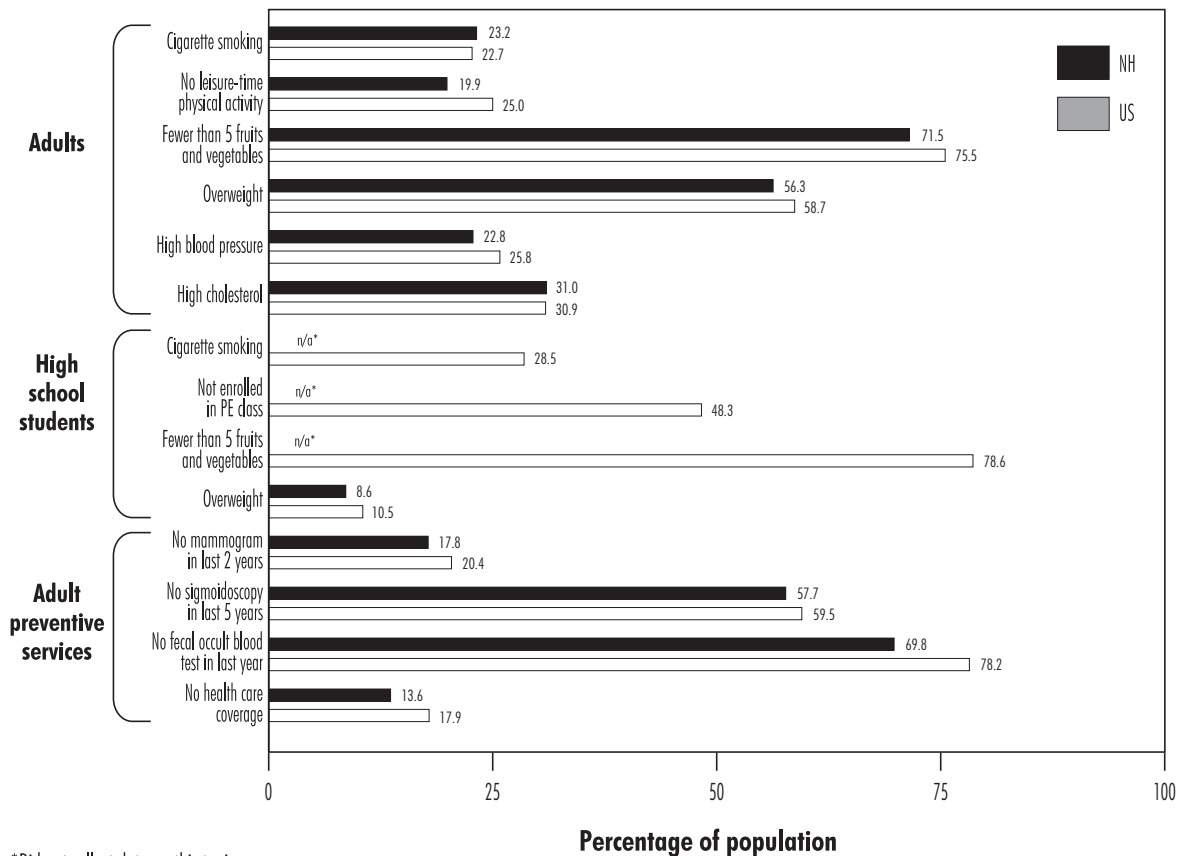
Risk Factors Among High School Students

- Twelve percent of male and 5% of female students were overweight. (Note: State did not ask smoking, PE, or fruit and vegetable questions in 2001.)

Preventive Services

- Of women aged 50 years or older, 18% reported not having had a mammogram within the last 2 years.
- Of adults aged 50 years or older, 61% of women and 54% of men reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Among adults aged 50 years or older, 70% reported not having had a fecal occult blood test within the past year.
- Among adults aged 18–64, no health care coverage was reported by 14% of New Hampshire residents.

Risk Factors and Preventive Services, New Hampshire Compared With United States



*Did not collect data on this topic.

Source: CDC, Behavioral Risk Factor Surveillance System, 2002.

CDC, Youth Risk Behavior Surveillance System, 2001.

New Jersey: Burden of Chronic Diseases, 2001

Heart Disease

- Heart disease was the most common cause of death in New Jersey in 2001, accounting for 22,698 deaths, or 30% of all deaths.
- The rate of death from heart disease was 46% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 4,006 deaths in New Jersey.
- The rate of death from stroke was 61% higher among blacks than among whites.

Cancer

- Cancer accounted for 24% of all deaths in New Jersey in 2001.
- The American Cancer Society estimates that 43,800 new cases

of cancer will be diagnosed in New Jersey in 2004, including 5,100 new cases of lung cancer, 4,800 new cases of colorectal cancer, and 8,000 new cases of breast cancer in women.*

- The American Cancer Society estimates that 18,100 New Jersey residents will die of cancer in 2004.
- The rate of death from lung cancer was 73% higher among men than among women.

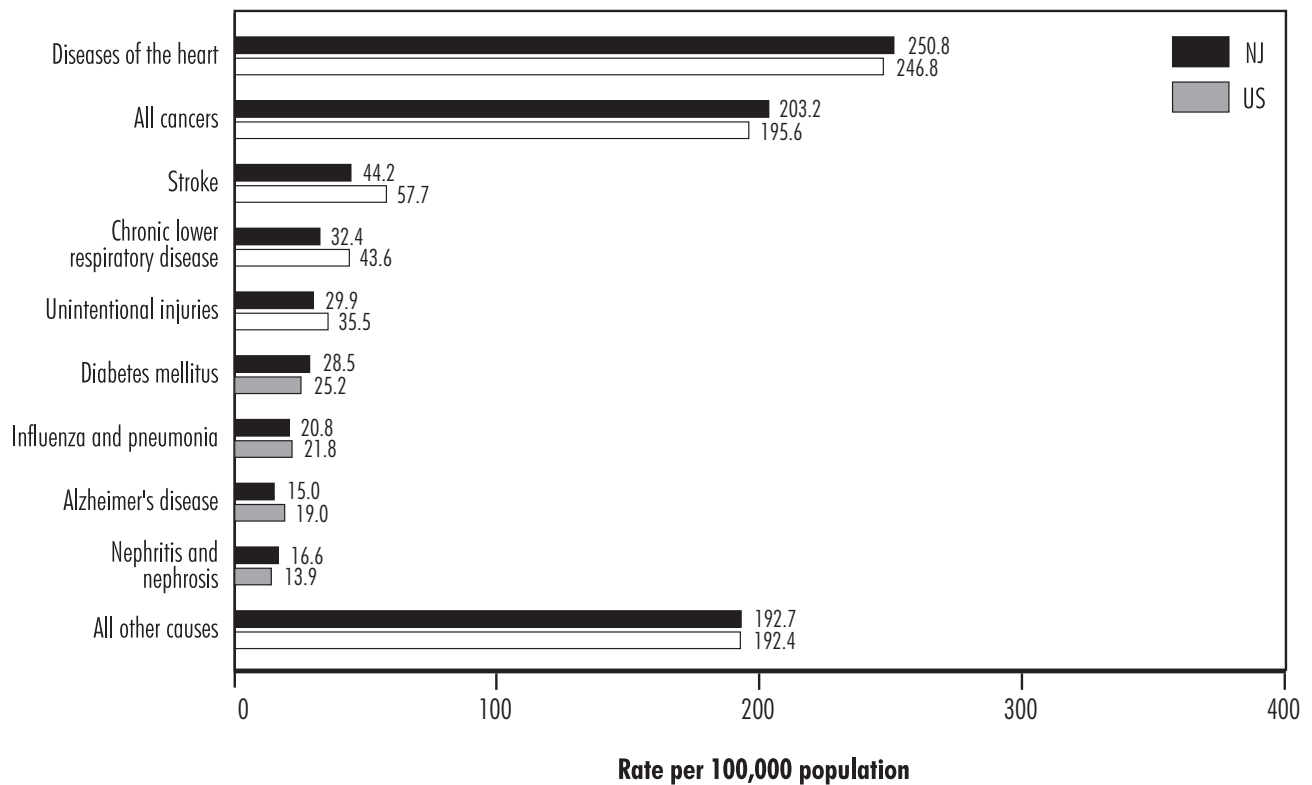
Diabetes

- In 2002,† 426,000 adults in New Jersey had diagnosed diabetes.
- In 2001, diabetes accounted for 2,556 deaths in New Jersey.
- The rate of death from diabetes was 144% higher among blacks than among whites.

* American Cancer Society are data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, New Jersey Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

New Jersey: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, 21% of men and 18% of women in New Jersey reported current cigarette smoking.
- No leisure-time physical activity was reported by 40% of Hispanics, 34% of Asians/Pacific Islanders, 36% of blacks, and 20% of whites.
- Seventy-four percent of men and 70% of women reported eating fewer than five servings of fruits and vegetables per day.
- According to self-reported height and weight, 68% of blacks, 56% of Hispanics and whites, and 41% of Asians/Pacific Islanders were overweight.
- In 2001, 32% of whites, 28% of blacks, 25% of Hispanics, and 21% of Asians/Pacific Islanders in New Jersey reported high blood cholesterol.
- In 2001, 34% of blacks, 27% of whites, 20% of Hispanics, and 17% of Asians/Pacific Islanders reported having high blood pressure.

- Fourteen percent of male and 6% of female students were overweight.
- Seventy-four percent of students ate fewer than five servings per day of fruits and vegetables during the 7 days preceding the survey.

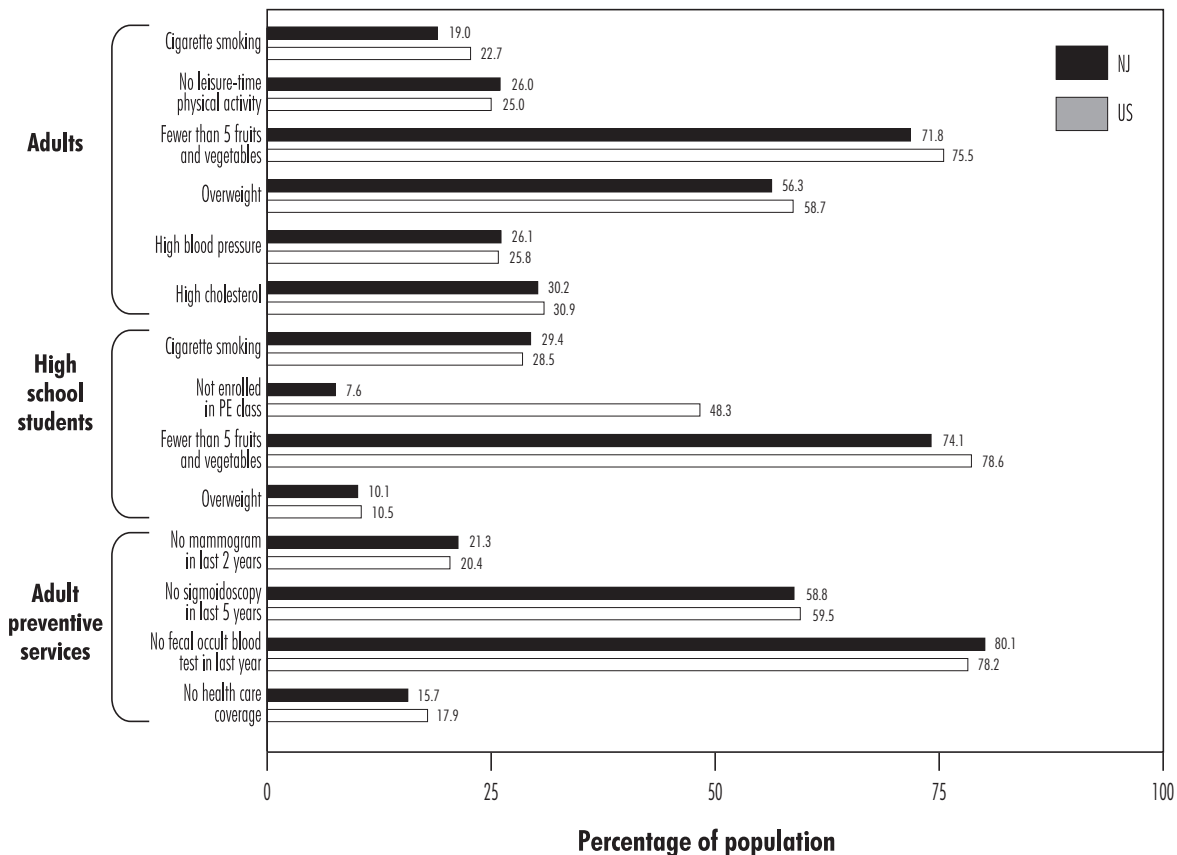
Preventive Services

- Of women aged 50 years or older, 24% of whites, 22% of Hispanics, and 7% of blacks reported not having had a mammogram within the last 2 years.
- Of adults aged 50 years or older, 77% of Asians/Pacific Islanders, 72% of Hispanics, 66% of blacks, and 57% of whites reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Among adults aged 50 years or older, 96% of Asians/Pacific Islanders, 80% of whites, 75% of Hispanics, and 74% of blacks reported not having had a fecal occult blood test within the past year.
- Among adults aged 18–64, no health care coverage was reported by 42% of Hispanics, 18% of blacks, 15% of Asians/Pacific Islanders, and 9% of whites.

Risk Factors Among High School Students

- In 2001, 34% of Hispanic, 32% of white, and 17% of black students reported cigarette smoking.

Risk Factors and Preventive Services, New Jersey Compared With United States



Source: CDC, Behavioral Risk Factor Surveillance System, 2002.
 CDC, Youth Risk Behavior Surveillance System, 2001.

New Mexico: Burden of Chronic Diseases, 2001

Heart Disease

- In 2001, heart disease was the most common cause of death in New Mexico, accounting for 24% of all deaths.
- The rate of death from heart disease was 57% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 824 deaths, or 6% of all deaths in New Mexico.
- The rate of death from stroke was 16% higher among women than among men.

Cancer

- In 2001, cancer accounted for 21% of all deaths in New Mexico.
- The American Cancer Society estimates that 7,600 new cases

of cancer will be diagnosed in New Mexico in 2004, including 800 new cases of lung cancer, 800 new cases of colorectal cancer, and 1,000 new cases of breast cancer in women.*

- The American Cancer Society estimates that 3,100 New Mexico residents will die of cancer in 2004.
- The rate of death from lung cancer was 75% higher among men than among women.

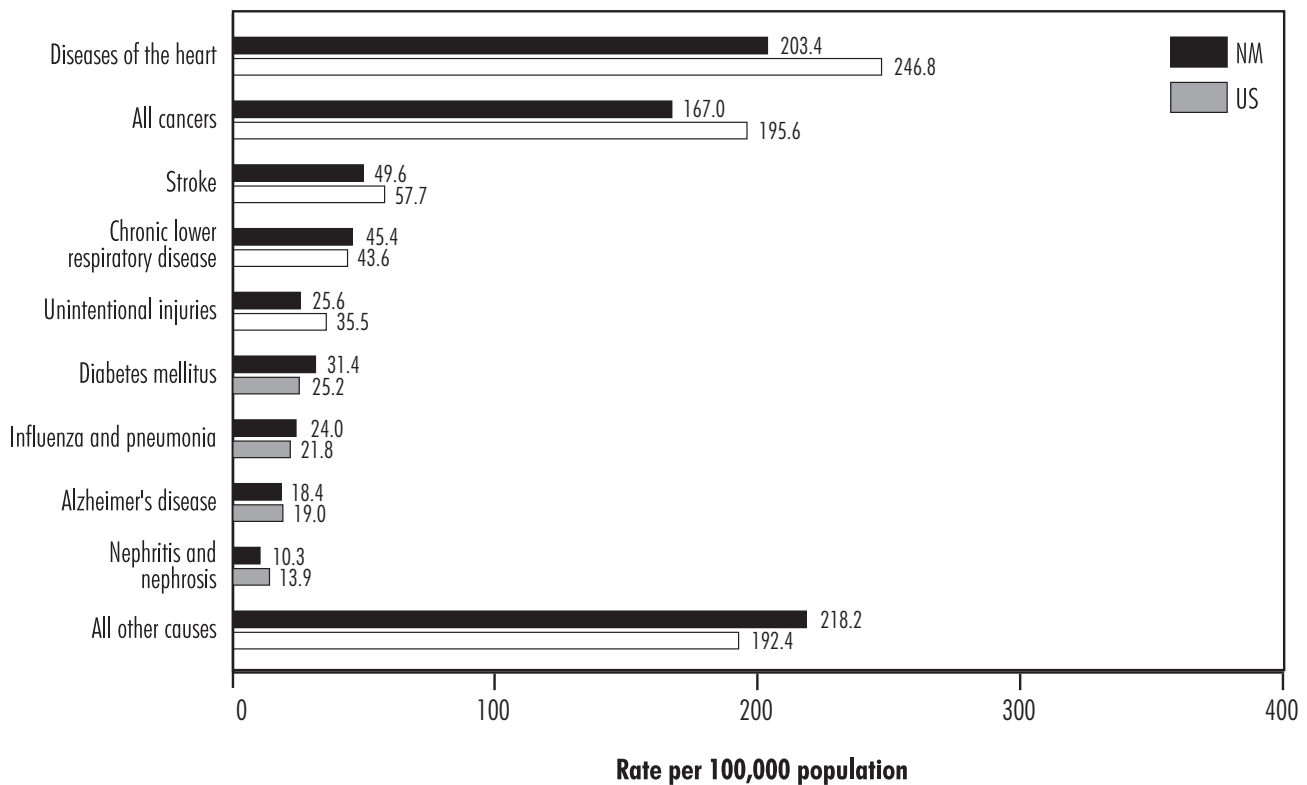
Diabetes

- In 2002,† 82,000 adults in New Mexico had diagnosed diabetes.
- In 2001, diabetes accounted for 538 deaths.
- The rate of death from diabetes was 296% higher among American Indians/Alaska Natives and 120% higher among Hispanics than among whites.

* American Cancer Society are data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, New Mexico Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

New Mexico: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, 23% of men and 19% of women in New Mexico reported current cigarette smoking.
- No leisure-time physical activity was reported by 29% of Hispanics, 25% of American Indians/Alaska Natives, 21% of blacks, and 18% of whites.
- Eating fewer than five servings of fruits and vegetables per day was reported by 82% of men and 74% of women.
- According to self-reported height and weight, 69% of blacks, 67% of American Indians/Alaska Natives, 61% of Hispanics, and 52% of whites were overweight.
- In 2001, 28% of whites, 23% of Hispanics, and 18% of American Indians/Alaska Natives in New Mexico reported having high blood cholesterol.
- In 2001, 28% of blacks, 22% of whites, 18% of Hispanics, and 17% of American Indians/Alaska Natives reported having high blood pressure.

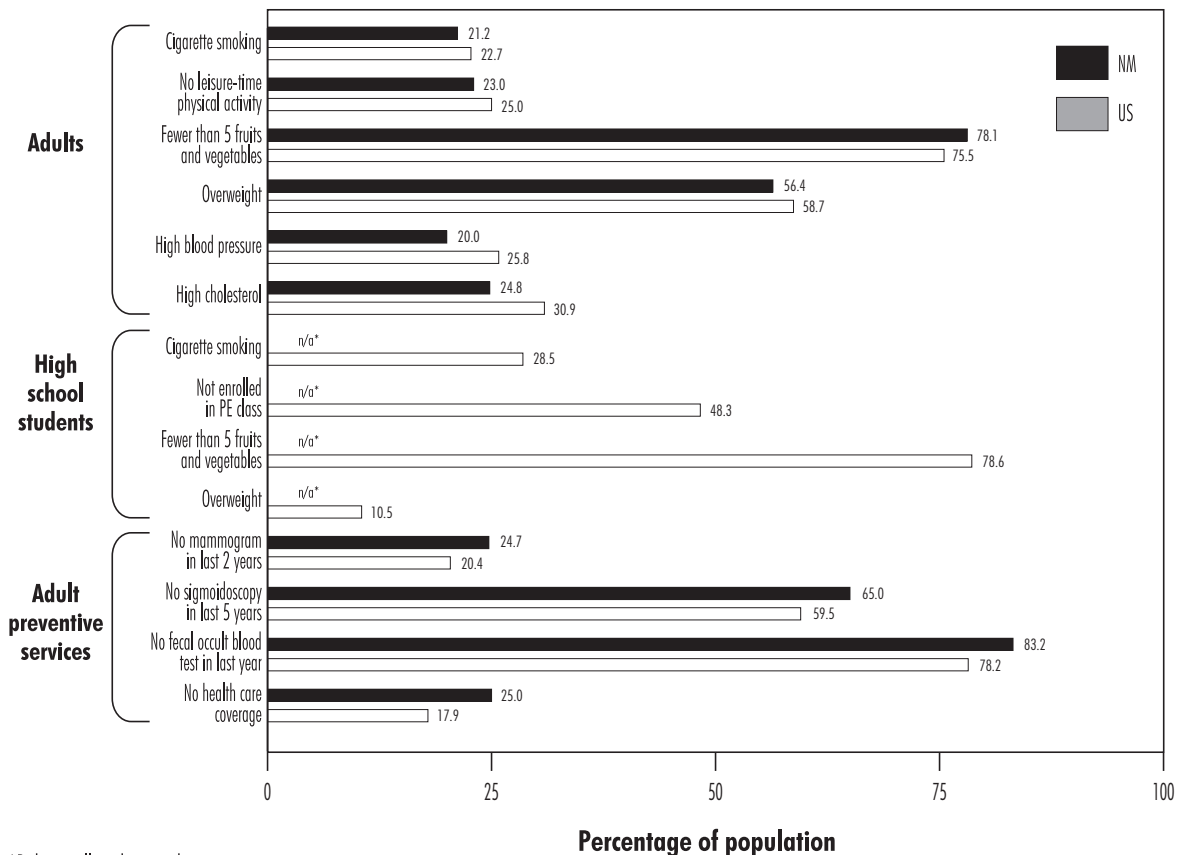
Risk Factors Among High School Students

- The 2001 YRBS was not conducted in New Mexico.

Preventive Services

- Of women aged 50 years or older, 25% reported not having had a mammogram within the last 2 years.
- Of adults aged 50 years or older, 67% of women and 62% of men reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Of adults aged 50 years or older, 97% of American Indians/Alaska Natives, 86% of Hispanics, and 82% of whites reported not having had a fecal occult blood test within the past year.
- Among adults aged 18–64 years, 25% reported having no health care coverage.

Risk Factors and Preventive Services, New Mexico Compared With United States



*Did not collect data on this topic.

Source: CDC, Behavioral Risk Factor Surveillance System, 2002.

CDC, Youth Risk Behavior Surveillance System, 2001.

New York: Burden of Chronic Diseases, 2001

Heart Disease

- Heart disease accounted for 56,633 deaths, or 36% of all deaths.
- The rate of death from heart disease was 42% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 7,706 deaths in New York.
- The rate of death from stroke was 7% higher among blacks than among whites.

Cancer

- In 2001, cancer accounted for 36,975 deaths, or 23% of all deaths in New York.

- The American Cancer Society estimates that 88,200 new cases of cancer will be diagnosed in New York in 2004, including 10,000 new cases of lung cancer, 9,900 new cases of colorectal cancer, and 15,200 new cases of breast cancer in women.*
- The American Cancer Society estimates that 36,300 New York residents will die of cancer in 2004.
- The rate of death from lung cancer was 70% higher among men than among women.

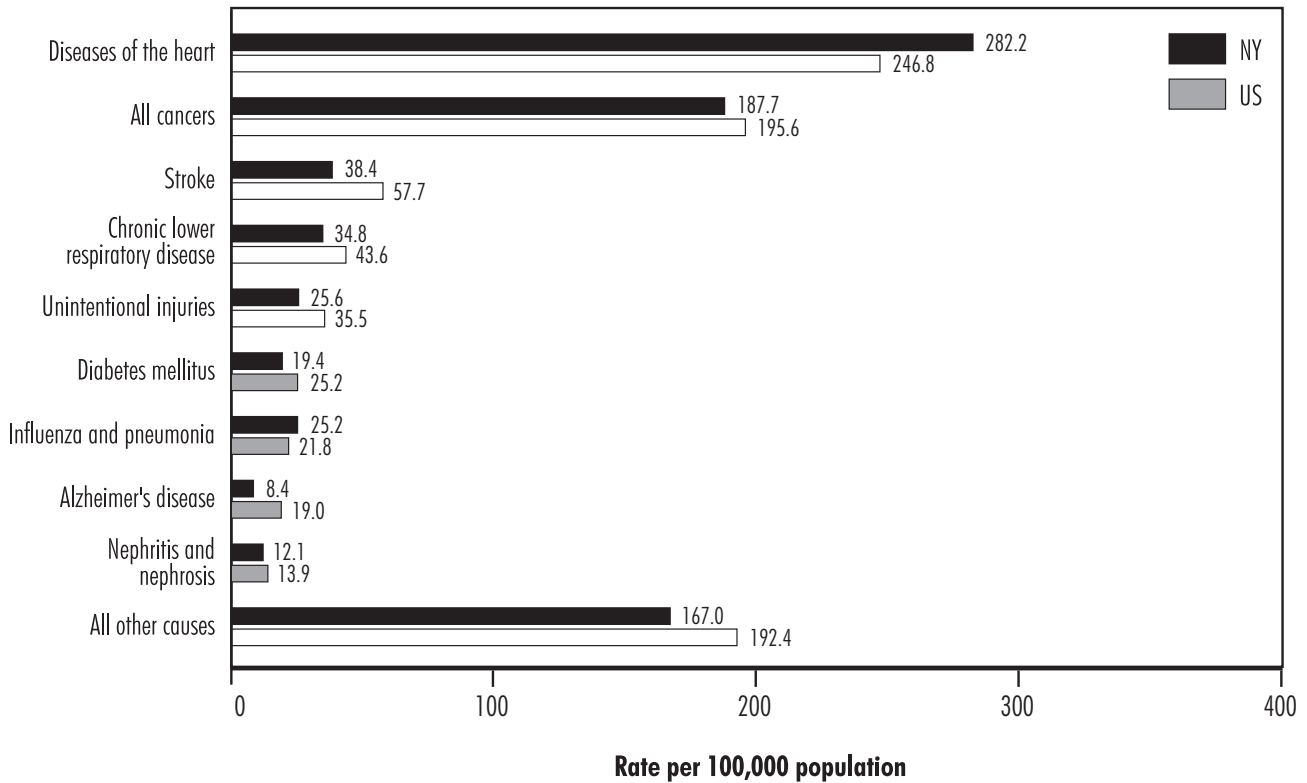
Diabetes

- In 2002,† 997,000 adults in New York had diagnosed diabetes.
- In 2001, diabetes accounted for 3,844 deaths in New York.
- The rate of death from diabetes was 138% higher among blacks and 56% higher among Hispanics than among whites.

* American Cancer Society are data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, New York Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

New York: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, 26% of men and 19% of women in New York reported current cigarette smoking.
- No leisure-time physical activity was reported by 38% of Hispanics, 31% of multiracial adults, 29% of blacks, 27% of Asians/Pacific Islanders, and 20% of whites.
- Seventy-seven percent of men and 68% of women reported eating fewer than five servings of fruits and vegetables per day.
- According to self-reported height and weight, 70% of blacks, 59% of Hispanics, 56% of whites, and 32% of Asians/Pacific Islanders were overweight.
- In 2001, 34% of Asians/Pacific Islanders, 32% of whites, 29% of Hispanics, and 24% of blacks in New York reported having high blood cholesterol.
- In 2001, 32% of blacks, 27% of whites, 21% of Hispanics, and 15% of Asians/Pacific Islanders reported having high blood pressure.

Risk Factors Among High School Students

- In 2001, 30% of high school students reported cigarette smoking.
- Only about 6% of students were not enrolled in physical

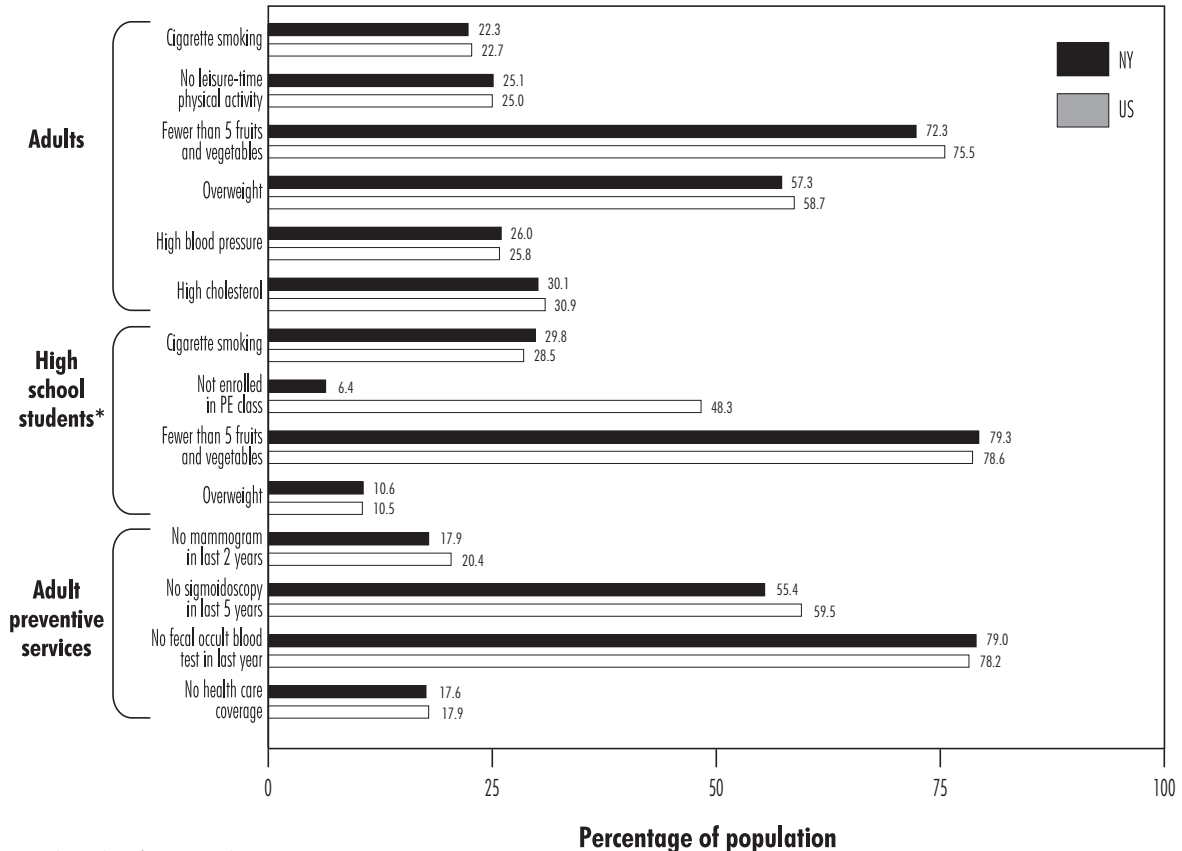
education class.

- Sixteen percent of male and 5% of female students were overweight.
- Seventy-nine percent of students ate fewer than five servings per day of fruits and vegetables during the 7 days preceding the survey.

Preventive Services

- Of women aged 50 years or older, 18% of whites, 16% of Hispanics, and 9% of blacks reported not having had a mammogram within the last 2 years.
- Of adults aged 50 years or older, 58% of women and 52% of men reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Of adults aged 50 years or older, 85% of Hispanics, 79% of whites, and 76% of blacks reported not having had a fecal occult blood test within the past year.
- Of adults aged 18–64, no health care coverage was reported by 36% of Hispanics, 23% of Asians/Pacific Islanders, 15% of blacks, and 12% of whites.

Risk Factors and Preventive Services, New York Compared With United States



*Excludes students from New York City.

Source: CDC, Behavioral Risk Factor Surveillance System, 2002.

CDC, Youth Risk Behavior Surveillance System, 2001.

North Carolina: Burden of Chronic Diseases, 2001

Heart Disease

- Heart disease was the most common cause of death in North Carolina in 2001, accounting for 27% of all deaths.
- The rate of death from heart disease was 58% higher among men than among women.

Stroke

- In 2001, stroke accounted for 5,401 deaths, or 8% of all deaths in North Carolina.
- The rate of death from stroke was 47% higher among blacks than among whites.

Cancer

- In 2001, cancer accounted for 23% of all deaths in North Carolina.
- The American Cancer Society estimates that 40,200 new cases

of cancer will be diagnosed in North Carolina in 2004, including 5,700 new cases of lung cancer, 4,100 new cases of colorectal cancer, and 5,900 new cases of breast cancer in women.*

- The American Cancer Society estimates that 16,600 North Carolina residents will die of cancer in 2004.
- The rate of death from all cancers was 59% higher among men than among women.

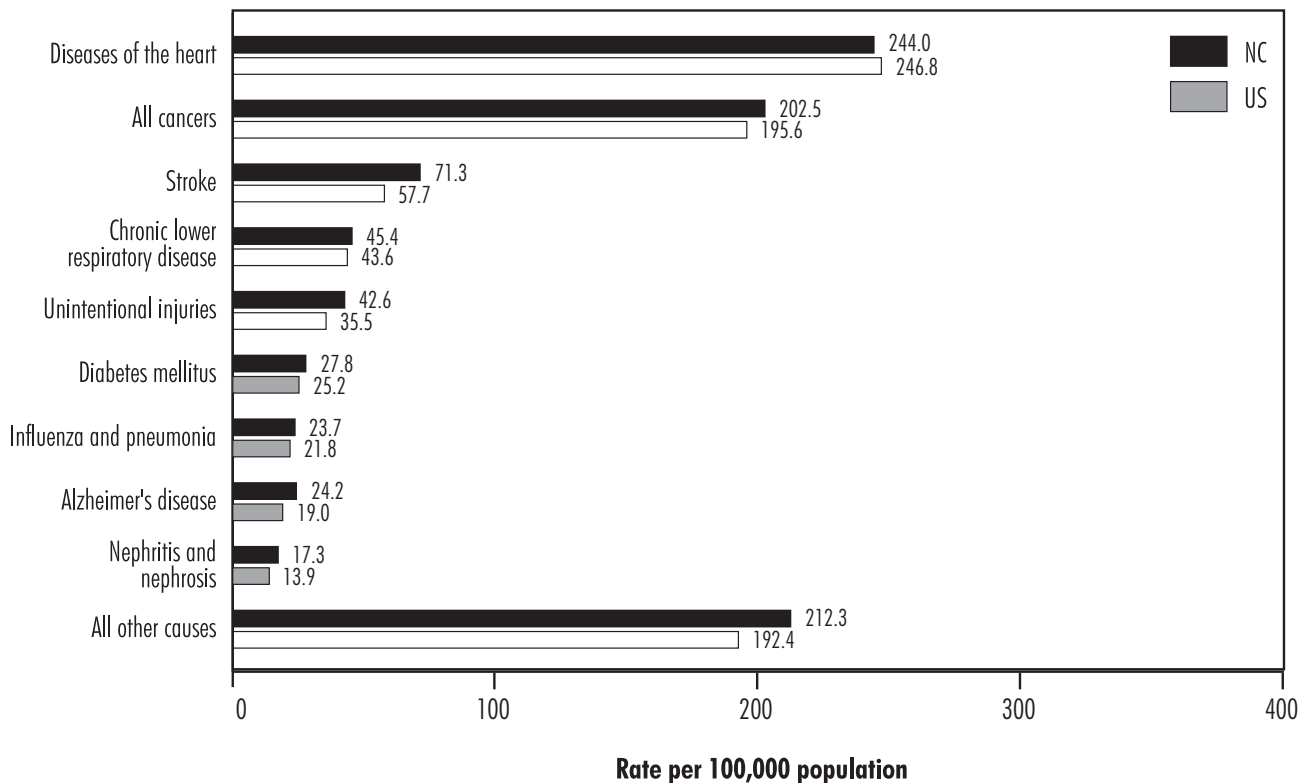
Diabetes

- In 2002, † 433,000 adults in North Carolina had diagnosed diabetes.
- In 2001, diabetes accounted for 2,181 deaths in North Carolina.
- The rate of death from diabetes was 152% higher among blacks and 141% higher among American Indians/Alaska Natives than among whites.

* American Cancer Society are data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, North Carolina Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

North Carolina: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, current cigarette smoking was reported by 31% of men and 22% of women in North Carolina.
- No leisure-time physical activity was reported by 53% of Hispanics, 36% of blacks, 36% of multiracial adults, 31% of American Indians/Alaska Natives, and 26% of whites and Asians/Pacific Islanders.
- Eating fewer than five servings of fruits and vegetables per day was reported by 79% of men and 74% of women.
- According to self-reported height and weight, 72% of multiracial adults, 71% of blacks, 66% of American Indians/Alaska Natives, 57% of whites, and 56% of Hispanics, and were overweight.
- In 2001, 30% of whites, 25% of blacks, and 22% of Hispanics in North Carolina reported having high blood cholesterol.
- In 2001, 37% of blacks, 36% of multiracial persons, 26% of whites, 20% of Hispanics and American Indians/Alaska Natives, and 8% of Asians/Pacific Islanders reported high blood pressure.

Risk Factors Among High School Students

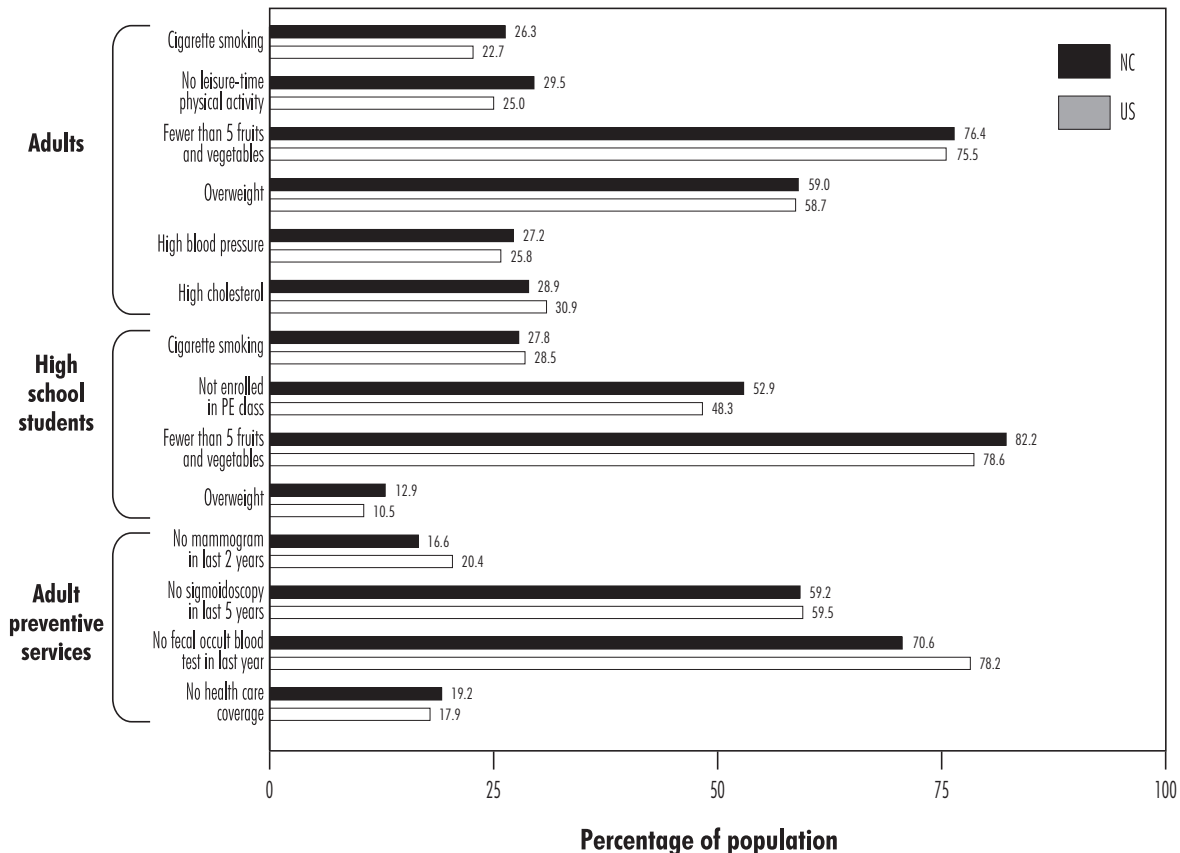
- In 2001, 32% of white, 27% of Hispanic, and 19% of black students reported cigarette smoking.

- Fifty-three percent of high school students were not enrolled in physical education class.
- Seventeen percent of male and 9% of female students were overweight.
- Eighty-two percent of students ate fewer than five servings per day of fruits and vegetables during the 7 days preceding the survey.

Preventive Services

- Of women aged 50 years or older, 17% of whites and 13% of blacks reported not having had a mammogram the last 2 years.
- Among adults aged 50 years or older, 69% of American Indians/Alaska Natives, 63% of Hispanics, 62% of blacks, and 58% of whites reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Seventy-one percent of adults aged 50 years or older reported not having had a fecal occult blood test within the past year.
- Among adults aged 18–64, no health care coverage was reported by 56% of Hispanics, 23% of blacks, 20% of American Indians/Alaska Natives, 15% of whites, 13% of multiracial adults, and 8% of Asians/Pacific Islanders.

Risk Factors and Preventive Services, North Carolina Compared With United States



Source: CDC, Behavioral Risk Factor Surveillance System, 2002.
 CDC, Youth Risk Behavior Surveillance System, 2001.

North Dakota: Burden of Chronic Diseases, 2001

Heart Disease

- Heart disease was the most common cause of death in North Dakota in 2001, accounting for 28% of all deaths.
- The rate of death from heart disease was 53% higher among American Indians/Alaska Natives than among whites.
- The rate of death from heart disease was 82% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 507 deaths, or 8% of all deaths in North Dakota.
- The rate of death from stroke was 17% higher among men than among women.

Cancer

- Cancer accounted for 23% of all deaths in North Dakota in 2001.

- The American Cancer Society estimates that 3,300 new cases of cancer will be diagnosed in North Dakota in 2004, including 400 new cases of lung cancer, 400 new cases of colorectal cancer, and 500 new cases of breast cancer in women.*
- The American Cancer Society estimates that 1,300 North Dakota residents will die of cancer in 2004.
- The rate of death from lung cancer was 82% higher among men than among women.

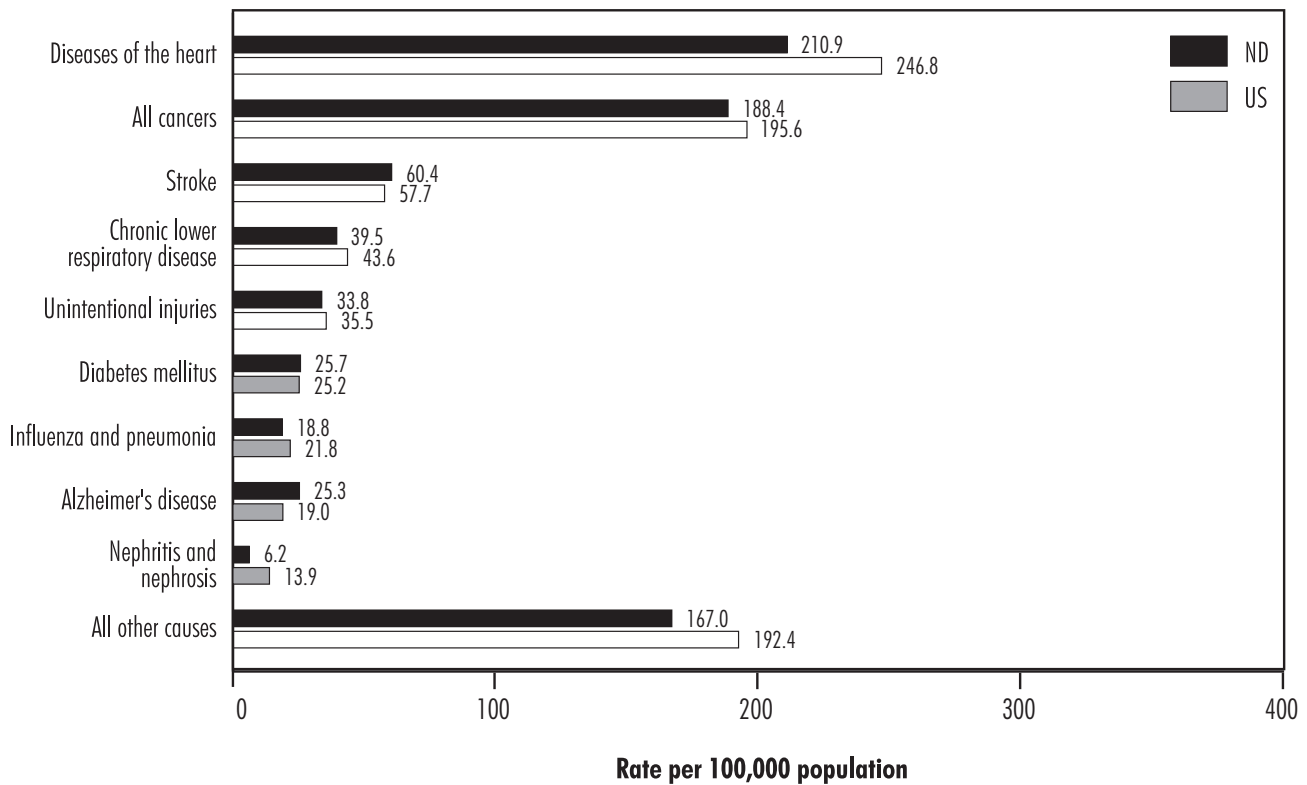
Diabetes

- In 2002,† 27,000 adults in North Dakota had diagnosed diabetes.
- In 2001, diabetes accounted for 196 deaths in North Dakota.
- The rate of death from diabetes was 15% higher among men than among women.

* American Cancer Society are data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, North Dakota Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

North Dakota: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, current cigarette smoking was reported by 60% of American Indians/Alaska Natives and 19% of whites in North Dakota.
- No leisure-time physical activity was reported by 37% of American Indians/Alaska Natives and 21% of whites.
- Eating fewer than five servings of fruits and vegetables per day was reported by 88% of men and 71% of women.
- According to self-reported height and weight, 72% of men and 52% of women were overweight.
- In 2001, 31% of women and 28% of men in North Dakota reported having high blood cholesterol.
- In 2001, 31% of American Indians/Alaska Natives and 24% of whites reported having high blood pressure.

- Fourteen percent of male and 4% of female students were overweight.
- Eighty-two percent of students ate fewer than five servings per day of fruits and vegetables during the 7 days preceding the survey.

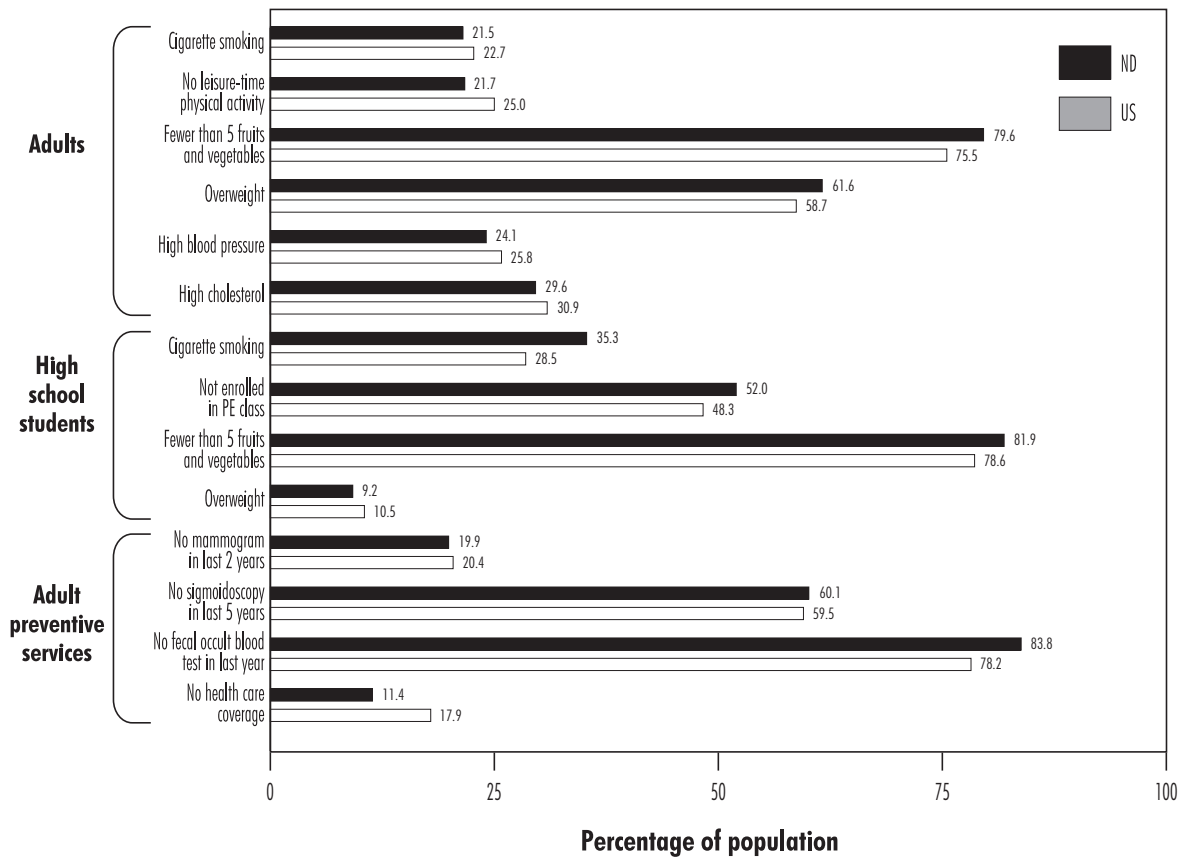
Preventive Services

- Of women aged 50 years or older, 20% reported not having had a mammogram within the last 2 years.
- Of adults aged 50 years or older, 60% reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Among adults aged 50 years or older, 87% of men and 81% of women reported not having had a fecal occult blood test within the past year.
- No health care coverage was reported by 11% of North Dakota residents aged 18–64.

Risk Factors Among High School Students

- In 2001, 35% of students reported cigarette smoking.
- Fifty-two percent of students were not enrolled in physical education class.

Risk Factors and Preventive Services, North Dakota Compared With United States



Source: CDC, Behavioral Risk Factor Surveillance System, 2002.
 CDC, Youth Risk Behavior Surveillance System, 2001.

Ohio: Burden of Chronic Diseases, 2001

Heart Disease

- In 2001, heart disease was the most common cause of death in Ohio, accounting for 32,453 deaths, or 30% of all deaths.
- The rate of death from heart disease was 52% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 6,891 deaths in Ohio.
- The rate of death from stroke was 33% higher among blacks than among whites.

Cancer

- In 2001, cancer accounted for 24,804 deaths, or 23% of all deaths in Ohio.

- The American Cancer Society estimates that 59,400 new cases of cancer will be diagnosed in Ohio in 2004, including 7,700 new cases of lung cancer, 6,800 new cases of colorectal cancer, and 10,100 new cases of breast cancer in women.*
- The American Cancer Society estimates that 24,500 Ohio residents will die of cancer in 2004.
- The rate of death from lung cancer was 98% higher among men than among women.

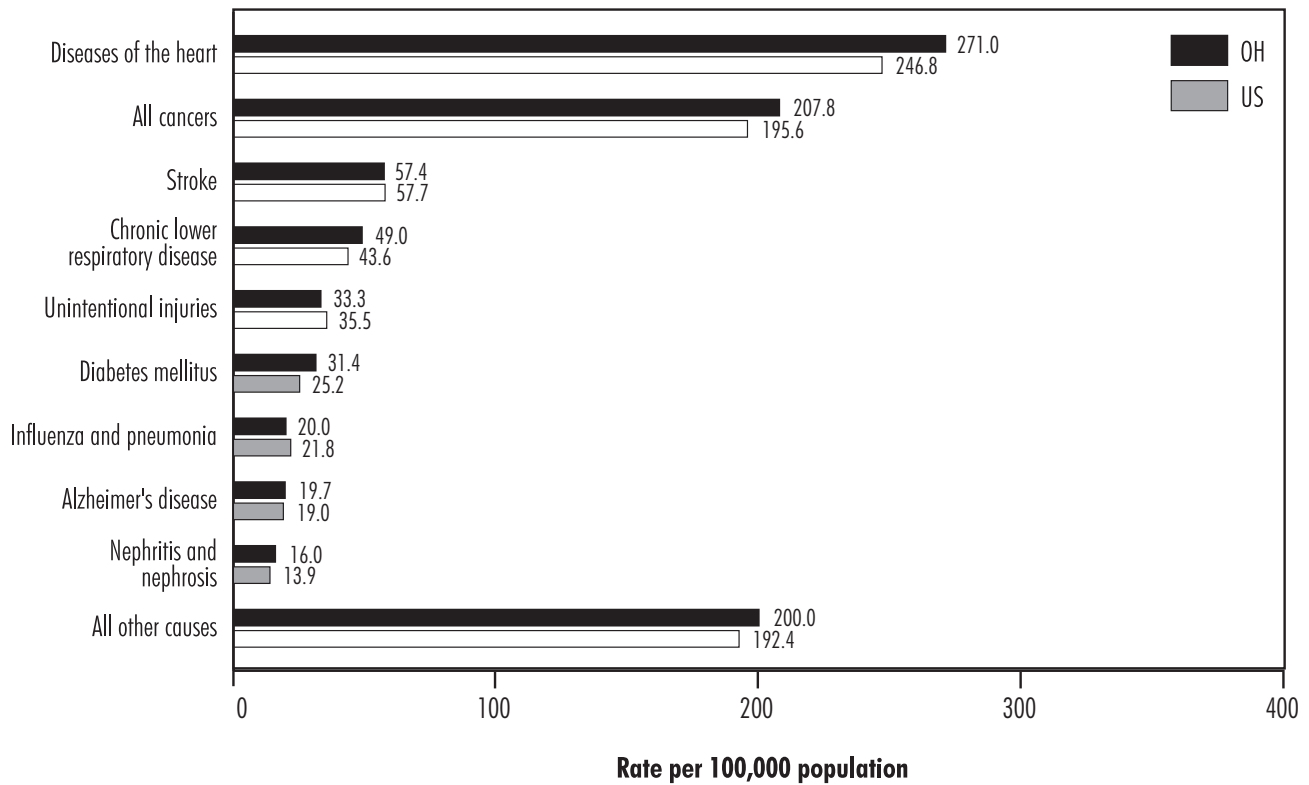
Diabetes

- In 2002,† 630,000 adults in Ohio had diagnosed diabetes.
- In 2001, diabetes accounted for 3,750 deaths in Ohio.
- The rate of death from diabetes was 88% higher among blacks than among whites.

* American Cancer Society are data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Ohio Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Ohio: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, 27% of whites and 21% of blacks and Hispanics in Ohio reported current cigarette smoking.
- No leisure-time physical activity was reported by 33% of blacks, 27% of Hispanics, and 25% of whites.
- Eighty-four percent of men and 76% of women reported eating fewer than five servings of fruits and vegetables per day.
- According to self-reported height and weight, 69% of men and 49% of women were overweight.
- In 2001, 41% of Hispanics, 33% of whites, and 25% of blacks in Ohio reported having high blood cholesterol.
- In 2001, 39% of blacks, 26% of whites, and 21% of Hispanics reported having high blood pressure.

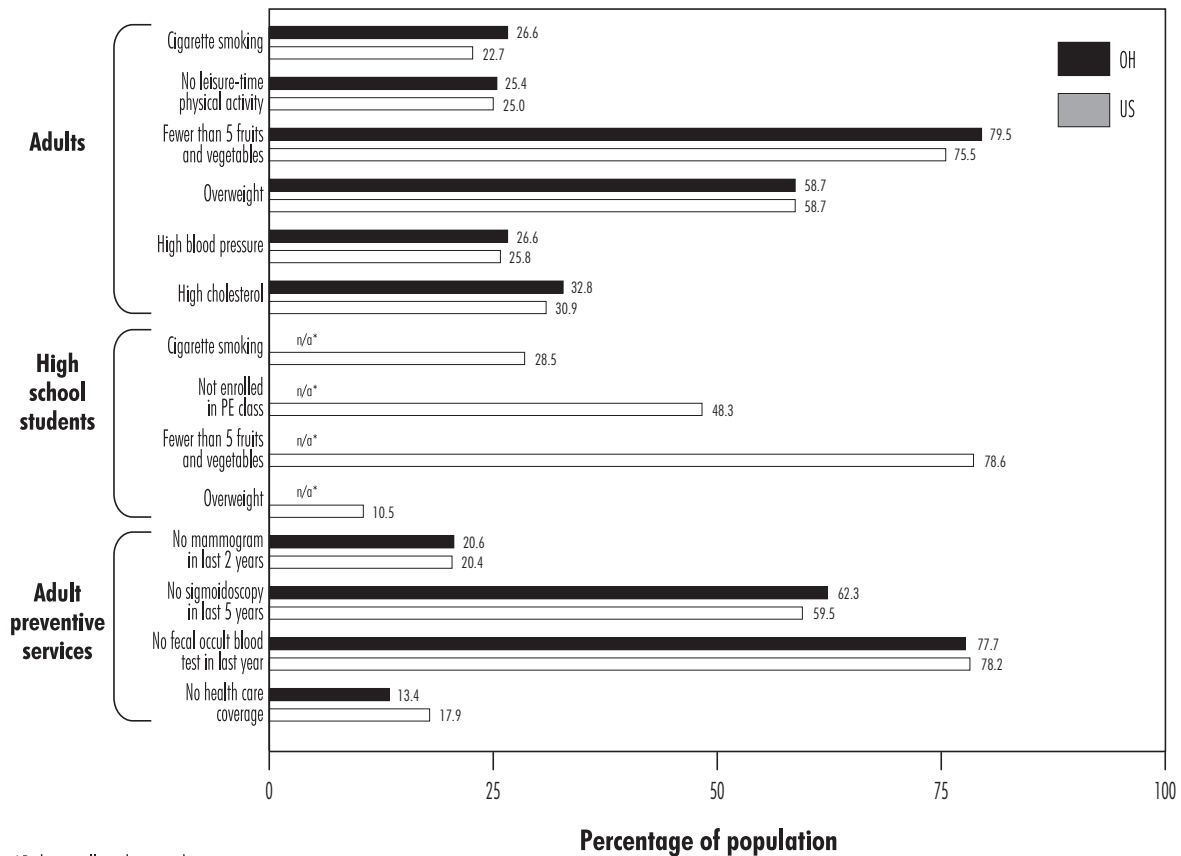
Risk Factors Among High School Students

- The 2001 YRBS was not conducted in Ohio.

Preventive Services

- Of women aged 50 years or older, 21% of whites and 10% of blacks reported not having had a mammogram within the last 2 years.
- Sixty-two percent of adults aged 50 years or older reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Among adults aged 50 years or older, 78% reported not having had a fecal occult blood test within the past year.
- Among adults aged 18–64, no health care coverage was reported by 21% of blacks, 17% of Hispanics, and 12% of whites.

Risk Factors and Preventive Services, Ohio Compared With United States



*Did not collect data on this topic.

Source: CDC, Behavioral Risk Factor Surveillance System, 2002.

CDC, Youth Risk Behavior Surveillance System, 2001.

Oklahoma: Burden of Chronic Diseases, 2001

Heart Disease

- In 2001, heart disease accounted for 31% of all deaths.
- The rate of death from heart disease was 49% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 2,384 deaths in Oklahoma.
- The rate of death from stroke was 40% higher among blacks than among whites.

Cancer

- Cancer accounted for 21% of all deaths in Oklahoma in 2001.
- The American Cancer Society estimates that 18,500 new cases of cancer will be diagnosed in Oklahoma in 2004, including

2,600 new cases of lung cancer, 2,100 new cases of colorectal cancer, and 2,900 new cases of breast cancer in women.*

- The American Cancer Society estimates that 7,600 Oklahoma residents will die of cancer in 2004.
- The rate of death from lung cancer was 101% higher among men than among women.

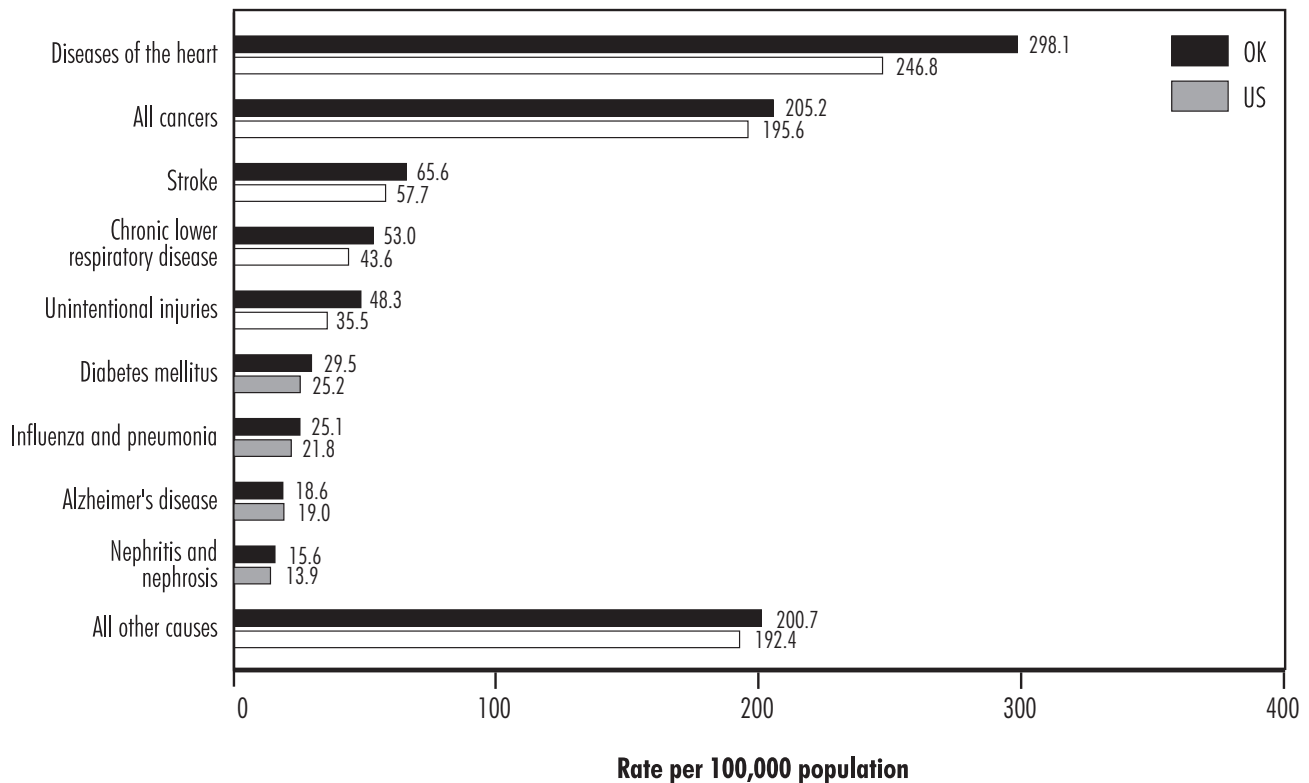
Diabetes

- In 2002, † 186,000 adults in Oklahoma had diagnosed diabetes.
- In 2001, diabetes accounted for 1,065 deaths in Oklahoma.
- The rate of death from diabetes was 140% higher among American Indians/Alaska Natives and 108% higher among blacks than among whites.

* American Cancer Society are data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Oklahoma Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Oklahoma: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, 30% of men and 24% of women in Oklahoma reported current cigarette smoking.
- No leisure-time physical activity was reported by 44% of Hispanics, 39% of blacks, 37% of multiracial adults, 31% of American Indians/Alaska Natives and Asians/Pacific Islanders, and 29% of whites.
- Eating fewer than five servings of fruits and vegetables per day was reported by 88% of men and 83% of women.
- According to self-reported height and weight, 70% of multiracial adults, 69% of blacks, 59% of Hispanics, 58% of American Indians/Alaska Natives and whites, and 32% of Asians/Pacific Islanders were overweight.
- In 2001, 32% of multiracial persons, 31% of whites, 25% of Hispanics, and 24% of blacks and American Indians/Alaska Natives in Oklahoma reported having high blood cholesterol.
- In 2001, 41% of multiracial persons, 33% of blacks, 32% of American Indians/Alaska Natives, 29% of whites, and 21% of Hispanics reported having high blood pressure.

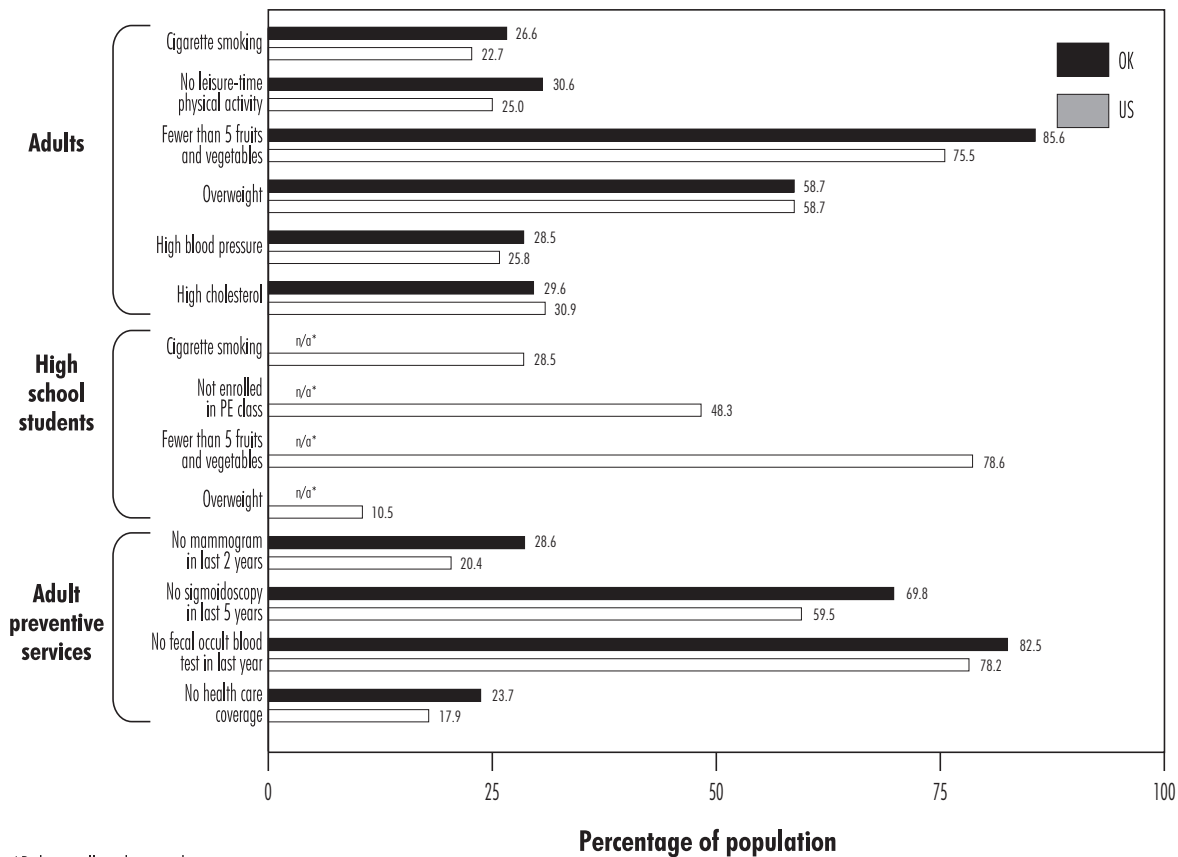
Risk Factors Among High School Students

- The 2001 YRBS was not conducted in Oklahoma.

Preventive Services

- Among women aged 50 years or older, 32% of blacks, 29% of whites, 22% of multiracial adults, and 20% of American Indians/Alaska Natives reported not having had a mammogram within the last 2 years.
- Of adults aged 50 years or older, 70% reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Among adults aged 50 years or older, 92% of Hispanics, 88% of blacks, 87% of American Indians/Alaska Natives, 82% of whites, and 75% of multiracial adults reported not having had a fecal occult blood test within the past year.
- Among adults aged 18–64, no health care coverage was reported by 56% of Hispanics, 30% of American Indians/Alaska Natives, 26% of blacks, 26% of Asians/Pacific Islanders, 26% of multiracial adults, and 19% of whites.

Risk Factors and Preventive Services, Oklahoma Compared With United States



*Did not collect data on this topic.

Source: CDC, Behavioral Risk Factor Surveillance System, 2002.

CDC, Youth Risk Behavior Surveillance System, 2001.

Oregon: Burden of Chronic Diseases, 2001

Heart Disease

- Heart disease was the most common cause of death in Oregon in 2001, accounting for 7,075 deaths, or 24% of all deaths.
- The rate of death from heart disease was 59% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 9% of all deaths in Oregon.
- The rate of death from stroke was 88% higher among blacks than among whites.

Cancer

- Cancer accounted for 23% of all deaths in Oregon in 2001.

- The American Cancer Society estimates that 17,300 new cases of cancer will be diagnosed in Oregon in 2004, including 2,100 new cases of lung cancer, 1,800 new cases of colorectal cancer, and 2,800 new cases of breast cancer in women.*
- The American Cancer Society estimates that 7,100 Oregon residents will die of cancer in 2004.
- The rate of death from lung cancer was 43% higher among men than among women.

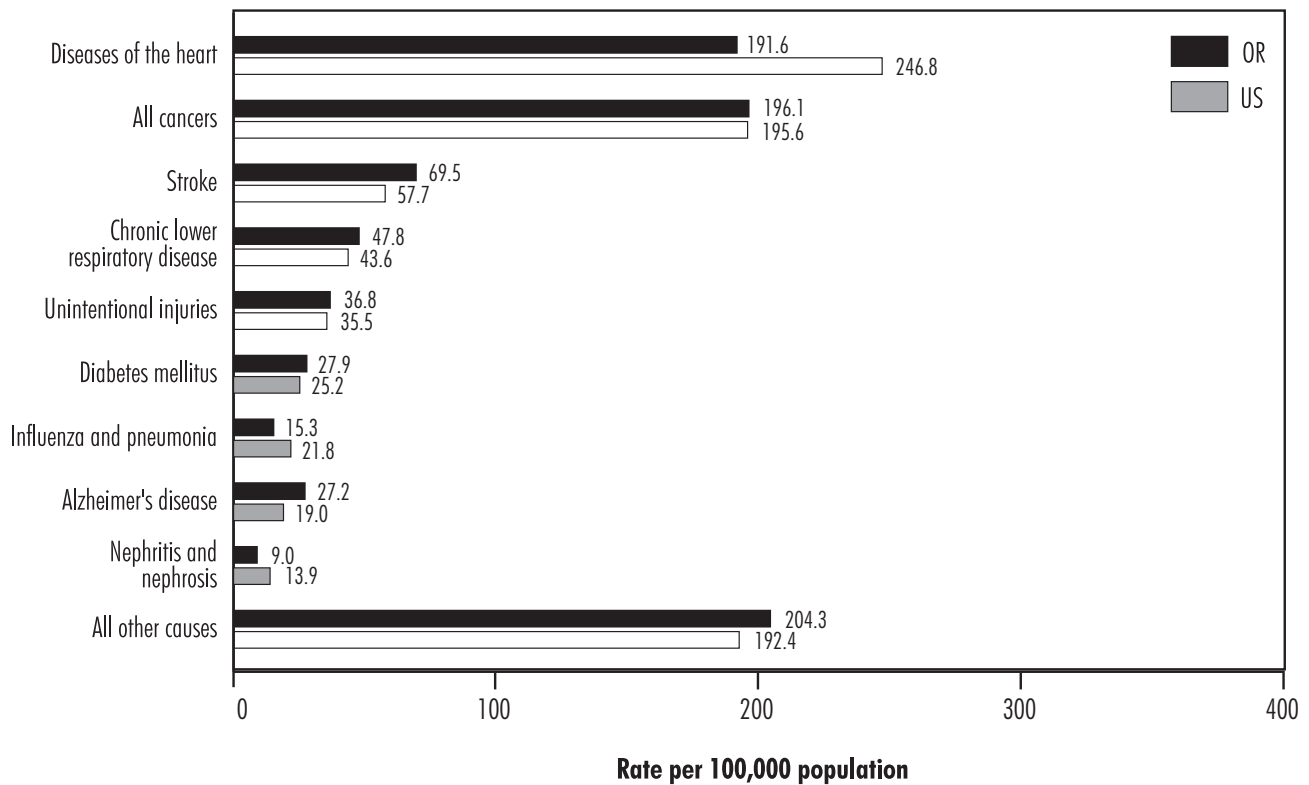
Diabetes

- In 2002,† 156,000 adults in Oregon had diagnosed diabetes.
- In 2001, diabetes accounted for 1,011 deaths in Oregon.
- The rate of death from diabetes was 218% higher among blacks than among whites.

* American Cancer Society data are rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Oregon Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Oregon: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, current cigarette smoking was reported by 28% of multiracial adults, 22% of whites and Hispanics, and 12% of Asians/Pacific Islanders.
- No leisure-time physical activity was reported by 30% of Hispanics, 21% of multiracial adults, 17% of whites, and 15% of Asians/Pacific Islanders.
- Eighty percent of men and 68% of women reported eating fewer than five servings of fruits and vegetables per day.
- According to self-reported height and weight, 70% of Hispanics, 64% of multiracial adults, 56% of whites, and 32% of Asians/Pacific Islanders were overweight.
- In 2001, 33% of whites, 31% of Hispanics, and 29% of multiracial persons in Oregon reported having high blood cholesterol.
- In 2001, 26% of whites, 22% of multiracial persons, and 14% of Hispanics reported having high blood pressure.

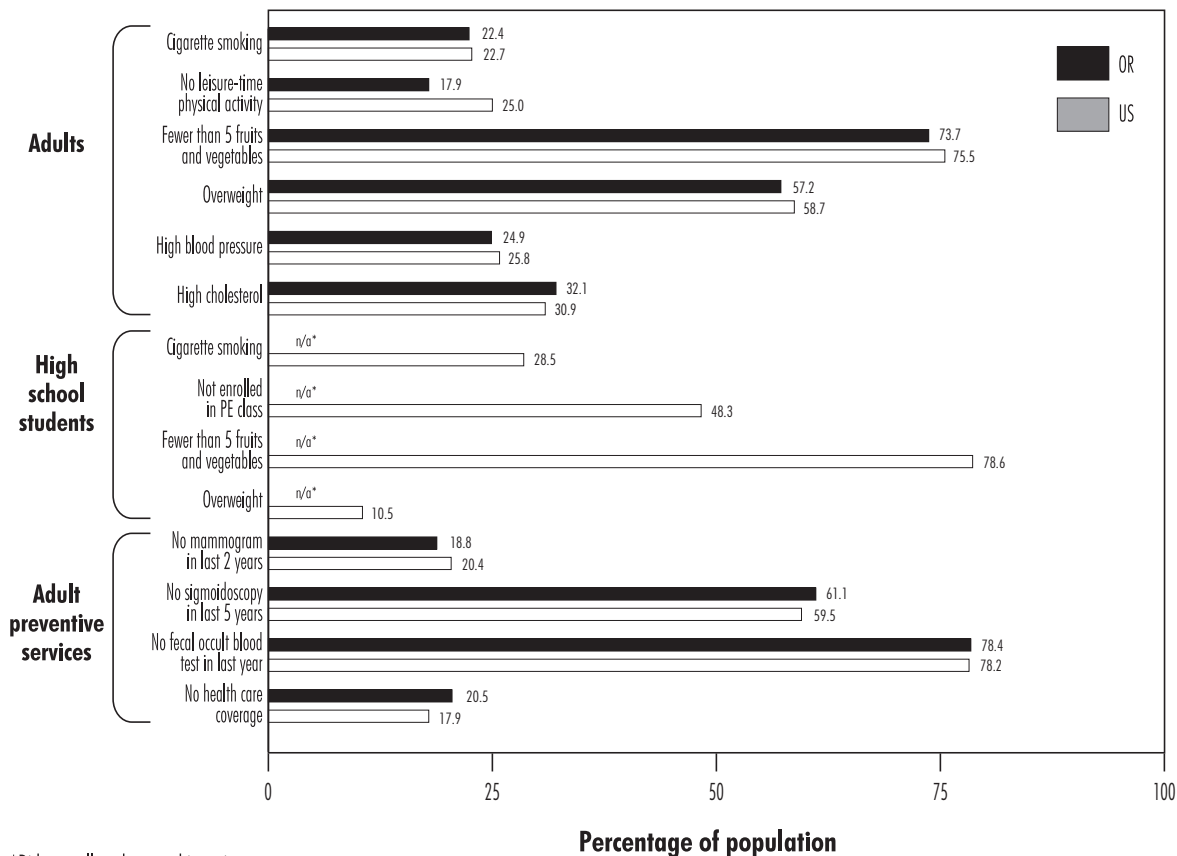
Risk Factors Among High School Students

- The 2001 YRBS was not conducted in Oregon.

Preventive Services

- Of women aged 50 years or older, 19% reported not having had a mammogram within the last 2 years.
- Of adults aged 50 years or older, 61% reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Among adults aged 50 years or older, 82% of men and 76% of women reported not having had a fecal occult blood test within the past year.
- Among adults aged 18–64, no health care coverage was reported by 49% of Hispanics and 17% of whites.

Risk Factors and Preventive Services, Oregon Compared With United States



*Did not collect data on this topic.

Source: CDC, Behavioral Risk Factor Surveillance System, 2002.

CDC, Youth Risk Behavior Surveillance System, 2001.

Pennsylvania: Burden of Chronic Diseases, 2001

Heart Disease

- Heart disease was the most common cause of death in Pennsylvania in 2001, accounting for 39,436 deaths, or 30% of all deaths.
- The rate of death from heart disease was 53% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 8,619 deaths in Pennsylvania.
- The rate of death from stroke was 40% higher among blacks than among whites.

Cancer

- Cancer accounted for 29,913 deaths, or 23% of all deaths in Pennsylvania in 2001.

- The American Cancer Society estimates that 72,600 new cases of cancer will be diagnosed in Pennsylvania in 2004, including 8,600 new cases of lung cancer, 8,600 new cases of colorectal cancer, and 11,200 new cases of breast cancer in women.*
- The American Cancer Society estimates that 29,900 Pennsylvania residents will die of cancer in 2004.
- The rate of death from all cancers was 31% higher among blacks than among whites.

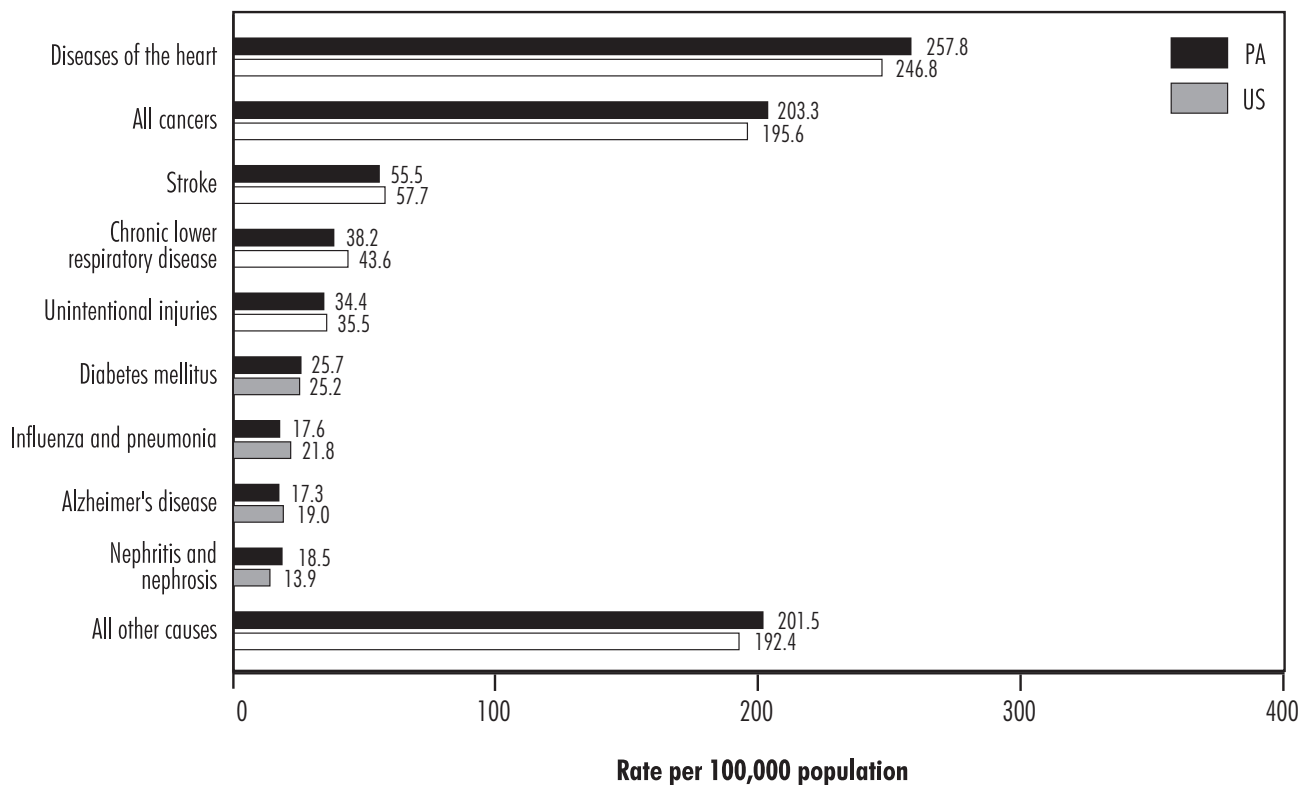
Diabetes

- In 2002,† 694,000 adults in Pennsylvania had diagnosed diabetes.
- In 2001, diabetes accounted for 3,826 deaths in Pennsylvania.
- The rate of death from diabetes was 73% higher among blacks than among whites.

* American Cancer Society are data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Pennsylvania Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Pennsylvania: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, 26% of men and 23% of women in Pennsylvania reported current cigarette smoking.
- No leisure-time physical activity was reported by 38% of Asians/Pacific Islanders, 37% of blacks, 33% of Hispanics, 32% of multiracial adults, 23% of whites, and 19% of American Indians/Alaska Natives.
- Eating fewer than five servings of fruits and vegetables per day was reported by 81% of men and 69% of women.
- According to self-reported height and weight, 70% of blacks, 60% of whites, 57% of Hispanics, 55% of American Indians/Alaska Natives, 52% of multiracial adults, and 28% of Asians/Pacific Islanders were overweight.
- In 2001, 34% of whites, 29% of blacks, and 13% of Hispanics in Pennsylvania reported having high blood cholesterol.
- In 2001, 42% of multiracial persons, 32% of blacks, 28% of whites, and 23% of Hispanics reported having high blood pressure.

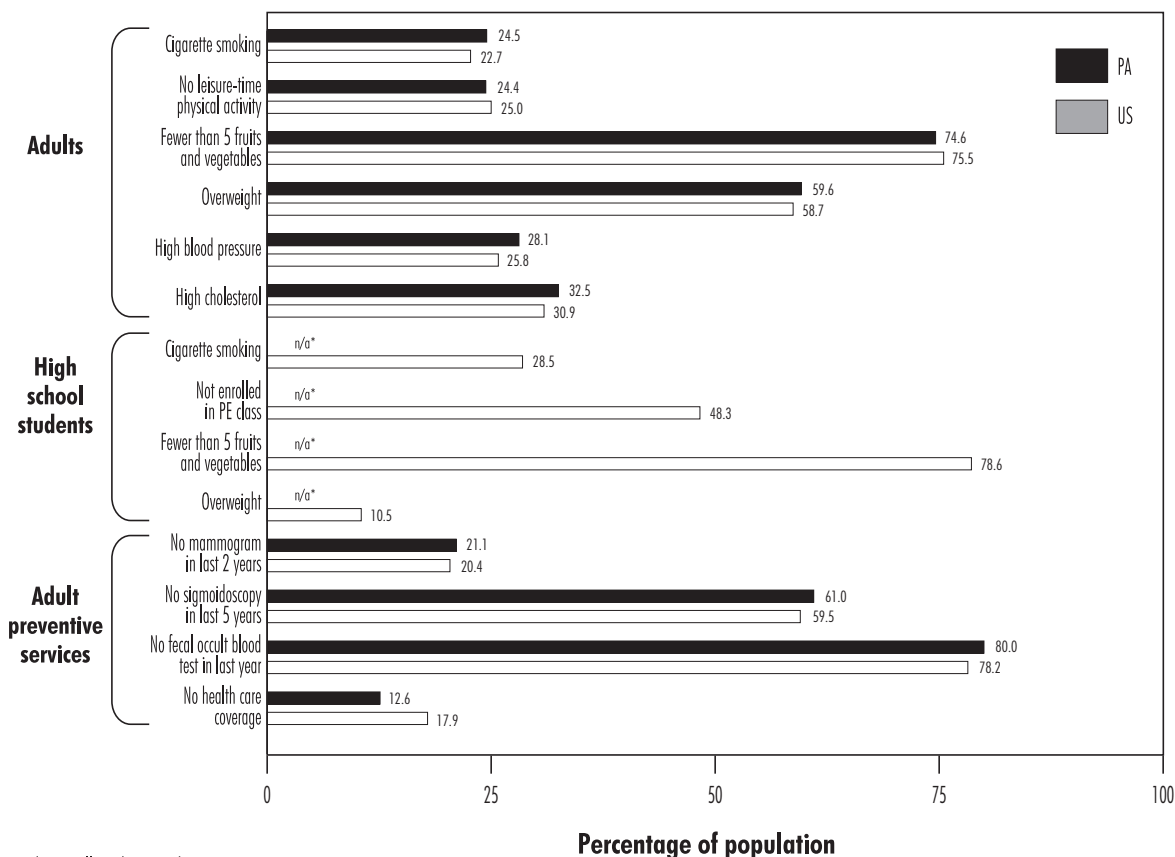
Risk Factors Among High School Students

- The 2001 YRBS was not conducted in Pennsylvania.

Preventive Services

- Of women aged 50 years or older, 21% of blacks, 21% of whites, and 8% of Hispanics reported not having had a mammogram within the last 2 years.
- Sixty-one percent of adults aged 50 years or older reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Of adults aged 50 years or older, 80% reported not having had a fecal occult blood test within the past year.
- Among adults aged 18–64, no health care coverage was reported by 21% of blacks, 11% of whites, 18% of Hispanics, and 12% of multiracial adults.

Risk Factors and Preventive Services, Pennsylvania Compared With United States



*Did not collect data on this topic.

Source: CDC, Behavioral Risk Factor Surveillance System, 2002.

CDC, Youth Risk Behavior Surveillance System, 2001.

Rhode Island: Burden of Chronic Diseases, 2001

Heart Disease

- In 2001, heart disease was the most common cause of death in Rhode Island, accounting for 31% of all deaths.
- The rate of death from heart disease was 50% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 613 deaths, or 6% of all deaths in Rhode Island.
- The rate of death from stroke was 28% higher among men than among women.

Cancer

- Cancer accounted for 24% of all deaths in Rhode Island in 2001.

- The American Cancer Society estimates that 6,000 new cases of cancer will be diagnosed in Rhode Island in 2004, including 800 new cases of lung cancer, 700 new cases of colorectal cancer, and 900 new cases of breast cancer in women.*
- The American Cancer Society estimates that 2,500 Rhode Island residents will die of cancer in 2004.
- The rate of death from lung cancer was 89% higher among men than among women.

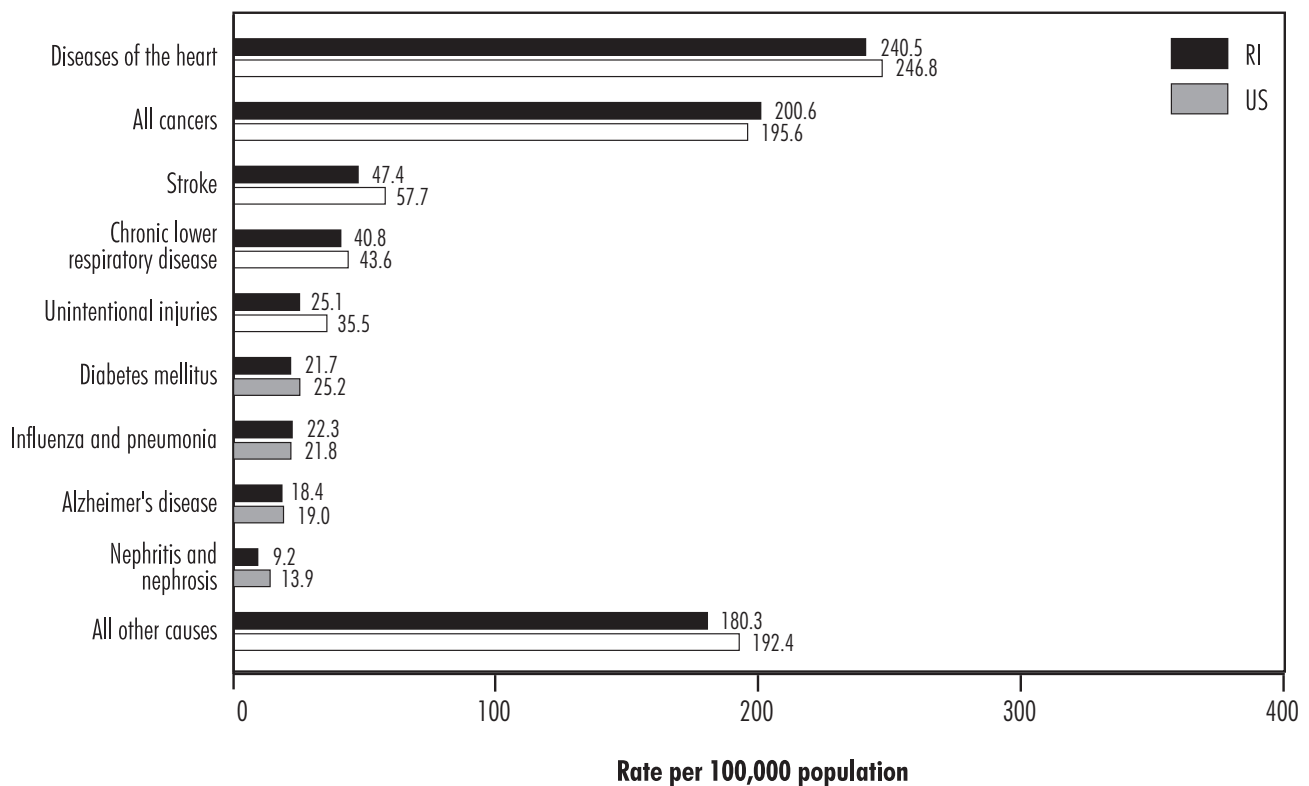
Diabetes

- In 2002,† 49,000 adults in Rhode Island had diagnosed diabetes.
- In 2001, diabetes accounted for 265 deaths in Rhode Island.
- The rate of death from diabetes was 31% higher among men than among women.

* American Cancer Society are data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Rhode Island Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Rhode Island: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, current cigarette smoking was reported by 27% of blacks, 22% of whites, and 16% of Hispanics in Rhode Island.
- No leisure-time physical activity was reported by 43% of Hispanics, 26% of blacks, and 22% of whites.
- Eating fewer than five servings of fruits and vegetables per day was reported by 75% of men and 68% of women.
- According to self-reported height and weight, 67% of men and 46% of women were overweight.
- In 2001, 35% of whites, 23% of blacks, and 21% of Hispanics in Rhode Island reported having high blood cholesterol.
- In 2001, 34% of blacks, 26% of whites, and 17% of Hispanics reported having high blood pressure.

Risk Factors Among High School Students

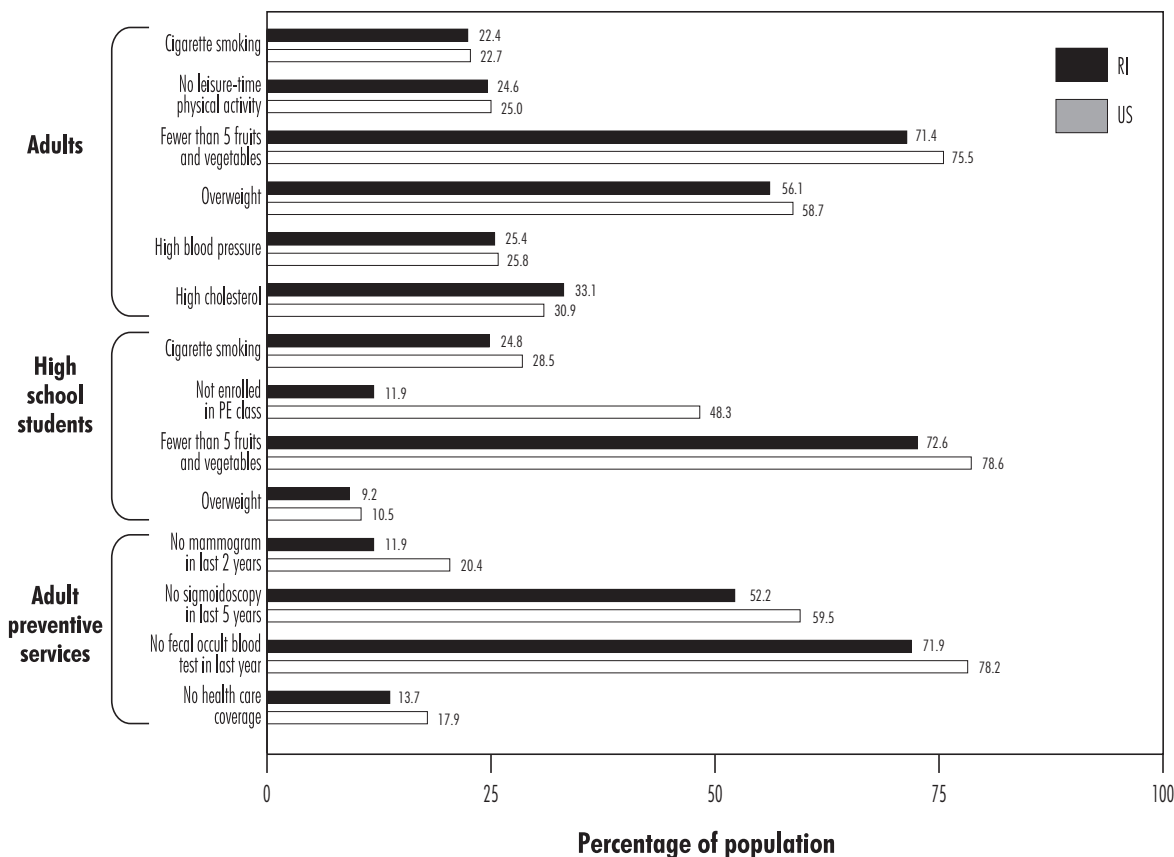
- In 2001, 25% of high school students in Rhode Island reported cigarette smoking.

- Twelve percent of students were not enrolled in physical education class.
- Fifteen percent of male students and 4% of female students were overweight.
- Seventy-three percent of students ate fewer than five servings per day of fruits and vegetables during the 7 days preceding the survey.

Preventive Services

- Of women aged 50 years or older, 12% reported not having had a mammogram within the last 2 years.
- Among adults aged 50 years or older, 55% of women and 49% of men reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Of adults aged 50 years or older, 72% reported not having had a fecal occult blood test within the past year.
- Among adults aged 18–64, no health care coverage was reported by 37% of Hispanics, 18% of blacks, and 10% of whites.

Risk Factors and Preventive Services, Rhode Island Compared With United States



Source: CDC, Behavioral Risk Factor Surveillance System, 2002.
 CDC, Youth Risk Behavior Surveillance System, 2001.

South Carolina: Burden of Chronic Diseases, 2001

Heart Disease

- Heart disease was the most common cause of death in South Carolina in 2001, accounting for 26% of all deaths.
- The rate of death from heart disease was 60% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 2,832 deaths, or 8% of all deaths in South Carolina.
- The rate of death from stroke was 59% higher among blacks than among whites.

Cancer

- Cancer accounted for 23% of all deaths in South Carolina in 2001.

- The American Cancer Society estimates that 21,500 new cases of cancer will be diagnosed in South Carolina in 2004, including 3,000 new cases of lung cancer, 2,300 new cases of colorectal cancer, and 3,300 new cases of breast cancer in women.*
- The American Cancer Society estimates that 8,900 South Carolina residents will die of cancer in 2004.
- The rate of death from all cancers was 75% higher among men than among women.

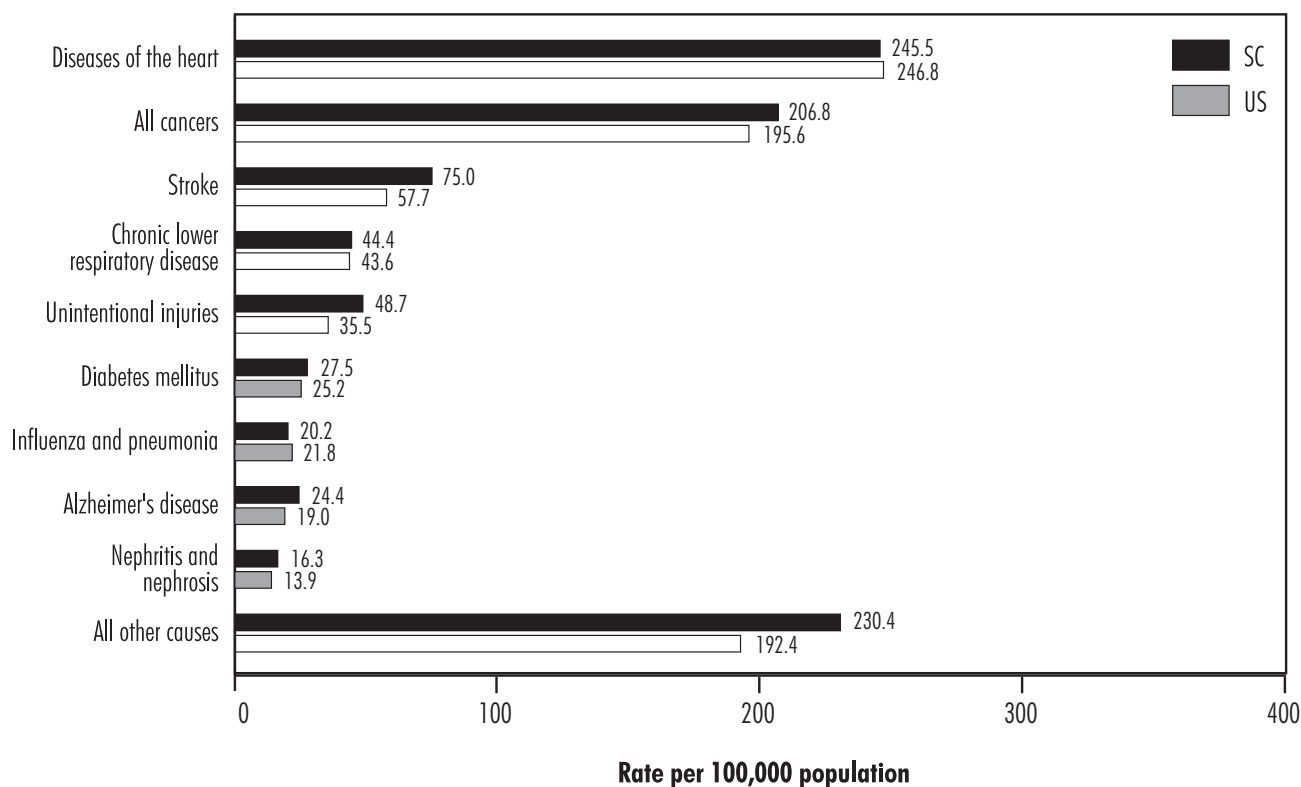
Diabetes

- In 2002,† 249,000 adults in South Carolina had diagnosed diabetes.
- In 2001, diabetes accounted for 1,088 deaths in South Carolina.
- The rate of death from diabetes was 160% higher among blacks than among whites.

* American Cancer Society data are rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, South Carolina Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

South Carolina: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, 29% of men and 24% of women in South Carolina reported current cigarette smoking.
- No leisure-time physical activity was reported by 34% of multiracial adults, 31% of blacks, 30% of Hispanics, and 21% of whites.
- Eating fewer than five servings of fruits and vegetables per day was reported by 82% of men and 71% of women.
- According to self-reported height and weight, 72% of blacks, 64% of multiracial adults, 59% of Hispanics, and 58% of whites were overweight.
- In 2001, 29% of whites, 26% of blacks, and 19% of Hispanics in South Carolina reported having high blood cholesterol.
- In 2001, 34% of blacks, 27% of whites, and 23% of Hispanics reported having high blood pressure.

Risk Factors Among High School Students

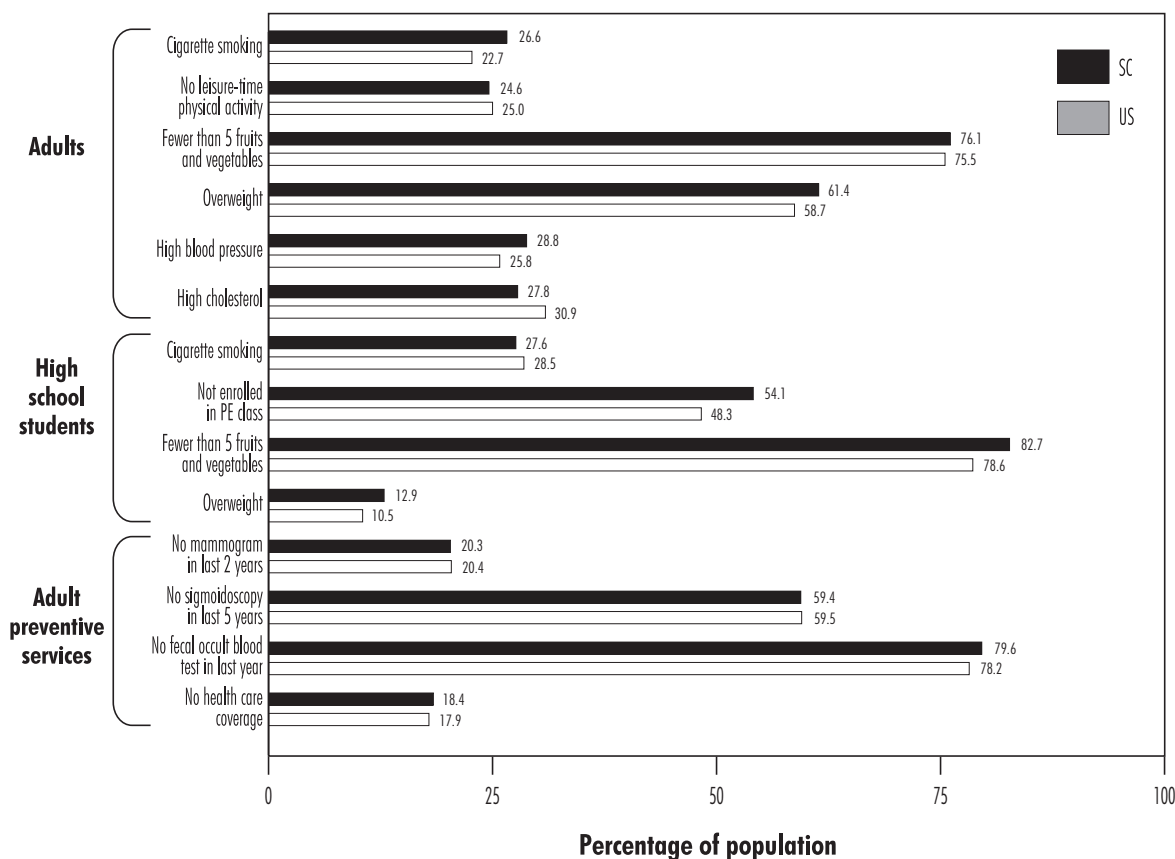
- In 2001, 35% of white and 17% of black students reported cigarette smoking.

- Fifty-four percent of students were not enrolled in physical education class.
- Sixteen percent of male and 9% of female high school students were overweight.
- Eighty-three percent of students ate fewer than five servings per day of fruits and vegetables during the 7 days preceding the survey.

Preventive Services

- Twenty-two percent of white and 17% of black women aged 50 years or older reported not having had a mammogram within the last 2 years.
- Among adults aged 50 years or older, 60% of whites and 56% of blacks reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Among adults aged 50 years or older, 80% reported not having had a fecal occult blood test within the past year.
- Among adults aged 18–64, no health care coverage was reported by 37% of Hispanics, 21% of blacks, and 15% of whites.

Risk Factors and Preventive Services, South Carolina Compared With United States



Source: CDC, Behavioral Risk Factor Surveillance System, 2002.
 CDC, Youth Risk Behavior Surveillance System, 2001.

South Dakota: Burden of Chronic Diseases, 2001

Heart Disease

- Heart disease was the most common cause of death in South Dakota in 2001, accounting for 29% of all deaths.
- The rate of death from heart disease was 66% higher among American Indians/Alaska Natives than among whites.
- The rate of death from heart disease was 83% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 490 deaths, or 7% of all deaths in South Dakota.
- The rate of death from stroke was 9% higher among men than among women.

Cancer

- Cancer accounted for 23% of all deaths in South Dakota in 2001.

- The American Cancer Society estimates that 4,000 new cases of cancer will be diagnosed in South Dakota in 2004, including 500 new cases of lung cancer, 500 new cases of colorectal cancer, and 500 new cases of breast cancer in women.*
- The American Cancer Society estimates that 1,700 South Dakota residents will die of cancer in 2004.
- The rate of death from lung cancer was 118% higher among men than among women.

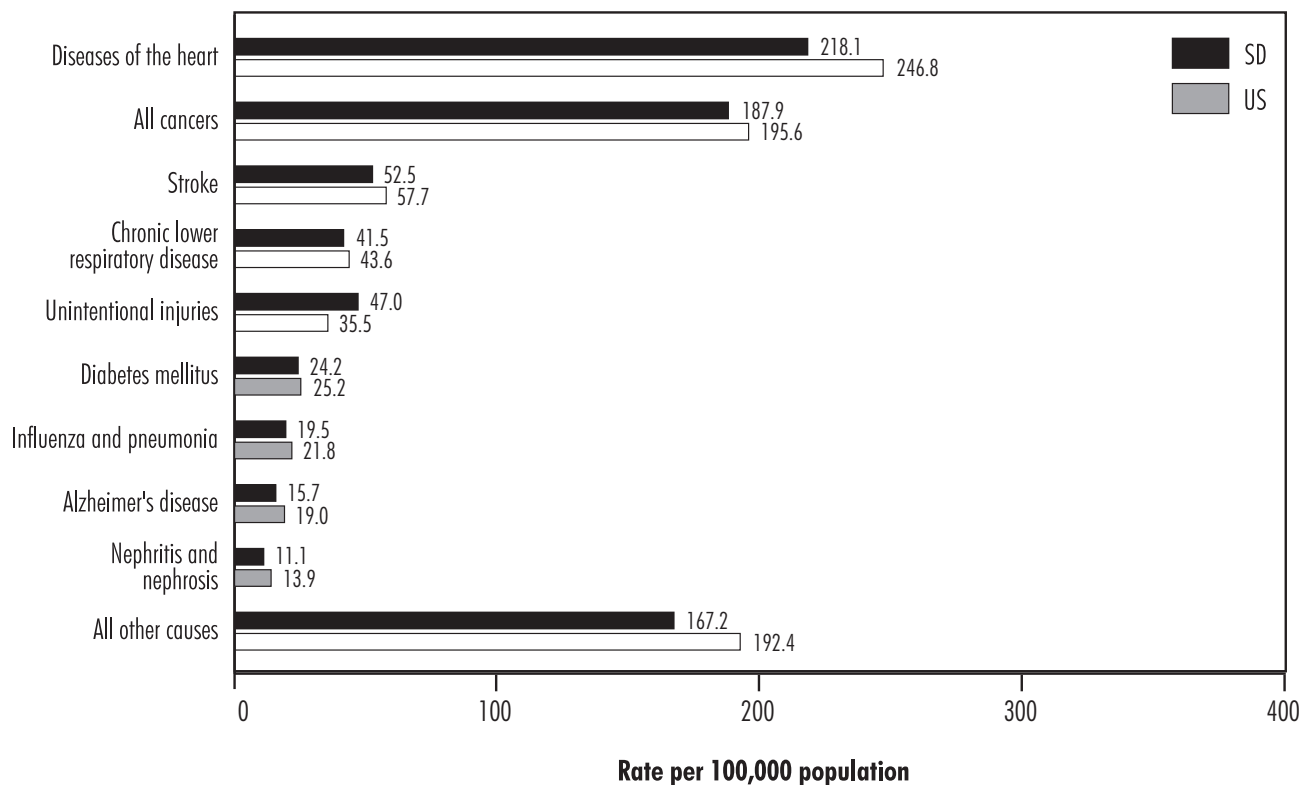
Diabetes

- In 2002,† 34,000 adults in South Dakota had diagnosed diabetes.
- In 2001, diabetes accounted for 212 deaths in South Dakota.
- The rate of death from diabetes was 348% higher among American Indians/Alaska Natives than among whites.

* American Cancer Society are data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, South Dakota Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

South Dakota: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, current cigarette smoking was reported by 39% of American Indians/Alaska Natives, 34% of Hispanics, and 21% of whites in South Dakota.
- No leisure-time physical activity was reported by 33% of American Indians/Alaska Natives, 23% of whites, and 21% of Hispanics.
- Eating fewer than five servings of fruits and vegetables per day was reported by 85% of men and 74% of women.
- According to self-reported height and weight, 70% of men and 51% of women were overweight.
- In 2001, 30% of whites and American Indians/Alaska Natives and 24% of Hispanics in South Dakota reported having high blood cholesterol.
- In 2001, 26% of Hispanics, 24% of whites and American Indians/Alaska Natives, and 13% of multiracial persons reported having high blood pressure.

- Seventy-eight percent of high school students were not enrolled in physical education class.
- Eleven percent of male and 5% of female students were overweight.
- Eighty-four percent of students ate fewer than five servings per day of fruits and vegetables during the 7 days preceding the survey.

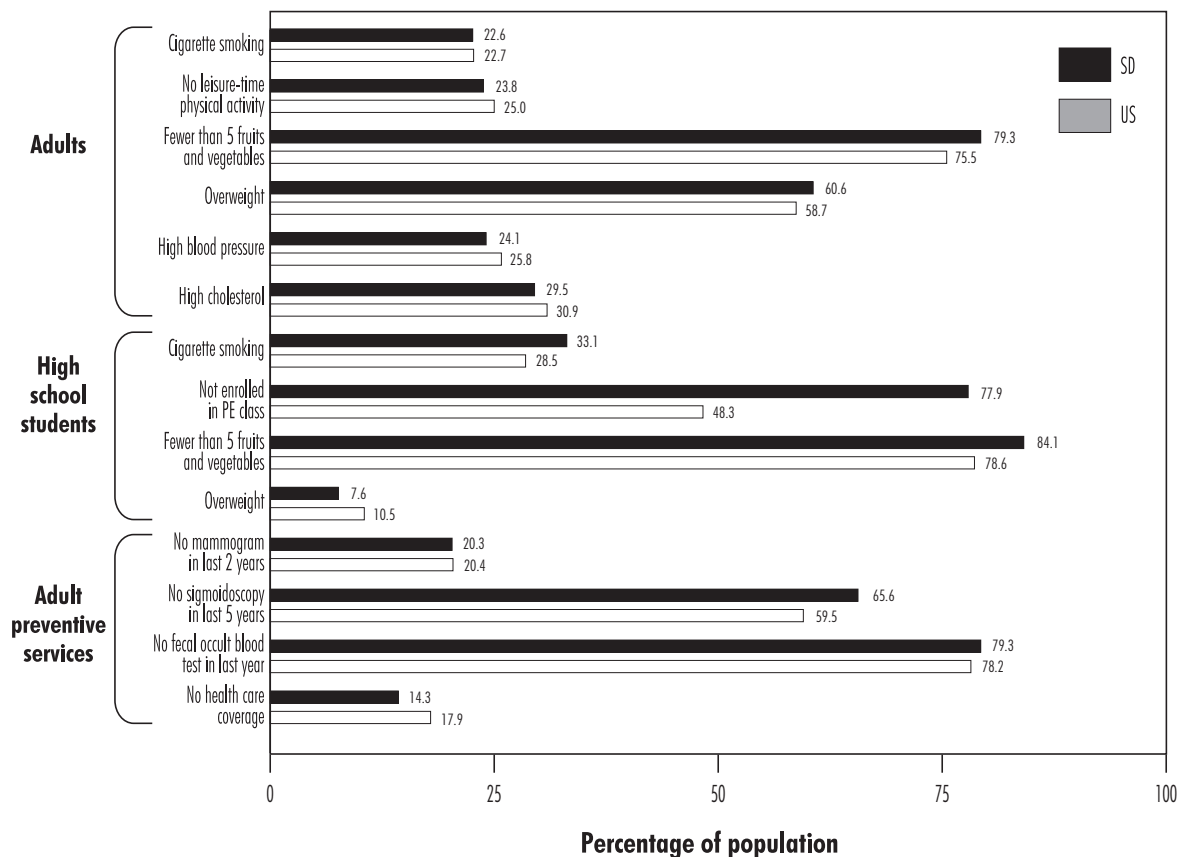
Preventive Services

- Of women aged 50 years or older, 20% reported not having had a mammogram within the last 2 years.
- Among adults aged 50 years or older, 72% of American Indians/Alaska Natives and 66% of whites reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Of adults aged 50 years or older, 79% reported not having had a fecal occult blood test within the past year.
- Among adults aged 18–64, no health care coverage was reported by 41% of American Indians/Alaska Natives, 29% of Hispanics, and 12% of whites.

Risk Factors Among High School Students

- In 2001, cigarette smoking was reported by 33% of students.

Risk Factors and Preventive Services, South Dakota Compared With United States



Source: CDC, Behavioral Risk Factor Surveillance System, 2002.
 CDC, Youth Risk Behavior Surveillance System, 2001.

Tennessee: Burden of Chronic Diseases, 2001

Heart Disease

- In 2001, heart disease accounted for 15,688 deaths, or 28% of all deaths.
- The rate of death from heart disease was 50% higher among men than among women.

Stroke

- Stroke was the cause of 4,037 deaths.
- The rate of death from stroke was 43% higher among blacks than among whites.

Cancer

- Cancer accounted for 22% of all deaths in Tennessee in 2001.
- The American Cancer Society estimates that 30,900 new cases of cancer will be diagnosed in Tennessee in 2004, including 4,700 new cases of lung cancer, 3,500 new cases of colorectal cancer, and 4,300 new cases of breast cancer in women.*

- The American Cancer Society estimates that 12,700 Tennessee residents will die of cancer in 2004.
- The rate of death from all cancers was 65% higher among men than among women.

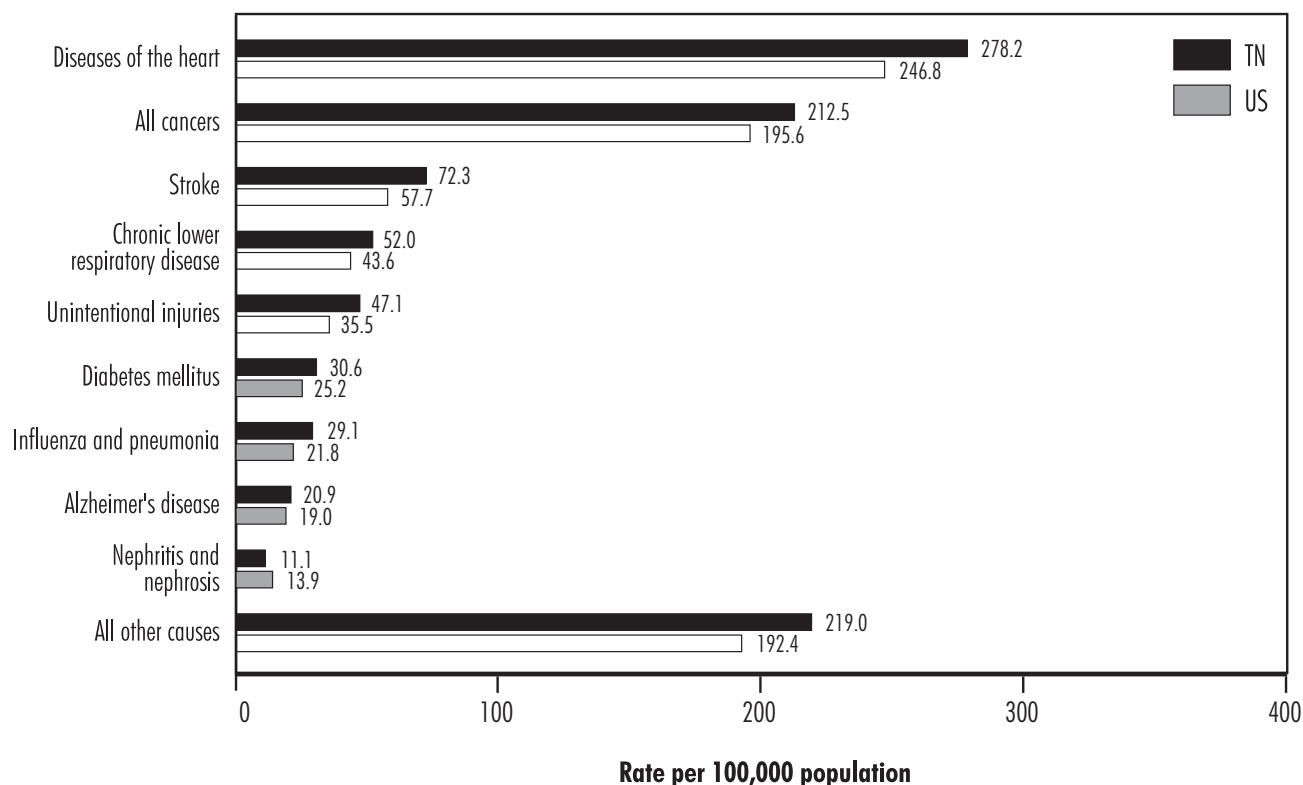
Diabetes

- In 2002,† 352,000 adults in Tennessee had diagnosed diabetes.
- In 2001, diabetes accounted for 1,746 deaths in Tennessee.
- The rate of death from diabetes was 146% higher among blacks than among whites.

* American Cancer Society data are rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Tennessee Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Tennessee: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, 31% of men and 25% of women in Tennessee reported current cigarette smoking.
- No leisure-time physical activity was reported by 42% of Hispanics, 40% of blacks, and 32% of whites.
- Eating fewer than five servings of fruits and vegetables per day was reported by 74% of men and 69% of women.
- According to self-reported height and weight, 70% of blacks and 60% of whites and Hispanics were overweight.
- In 2001, 35% of whites and 24% of blacks in Tennessee reported having high blood cholesterol.
- In 2001, 35% of blacks, 31% of Hispanics, and 29% of whites reported having high blood pressure.

Risk Factors Among High School Students

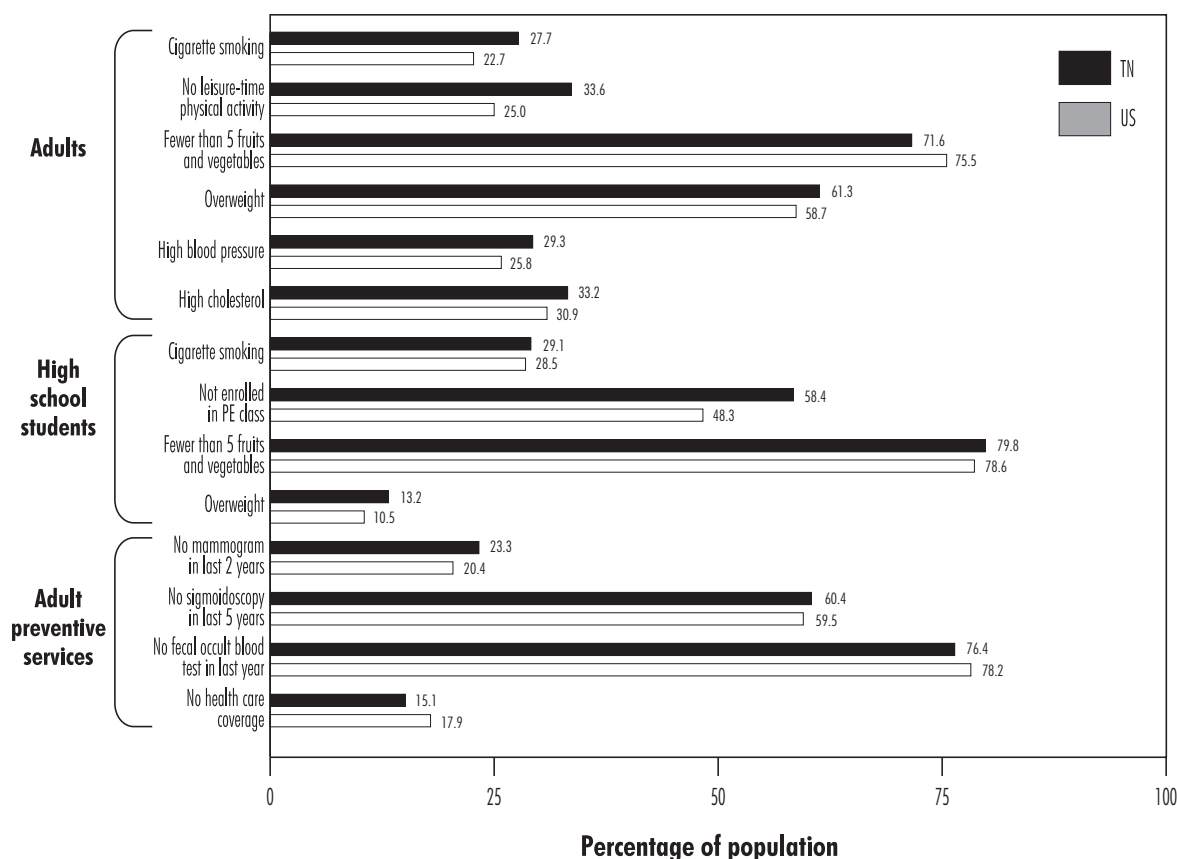
- Cigarette smoking was reported by 36% of white students and 12% of black students in 2001.

- Fifty-eight percent of students were not enrolled in physical education class.
- Sixteen percent of male and 10% of female students were overweight.
- Eighty percent of students ate fewer than five servings per day of fruits and vegetables during the 7 days preceding the survey.

Preventive Services

- Of women aged 50 years or older, 23% reported not having had a mammogram within the last 2 years.
- Among adults aged 50 years or older, 66% of blacks and 59% of whites reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Among adults aged 50 years or older, 80% of blacks and 76% of whites reported not having had a fecal occult blood test within the past year.
- Among adults aged 18–64, no health care coverage was reported by 21% of blacks and 13% of whites.

Risk Factors and Preventive Services, Tennessee Compared With United States



Source: CDC, Behavioral Risk Factor Surveillance System, 2002.
 CDC, Youth Risk Behavior Surveillance System, 2001.

Texas: Burden of Chronic Diseases, 2001

Heart Disease

- In 2001, heart disease was the most common cause of death in Texas, accounting for 43,192 deaths, or 28% of all deaths.
- The rate of death from heart disease was 49% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 10,612 deaths in Texas.
- The rate of death from stroke was 52% higher among blacks than among whites.

Cancer

- Cancer accounted for 22% of all deaths in Texas in 2001.

- The American Cancer Society estimates that 84,500 new cases of cancer will be diagnosed in Texas in 2004, including 10,500 new cases of lung cancer, 9,200 new cases of colorectal cancer, and 13,000 new cases of breast cancer in women.*
- The American Cancer Society estimates that 34,800 Texas residents will die of cancer in 2004.
- The rate of death from all cancers was 53% higher among men than among women.

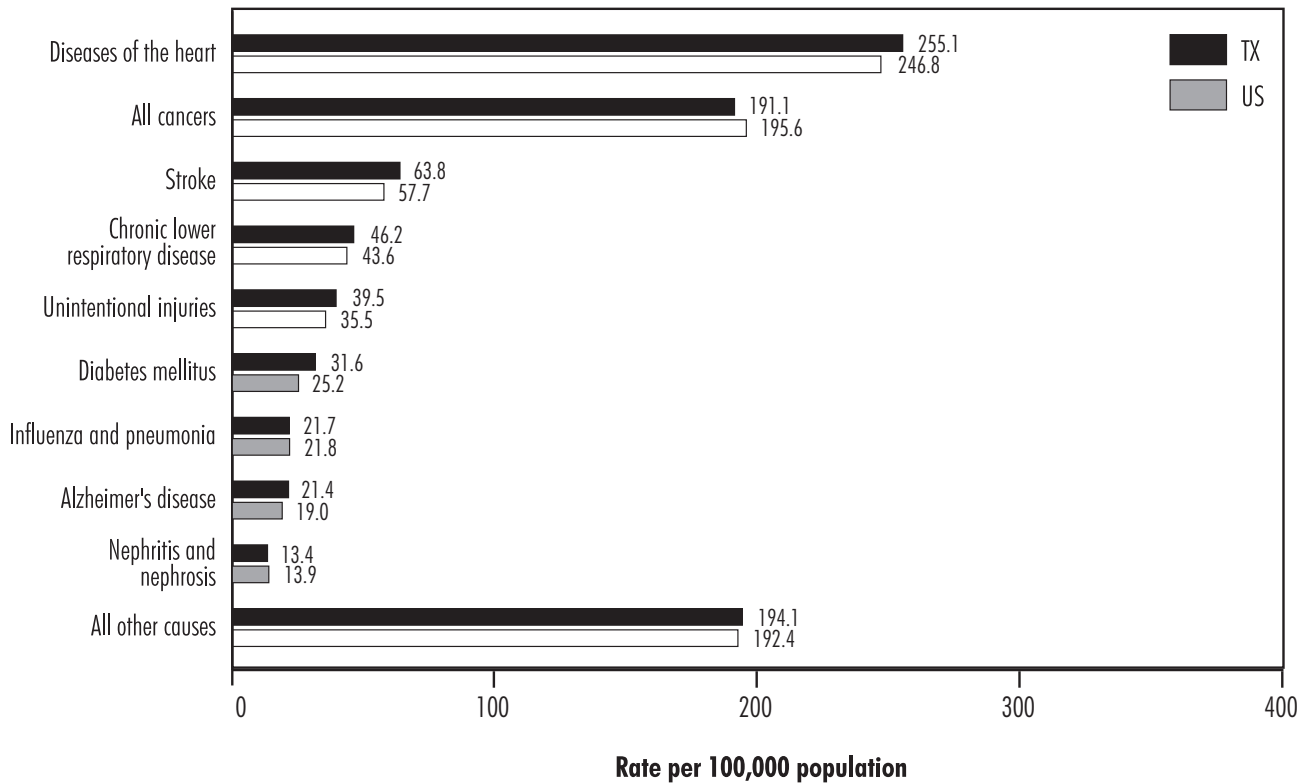
Diabetes

- In 2002,† 1,082,000 adults in Texas had diagnosed diabetes.
- In 2001, diabetes accounted for 5,456 deaths in Texas.
- The rate of death from diabetes was 138% higher among blacks and 137% higher among Hispanics than among whites.

* American Cancer Society are data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Texas Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Texas: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, 27% of men and 19% of women in Texas reported current cigarette smoking.
- No leisure-time physical activity was reported by 43% of Hispanics, 28% of Asians/Pacific Islanders, 27% of blacks, 24% of American Indians/Alaska Natives, and 23% of whites and multiracial adults.
- Eighty-one percent of men and 72% of women reported eating fewer than five servings of fruits and vegetables per day.
- According to self-reported height and weight, 76% of blacks, 70% of Hispanics, 67% of American Indians/Alaska Natives, 59% of whites, and 56% of multiracial adults.
- In 2001, 35% of whites, 34% of Asians/Pacific Islanders, 29% of blacks, 25% of Hispanics, and 21% of multiracial persons in Texas reported having high blood cholesterol.
- In 2001, 36% of blacks, 28% of whites, 27% of multiracial persons, 19% of Hispanics, and reported having high blood pressure.

Risk Factors Among High School Students

- In 2001, 31% of white, 31% of Hispanic, and 14%

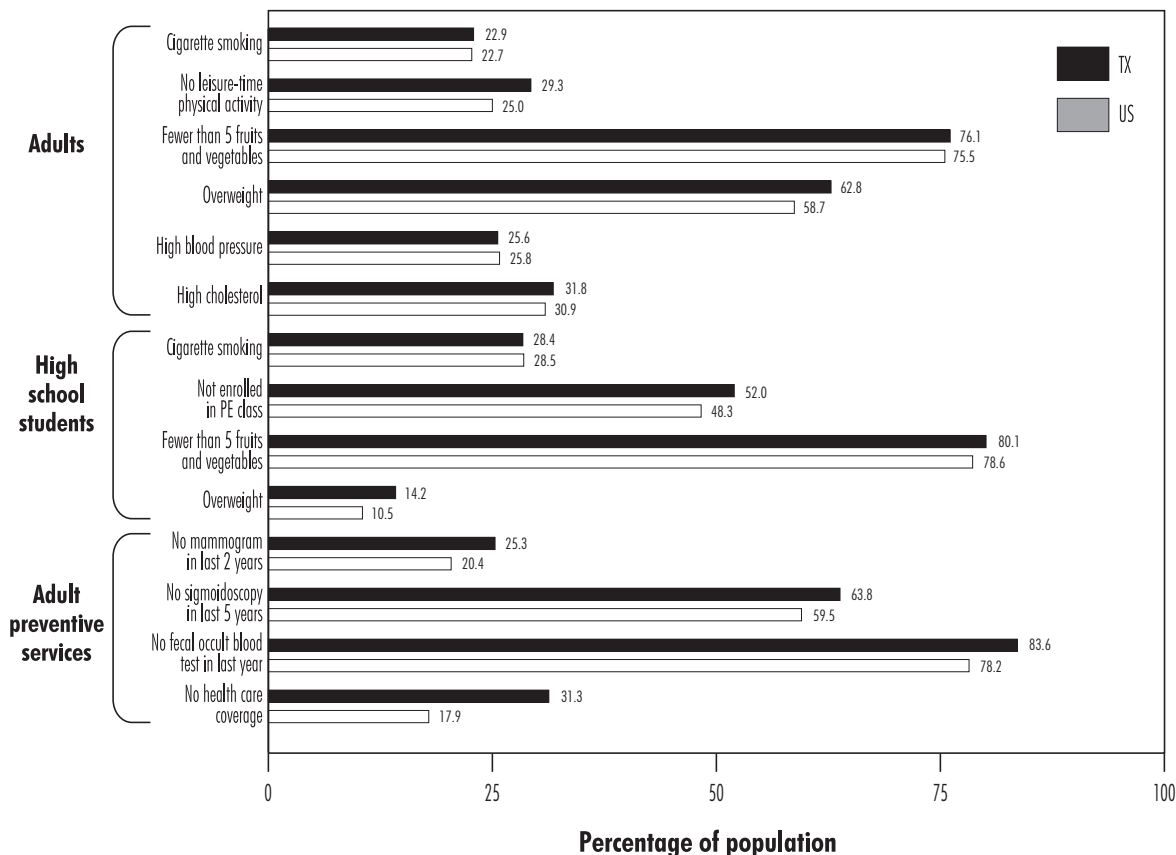
of black students reported cigarette smoking.

- Fifty-two percent of students were not enrolled in physical education class.
- Nineteen percent of male students and 9% of female students were overweight.
- Eighty percent of students ate fewer than five servings per day of fruits and vegetables during the 7 days preceding the survey.

Preventive Services

- Of women aged 50 years or older, 29% of Hispanics, 25% of blacks, and 25% of whites reported not having had a mammogram within the last 2 years.
- Among adults aged 50 years or older, 76% of Hispanics, 63% of blacks, and 62% of whites reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Among adults aged 50 years or older, 91% of Hispanics, 87% of blacks, and 81% of whites reported not having had a fecal occult blood test within the past year.
- Of adults aged 18–64 years, 54% of Hispanics, 29% of blacks, 29% of multiracial adults, 19% of whites, and 18% of Asians/Pacific Islanders reported having no health care coverage.

Risk Factors and Preventive Services, Texas Compared With United States



Source: CDC, Behavioral Risk Factor Surveillance System, 2002.
 CDC, Youth Risk Behavior Surveillance System, 2001.

Utah: Burden of Chronic Diseases, 2001

Heart Disease

- In 2001, heart disease was the most common cause of death in Utah, accounting for 23% of all deaths.
- The rate of death from heart disease was 39% lower among Hispanics than among whites and 41% lower among men than among women.

Stroke

- In 2001, stroke was the cause of 870 deaths in Utah.
- The rate of death from stroke was 19% higher among women than among men.

Cancer

- Cancer accounted for 18% of all deaths in Utah in 2001.

- The American Cancer Society estimates that 6,400 new cases of cancer will be diagnosed in Utah in 2004, including 500 new cases of lung cancer, 700 new cases of colorectal cancer, and 1,100 new cases of breast cancer in women.*
- The American Cancer Society estimates that 2,600 Utah residents will die of cancer in 2004.
- The rate of death from lung cancer was 134% higher among men than among women.

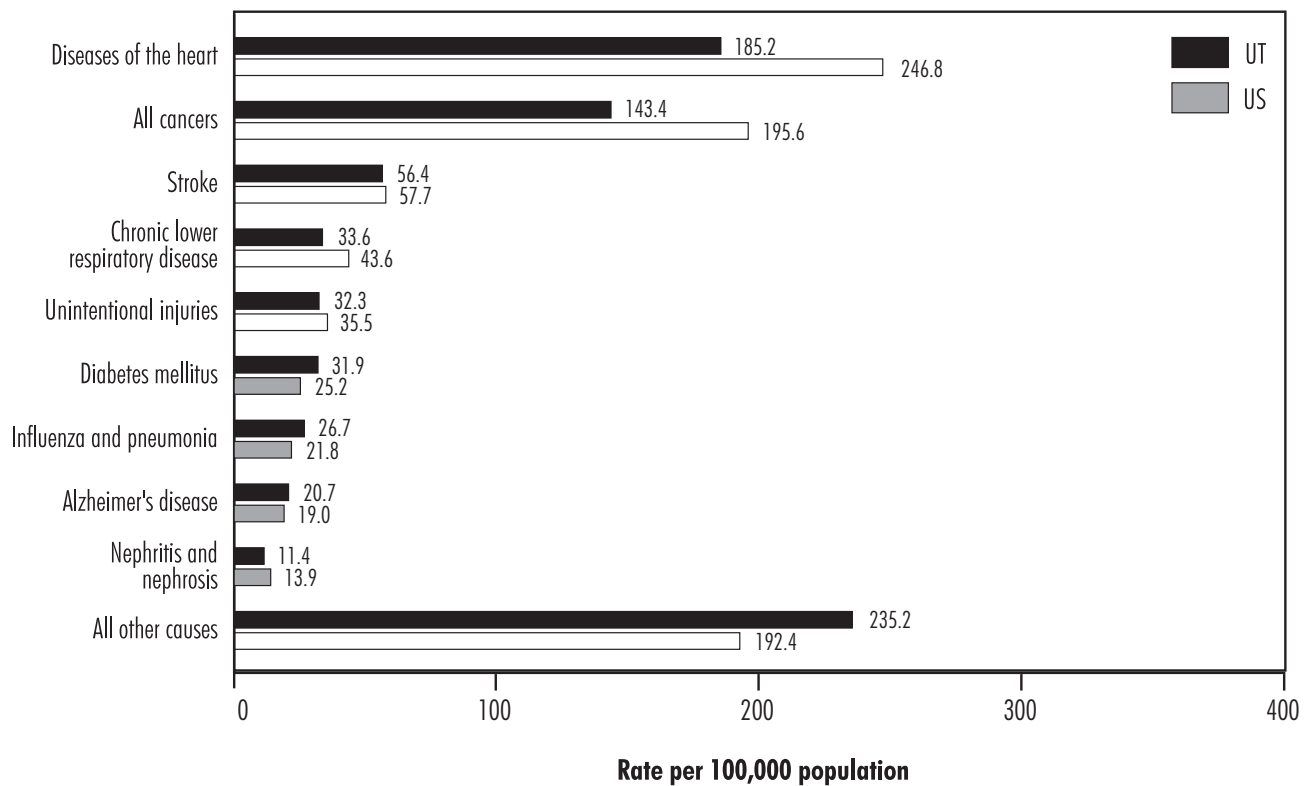
Diabetes

- In 2002,† 66,000 adults in Utah had diagnosed diabetes.
- In 2001, diabetes accounted for 509 deaths in Utah.
- The rate of death from diabetes was 11% higher among men than among women.

* American Cancer Society are data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Utah Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Utah: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, 14% of men and 11% of women in Utah reported current cigarette smoking.
- No leisure-time physical activity was reported by 27% of Hispanics and 18% of whites.
- Eating fewer than five servings of fruits and vegetables per day was reported by 87% of men and 72% of women.
- According to self-reported height and weight, 65% of men and 42% of women were overweight.
- In 2001, 32% of Hispanics and 29% of whites in Utah reported having high blood cholesterol.
- In 2001, 23% of whites and 15% of Hispanics reported having high blood pressure.

Risk Factors Among High School Students

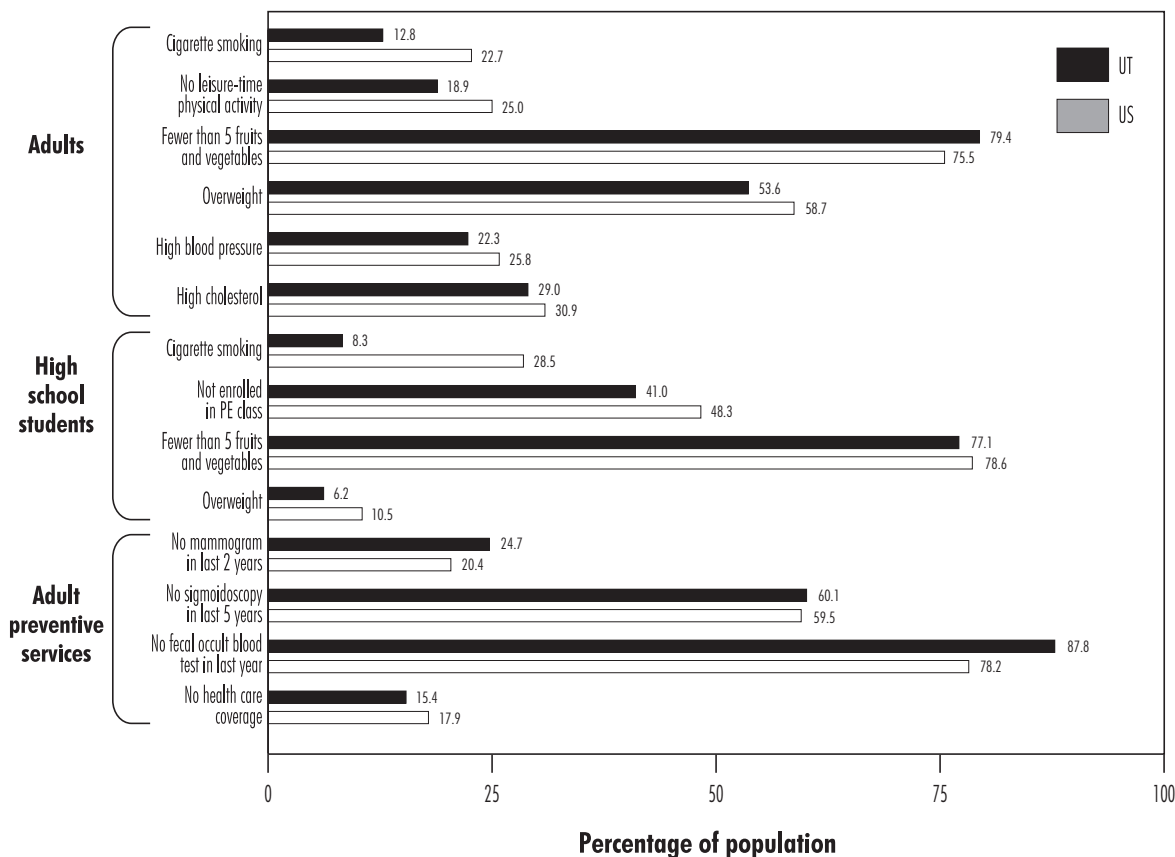
- In 2001, 8% of students reported cigarette smoking.
- Forty-one percent of students were not enrolled in physical education class.

- Ten percent of male students and 3% of female students were overweight.
- Seventy-seven percent of students ate fewer than five servings per day of fruits and vegetables during the 7 days preceding the survey.

Preventive Services

- Of women aged 50 years or older, 25% reported not having had a mammogram within the last 2 years.
- Sixty percent of adults aged 50 years or older reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Among adults aged 50 years or older, 90% of men and 86% of women reported not having had a fecal occult blood test within the last year.
- Among adults aged 18–64, no health care coverage was reported by 25% of Hispanics and 14% of whites.

Risk Factors and Preventive Services, Utah Compared With United States



Source: CDC, Behavioral Risk Factor Surveillance System, 2002.
 CDC, Youth Risk Behavior Surveillance System, 2001.

Vermont: Burden of Chronic Diseases, 2001

Heart Disease

- In 2001, heart disease was the most common cause of death in Vermont, accounting for 28% of all deaths.
- The rate of death from heart disease was 58% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 6% of all deaths in Vermont.
- The rate of death from stroke was 14% higher among women than among men.

Cancer

- Cancer accounted for 24% of all deaths in Vermont in 2001.
- The American Cancer Society estimates that 3,200 new cases

of cancer will be diagnosed in Vermont in 2004, including 400 new cases of lung cancer, 300 new cases of colorectal cancer, and 600 new cases of breast cancer in women.*

- The American Cancer Society estimates that 1,300 Vermont residents will die of cancer in 2004.
- The rate of death from lung cancer was 107% higher among men than among women.

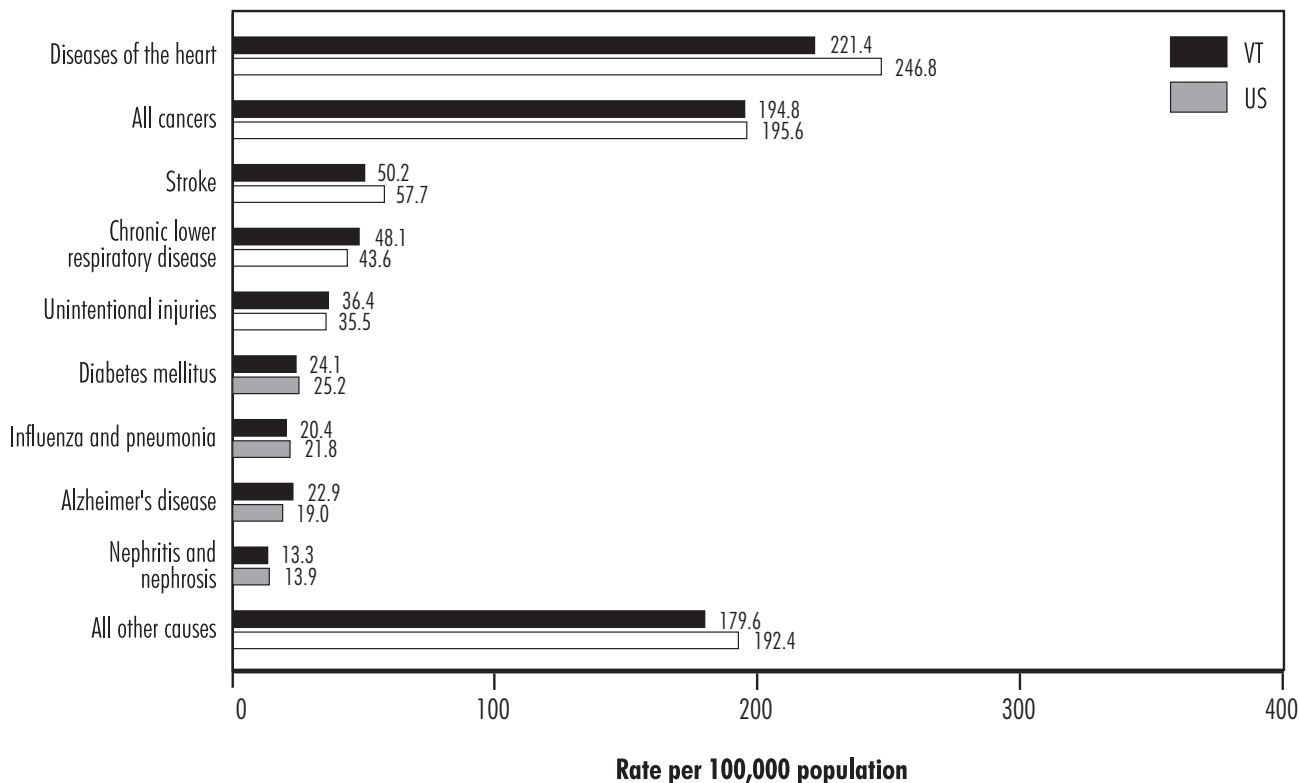
Diabetes

- In 2002, † 25,000 adults in Vermont had diagnosed diabetes.
- In 2001, diabetes accounted for 155 deaths in Vermont.
- The rate of death from diabetes was 3% higher among men than among women.

* American Cancer Society are data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Vermont Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Vermont: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, 21% of adults in Vermont reported current cigarette smoking.
- No leisure-time physical activity was reported by 18% of whites and 16% of Hispanics.
- Seventy-nine percent of men and 64% of women reported eating fewer than five servings of fruits and vegetables per day.
- According to self-reported height and weight, 64% of men and 46% of women were overweight.
- In 2001, 31% of men and 28% of women in Vermont reported having high blood cholesterol.
- In 2001, 22% of women and 21% of men reported having high blood pressure.

Risk Factors Among High School Students

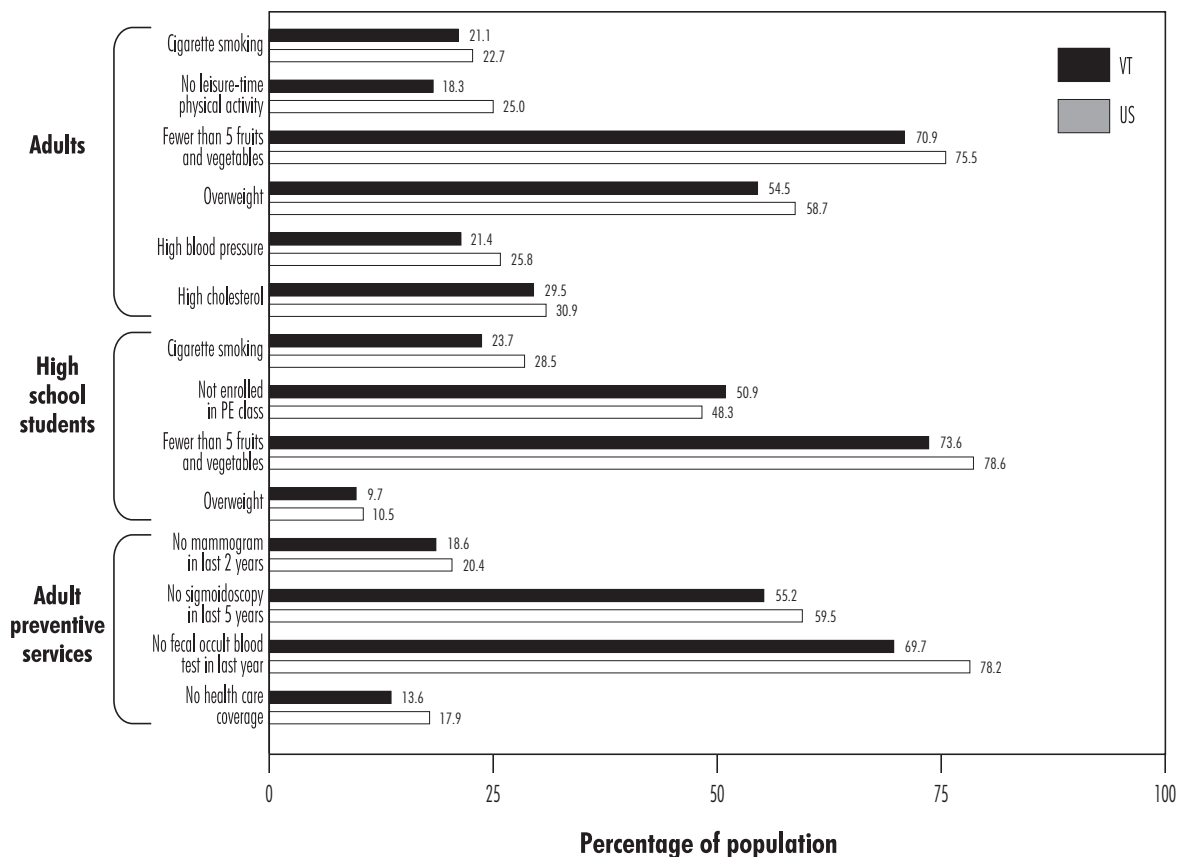
- In 2001, 24% of high school students reported cigarette smoking.
- Fifty-one percent of students were not enrolled in physical education class.

- Fourteen percent of male and 5% of female students were overweight.
- Seventy-four percent of students ate fewer than five servings per day of fruits and vegetables during the 7 days preceding the survey.

Preventive Services

- Of women aged 50 years or older, 19% reported not having had a mammogram within the last 2 years.
- Of adults aged 50 years or older, 58% of women and 52% of men reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Among adults aged 50 years or older, 71% of women and 68% of men reported not having had a fecal occult blood test within the past year.
- Among adults aged 18–64, no health care coverage was reported by 17% of men and 11% of women.

Risk Factors and Preventive Services, Vermont Compared With United States



Source: CDC, Behavioral Risk Factor Surveillance System, 2002.
 CDC, Youth Risk Behavior Surveillance System, 2001.

Virginia: Burden of Chronic Diseases, 2001

Heart Disease

- Heart disease was the most common cause of death in Virginia in 2001, accounting for 14,913 deaths, or 27% of all deaths.
- The rate of death from heart disease was 48% higher among men than among women.

Stroke

- Stroke was the cause of 4,129 deaths in Virginia.
- The rate of death from stroke was 50% higher among blacks than among whites.

Cancer

- In 2001, cancer accounted for 24% of all deaths in Virginia.
- The American Cancer Society estimates that 31,200 new cases

of cancer will be diagnosed in Virginia in 2004, including 4,100 new cases of lung cancer; 3,600 new cases of colorectal cancer; and 6,400 new cases of breast cancer in women.*

- The American Cancer Society estimates that 12,900 Virginia residents will die of cancer in 2004.
- The rate of death from lung cancer was 74% higher among men than among women.

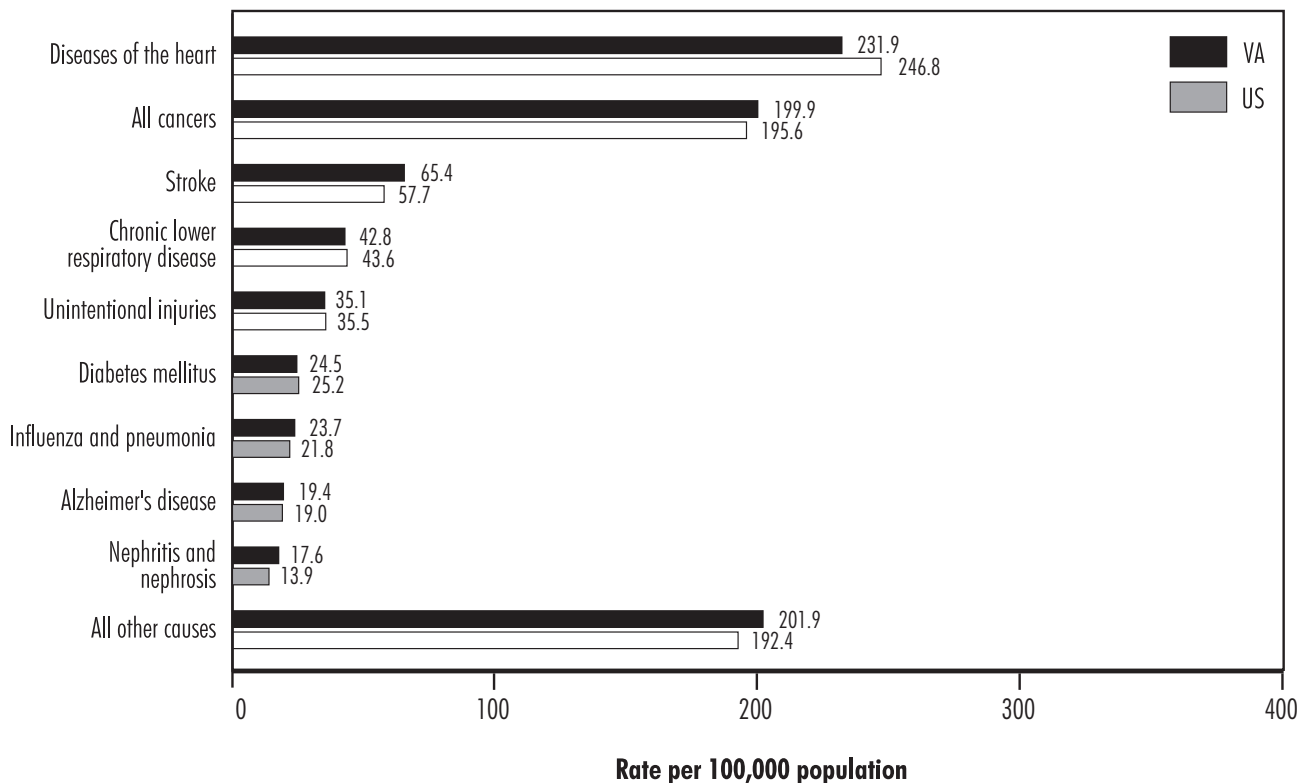
Diabetes

- In 2002, † 333,000 adults in Virginia had diagnosed diabetes.
- In 2001, diabetes accounted for 1,613 deaths in Virginia.
- The rate of death from diabetes was 127% higher among blacks than among whites.

* American Cancer Society are data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Virginia Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Virginia: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, current cigarette smoking was reported by 29% of men and 21% of women in Virginia.
- No leisure-time physical activity was reported by 36% of blacks, 32% of Asians/Pacific Islanders, 26% of Hispanics, 22% of whites, and 20% of multiracial adults.
- Seventy-six percent of men and 69% of women reported eating fewer than five servings of fruits and vegetables per day.
- According to self-reported height and weight, 73% of blacks, 59% of multiracial adults, 58% of whites, 53% of Hispanics, and 37% of Asians/Pacific Islanders were overweight.
- In 2001, 36% of multiracial persons, 31% of whites, 29% of blacks, and 27% of Hispanics in Virginia reported having high blood cholesterol.
- In 2001, 35% of blacks, 25% of whites, 21% of multiracial persons, 14% of Asians/Pacific Islanders, and 8% of Hispanics reported having high blood pressure.

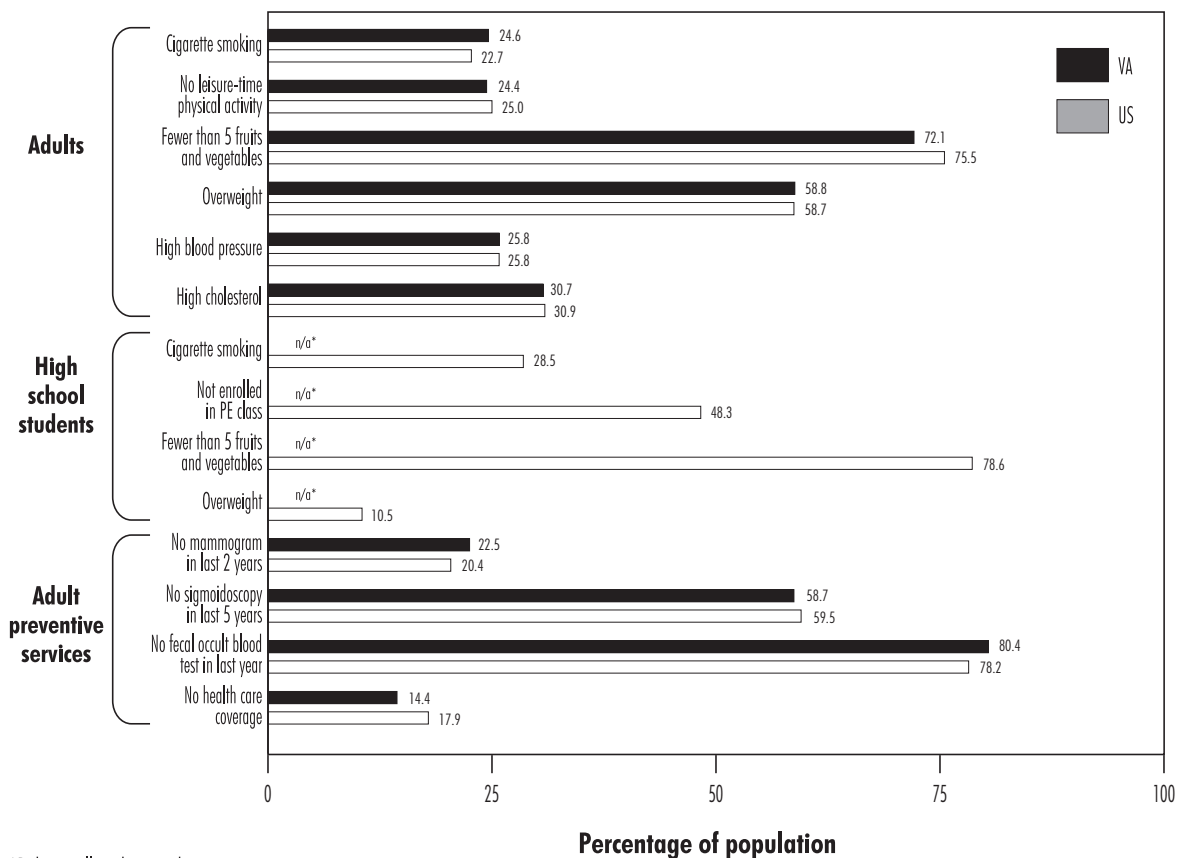
Risk Factors Among High School Students

- The 2001 YRBS was not conducted in Virginia.

Preventive Services

- Of women aged 50 years or older, 23% of whites and 17% of blacks reported not having had a mammogram within the last 2 years.
- Fifty-nine percent of adults aged 50 years or older reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Among adults aged 50 years or older, 82% of women and 79% of men reported not having had a fecal occult blood test within the past year.
- Among adults aged 18–64, 14% reported having no health care coverage.

Risk Factors and Preventive Services, Virginia Compared With United States



Source: CDC, Behavioral Risk Factor Surveillance System, 2002.
 CDC, Youth Risk Behavior Surveillance System, 2001.

Washington: Burden of Chronic Diseases, 2001

Heart Disease

- In 2001, heart disease was the most common cause of death in Washington, accounting for 11,281 deaths, or 25% of all deaths.
- The rate of death from heart disease was 58% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 3,765 deaths, or 8% of all deaths in Washington.
- The rate of death from stroke was 49% higher among American Indians/Alaska Natives and 25% higher among blacks than among whites.

Cancer

- Cancer accounted for 24% of all deaths in Washington in 2001.

- The American Cancer Society estimates that 27,400 new cases of cancer will be diagnosed in Washington in 2004, including 3,500 new cases of lung cancer, 2,700 new cases of colorectal cancer, and 4,000 new cases of breast cancer in women.*
- The American Cancer Society estimates that 11,300 Washington residents will die of cancer in 2004.
- The rate of death from lung cancer was 48% higher among men than among women.

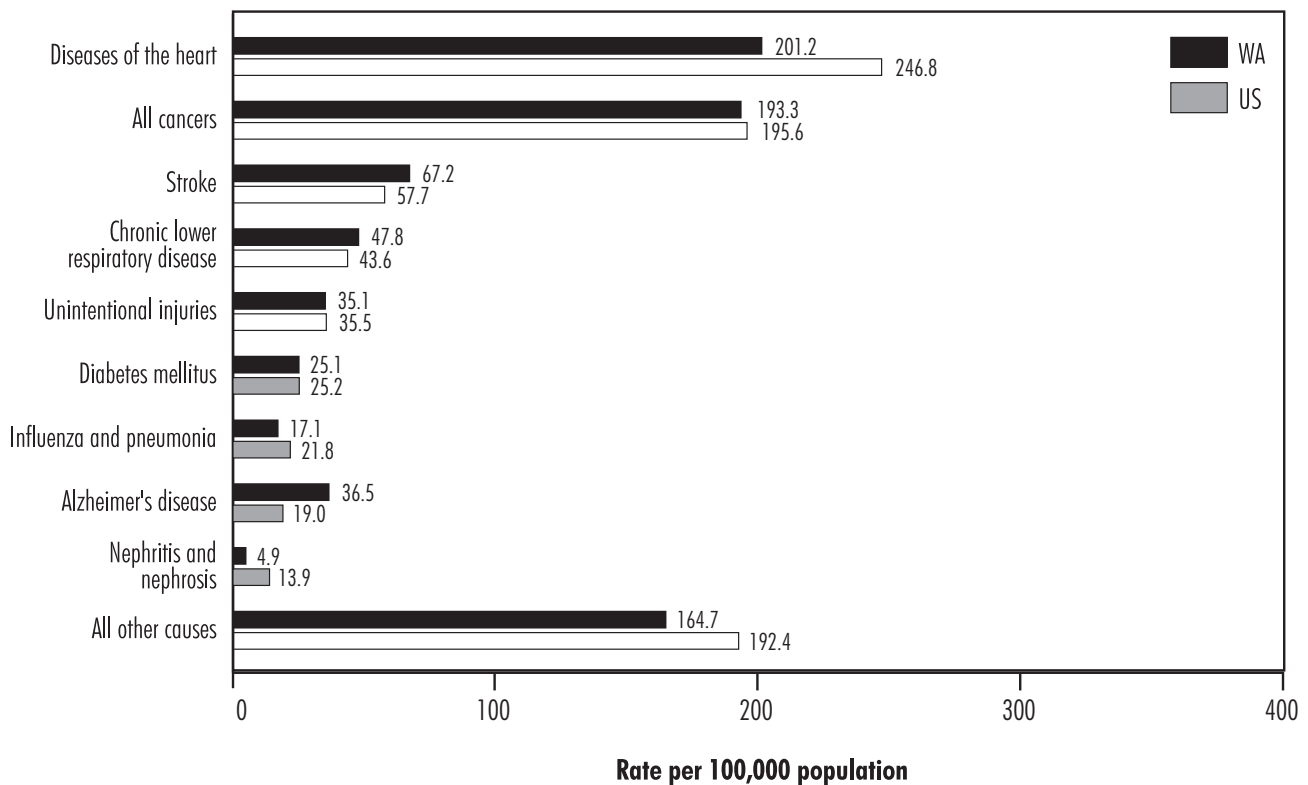
Diabetes

- In 2002,† 256,000 adults in Washington had diagnosed diabetes.
- In 2001, diabetes accounted for 1,403 deaths in Washington.
- The rate of death from diabetes was 107% higher among blacks, 66% higher among American Indians/Alaska Natives, and 27% higher among Hispanics than among whites.

* American Cancer Society are data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Washington Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Washington: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, current cigarette smoking was reported by 33% of multiracial adults, 31% of American Indians/Alaska Natives, 22% of whites, 20% of Hispanics, 16% of blacks, and 14% of Asians/Pacific Islanders in Washington.
- No leisure-time physical activity was reported by 29% of Hispanics, 22% of American Indians/Alaska Natives, 21% of Asians/Pacific Islanders, 19% of multiracial adults, 17% of blacks, and 14% of whites.
- Eating fewer than five servings of fruits and vegetables per day was reported by 83% of men and 69% of women.
- According to self-reported height and weight, 69% of men and 49% of women were overweight.
- In 2001, 32% of blacks, 30% of Asians/Pacific Islanders, 29% of whites, 26% of Hispanics, and 24% of multiracial persons in Washington reported having high blood cholesterol.
- In 2001, 31% of American Indians/Alaska Natives, 28% of blacks, 26% of multiracial persons, 25% of whites, 21% of Hispanics, and 15% of Asians/Pacific Islanders reported having high blood pressure.

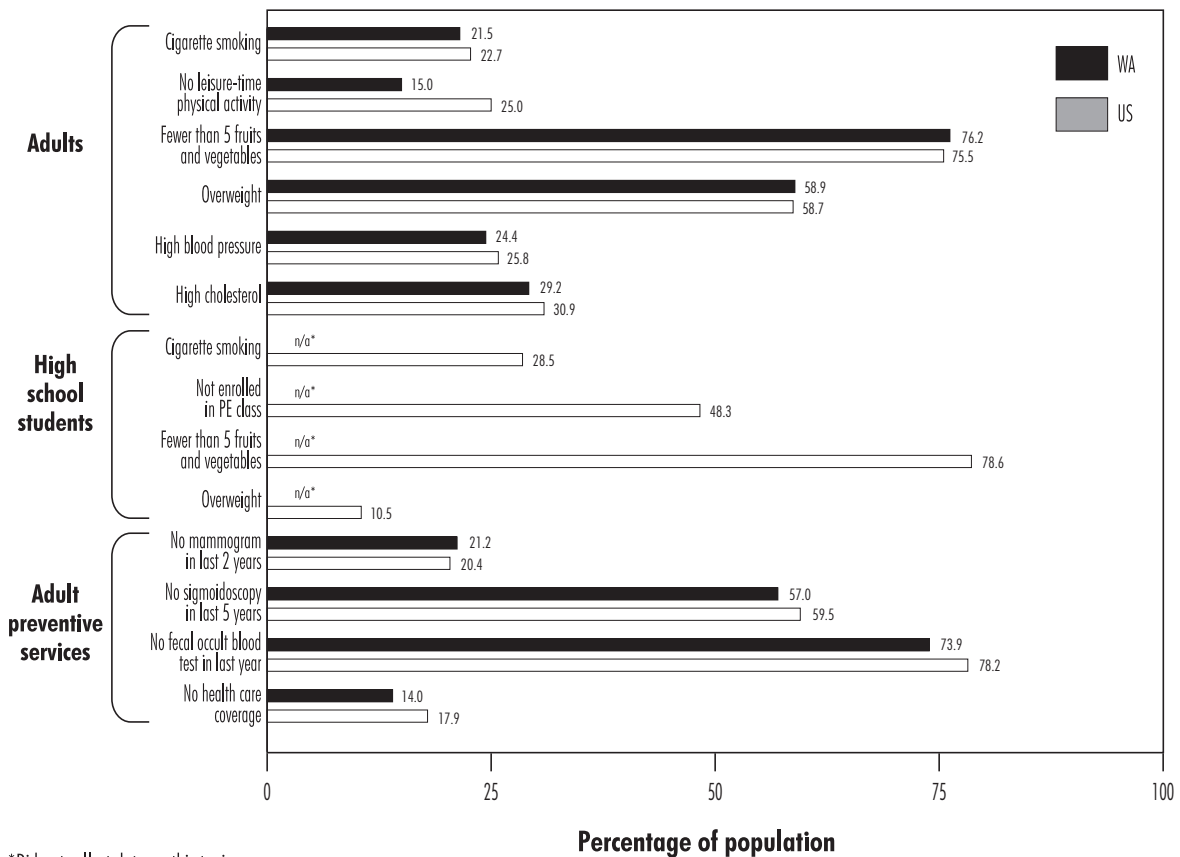
Risk Factors Among High School Students

- The 2001 YRBS was not conducted in Washington.

Preventive Services

- Of women aged 50 years or older, 21% reported not having had a mammogram within the last 2 years.
- Among adults aged 50 years or older, 57% reported not having had a sigmoidoscopy or colonoscopy within the last 5 years
- Among adults aged 50 years or older, 77% of men and 71% of women reported not having had a fecal occult blood test within the past year.
- Among adults aged 18–64 years, no health care coverage was reported by 22% of Hispanics, 22% of multiracial adults, 21% of blacks, 16% of American Indians/Alaska Natives, 13% of whites, and 8% of Asians/Pacific Islanders.

Risk Factors and Preventive Services, Washington Compared With United States



*Did not collect data on this topic.

Source: CDC, Behavioral Risk Factor Surveillance System, 2002.

CDC, Youth Risk Behavior Surveillance System, 2001.

West Virginia: Burden of Chronic Diseases, 2001

Heart Disease

- Heart disease accounted for 6,325 deaths or 30% of all deaths.
- The rate of death from heart disease was 48% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 1,272 deaths in West Virginia.
- The rate of death from stroke was 31% higher among blacks than among whites.

Cancer

- Cancer accounted for 22% of all deaths in West Virginia in 2001.
- The American Cancer Society estimates that 11,400 new cases of cancer will be diagnosed in West Virginia in 2004, including

1,800 new cases of lung cancer, 1,300 new cases of colorectal cancer, and 1,600 new cases of breast cancer in women.*

- The American Cancer Society estimates that 4,700 West Virginia residents will die of cancer in 2004.
- The rate of death from all cancers was 44% higher among men than among women.

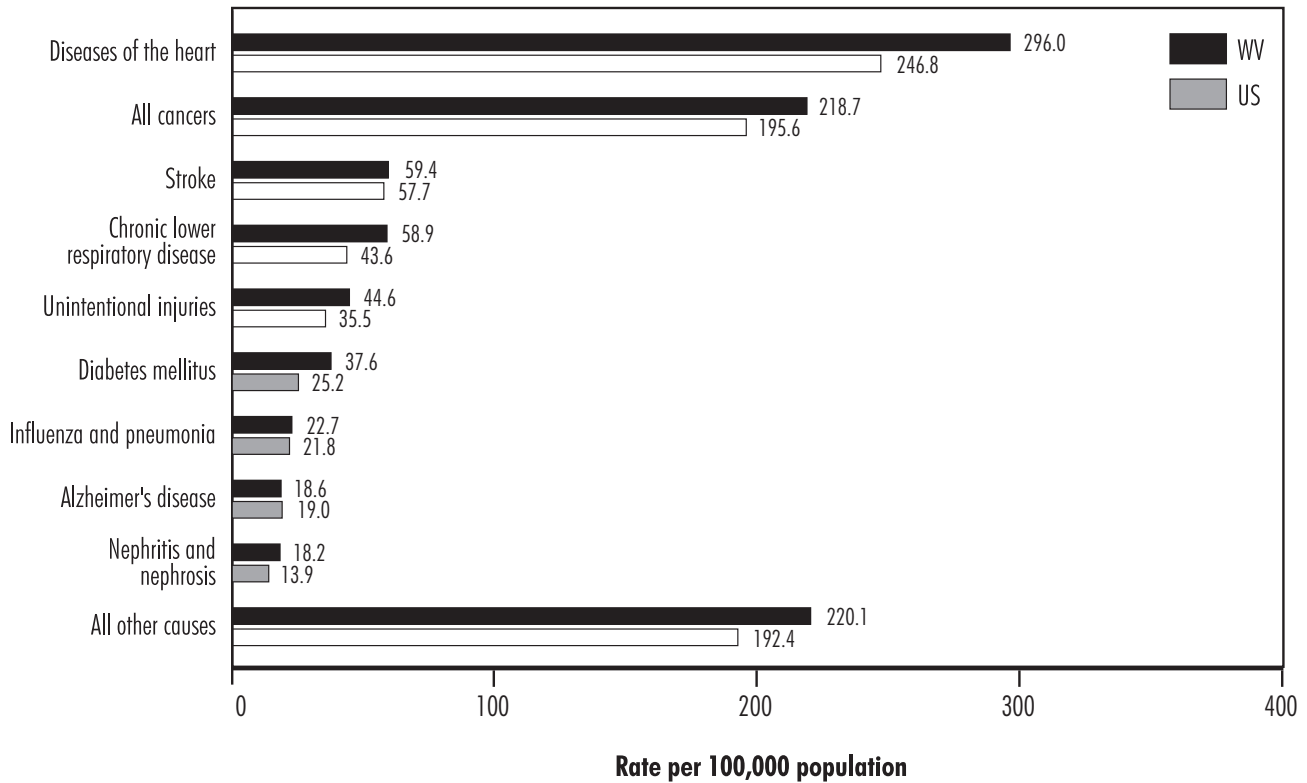
Diabetes

- In 2002, † 133,000 adults in West Virginia had diagnosed diabetes.
- In 2001, diabetes accounted for 802 deaths in West Virginia.
- The rate of death from diabetes was 71% higher among blacks than among whites.

* American Cancer Society are data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, West Virginia Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

West Virginia: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, current cigarette smoking was reported by 44% of multiracial adults, 28% of whites, and 20% of blacks in West Virginia.
- No leisure-time physical activity was reported by 31% of blacks, 29% of multiracial adults, and 28% of whites.
- Eighty-four percent of men and 74% of women reported eating fewer than five servings of fruits and vegetables per day.
- According to self-reported height and weight, 71% of men and 56% of women were overweight.
- In 2001, 48% of blacks, 38% of multiracial persons, and 37% of whites in West Virginia reported having high blood cholesterol.
- In 2001, 41% of blacks, 37% of multiracial persons, and 32% of whites reported having high blood pressure.

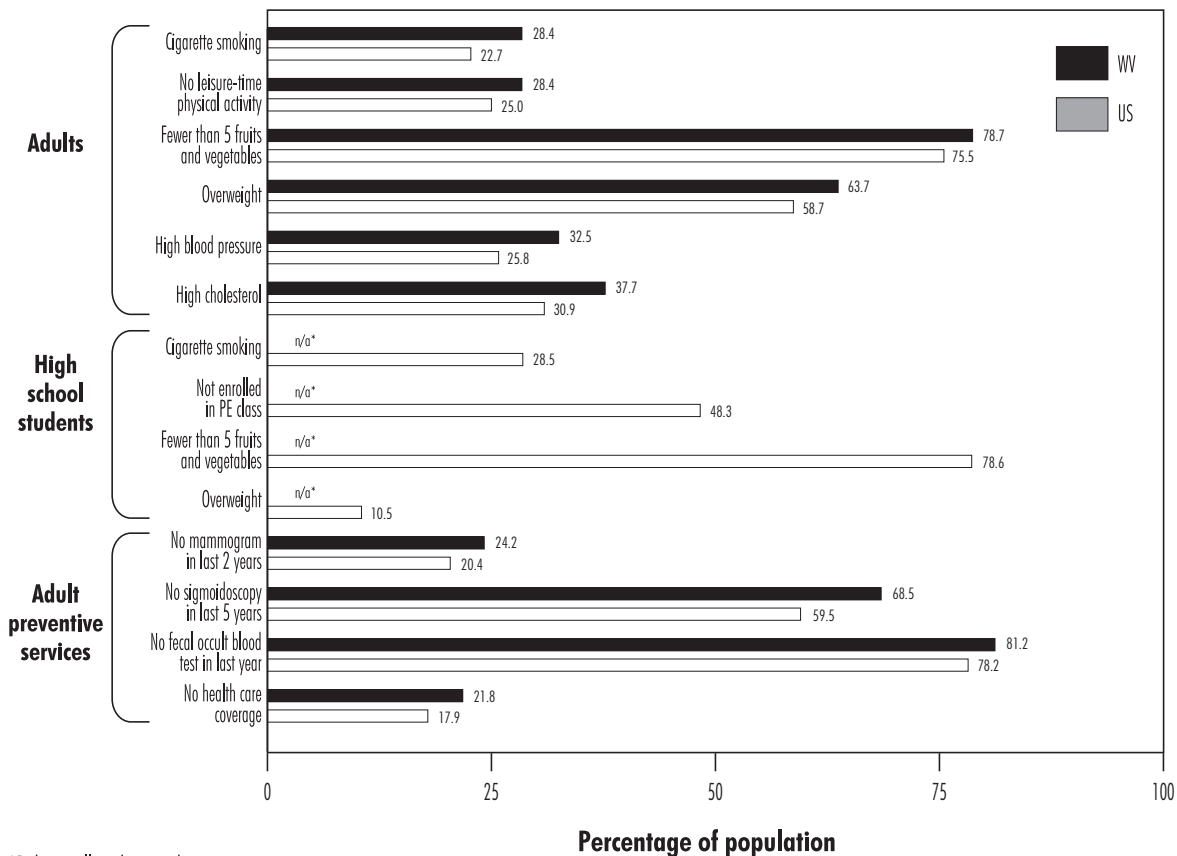
Risk Factors Among High School Students

- The 2001 YRBS was not conducted in West Virginia.

Preventive Services

- Among women aged 50 years or older, 24% reported not having had a mammogram within the last 2 years.
- Of adults aged 50 years or older, 69% reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Among adults aged 50 years or older, 85% of women and 77% of men reported not having had a fecal occult blood test within the last year.
- Among adults aged 18–64 years, 22% reported having no health care coverage.

Risk Factors and Preventive Services, West Virginia Compared With United States



Source: CDC, Behavioral Risk Factor Surveillance System, 2002.
 CDC, Youth Risk Behavior Surveillance System, 2001.

Wisconsin: Burden of Chronic Diseases, 2001

Heart Disease

- Heart disease was the most common cause of death in Wisconsin in 2001, accounting for 13,023 deaths, or 28% of all deaths.
- The rate of death from heart disease was 63% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 3,658 deaths, or 8% of all deaths in Wisconsin.
- The rate of death from stroke was 90% higher among Asians/Pacific Islanders and 27% higher among blacks than among whites.

Cancer

- In 2001, cancer accounted for 23% of all deaths in Wisconsin.

- The American Cancer Society estimates that 26,200 new cases of cancer will be diagnosed in Wisconsin in 2004, including 3,100 new cases of lung cancer, 2,900 new cases of colorectal cancer, and 4,000 new cases of breast cancer in women.*
- The American Cancer Society estimates that 10,800 Wisconsin residents will die of cancer in 2004.
- The rate of death from all cancers was 48% higher among men than among women.

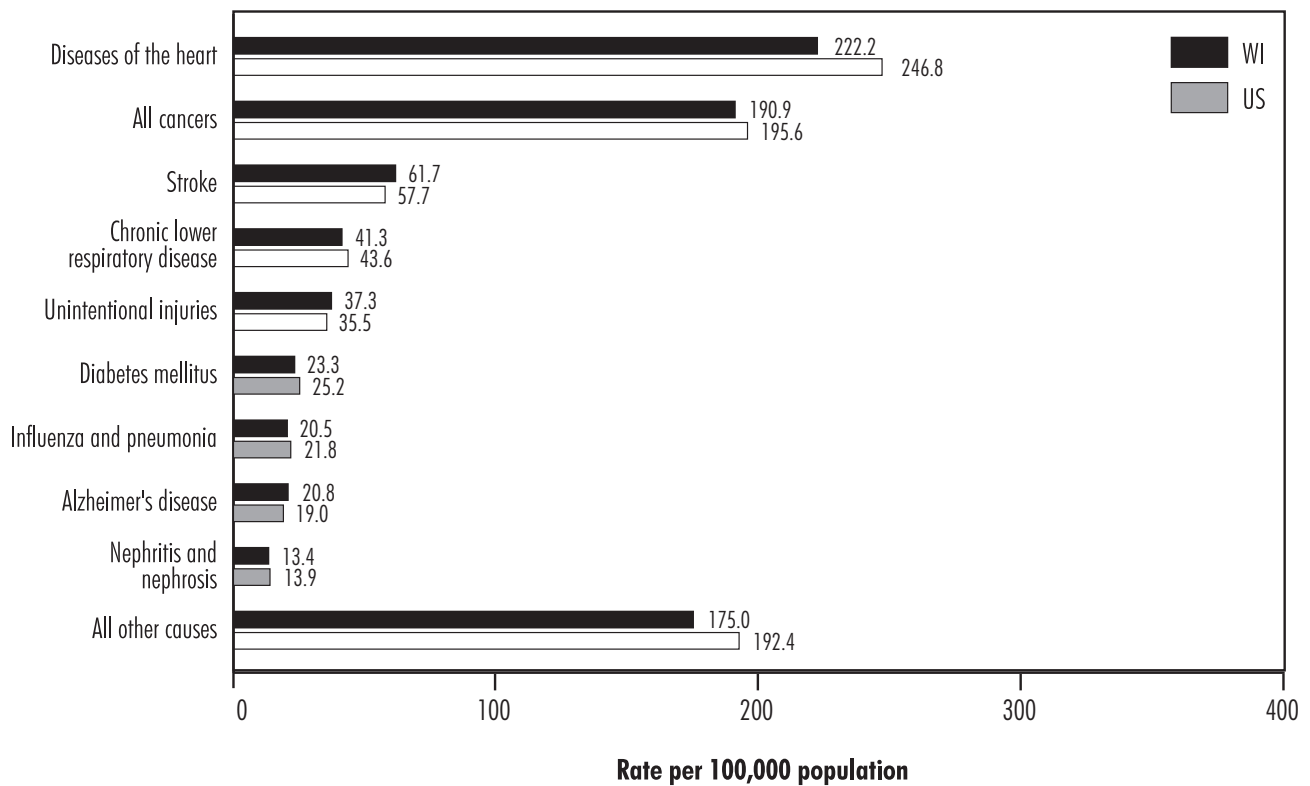
Diabetes

- In 2002,† 214,000 adults in Wisconsin had diagnosed diabetes.
- In 2001, diabetes accounted for 1,337 deaths in Wisconsin.
- The rate of death from diabetes was 140% higher among blacks than among whites.

* American Cancer Society are data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Wisconsin Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Wisconsin: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, current cigarette smoking was reported by 38% of American Indians/Alaska Natives, 28% of blacks, 26% of Hispanics, and 23% of whites in Wisconsin.
- No leisure-time physical activity was reported by 40% of blacks, 32% of American Indians/Alaska natives, 24% of Hispanics, and 19% of whites.
- Eating fewer than five servings of fruits and vegetables per day was reported by 81% of men and 72% of women.
- According to self-reported height and weight, 68% of men and 48% of women were overweight.
- In 2001, 30% of whites, 28% of blacks, and 18% of Hispanics in Wisconsin reported having high blood cholesterol.
- In 2001, 35% of blacks, 25% of American Indians/Alaska Natives, and 24% of whites and Hispanics reported having high blood pressure.

Risk Factors Among High School Students

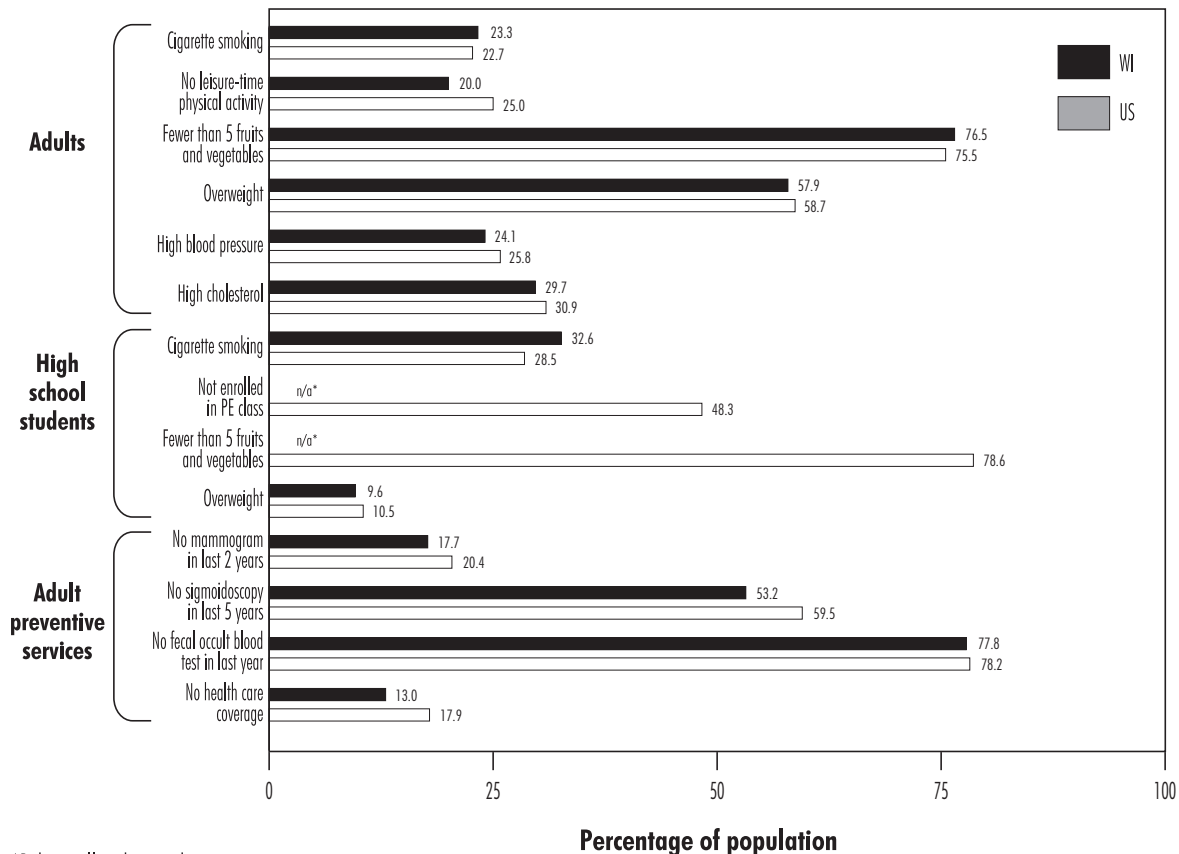
- In 2001, cigarette smoking was reported by 34% of white and 17% of black students.

- Thirteen percent of male and 6% of female high school students were overweight. (Note: State YRBS did not ask the PE or the fruit and vegetable question in 2001.)

Preventive Services

- Of women aged 50 years or older, 18% of whites and 13% of blacks reported not having had a mammogram within the last 2 years.
- Among adults aged 50 years or older, 55% of women and 51% of men reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Of adults aged 50 years or older, 78% reported not having had a fecal occult blood test within the last year.
- Among adults aged 18–64, no health care coverage was reported by 29% of Hispanics, 21% of blacks, and 11% of whites.

Risk Factors and Preventive Services, Wisconsin Compared With United States



*Did not collect data on this topic.

Source: CDC, Behavioral Risk Factor Surveillance System, 2002.

CDC, Youth Risk Behavior Surveillance System, 2001.

Wyoming: Burden of Chronic Diseases, 2001

Heart Disease

- In 2001, heart disease was the most common cause of death in Wyoming, accounting for 24% of all deaths.
- The rate of death from heart disease was 48% higher among men than among women.

Stroke

- In 2001, stroke was the cause of 260 deaths in Wyoming.
- The rate of death from stroke was 9% higher among women than among men.

Cancer

- Cancer accounted for 23% of all deaths in Wyoming in 2001.

- The American Cancer Society estimates that 2,400 new cases of cancer will be diagnosed in Wyoming in 2004, including 300 new cases of lung cancer, 300 new cases of colorectal cancer, and 300 new cases of breast cancer in women.*
- The American Cancer Society estimates that 1,000 Wyoming residents will die of cancer in 2004.
- The rate of death from all cancers was 45% higher among men than among women.

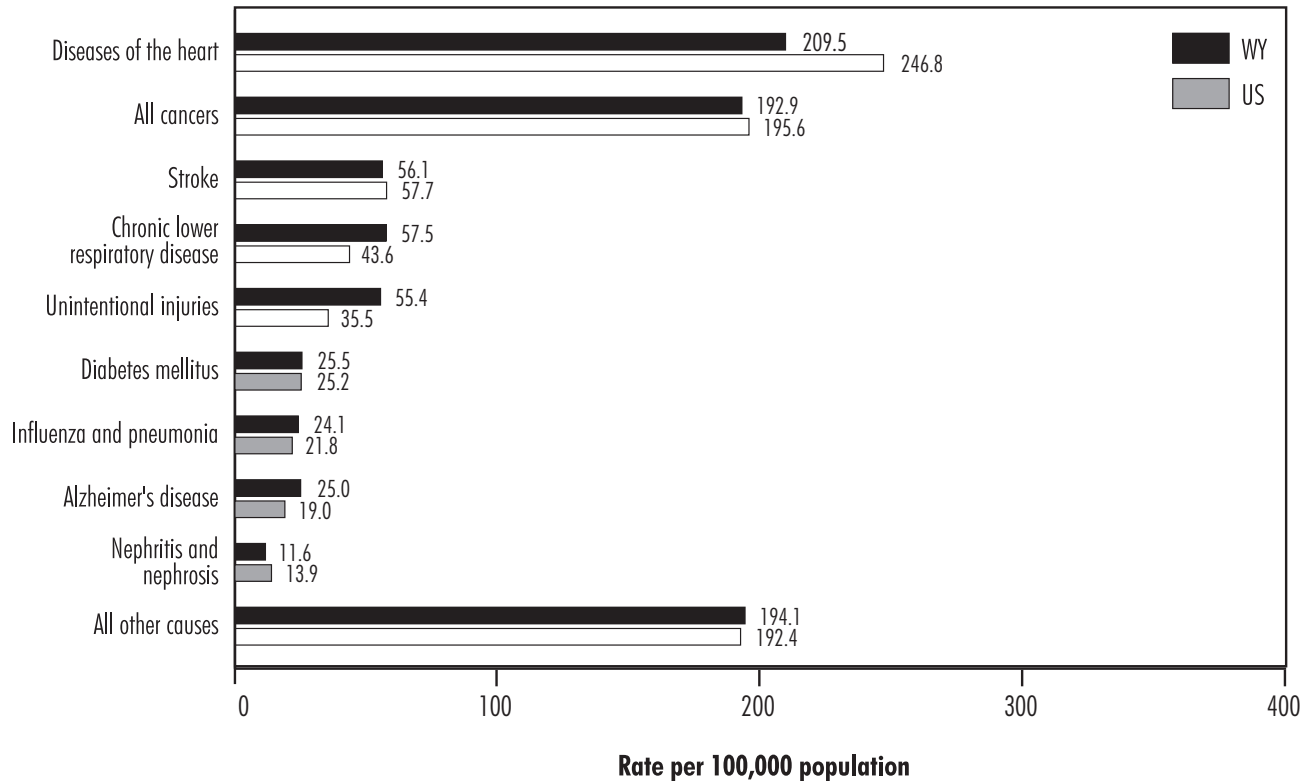
Diabetes

- In 2002,† 18,000 adults in Wyoming had diagnosed diabetes.
- In 2001, diabetes accounted for 120 deaths in Wyoming.
- The rate of death from diabetes was 19% higher among men than among women.

* American Cancer Society are data rounded to nearest 100.

† Diabetes prevalence data from 2001 and 2002 were averaged to get an adequate sample size.

Causes of Death, Wyoming Compared With United States, 2001*



*Deaths per 100,000, age adjusted to 2000 total U.S. population.

Wyoming: Risk Factors and Preventive Services, 2001 and 2002

Risk Factors Among Adults

- In 2002, current cigarette smoking was reported by 28% of Hispanics and 22% of whites in Wyoming.
- No leisure-time physical activity was reported by 25% of Hispanics and 20% of whites.
- Eighty-three percent of men and 73% of women reported eating fewer than five servings of fruits and vegetables per day.
- According to self-reported height and weight, 65% of men and 47% of women were overweight.
- In 2001, 32% of whites and 14% of Hispanics in Wyoming reported having high blood cholesterol.
- In 2001, 23% of whites and 15% of Hispanics reported having high blood pressure.

Risk Factors Among High School Students

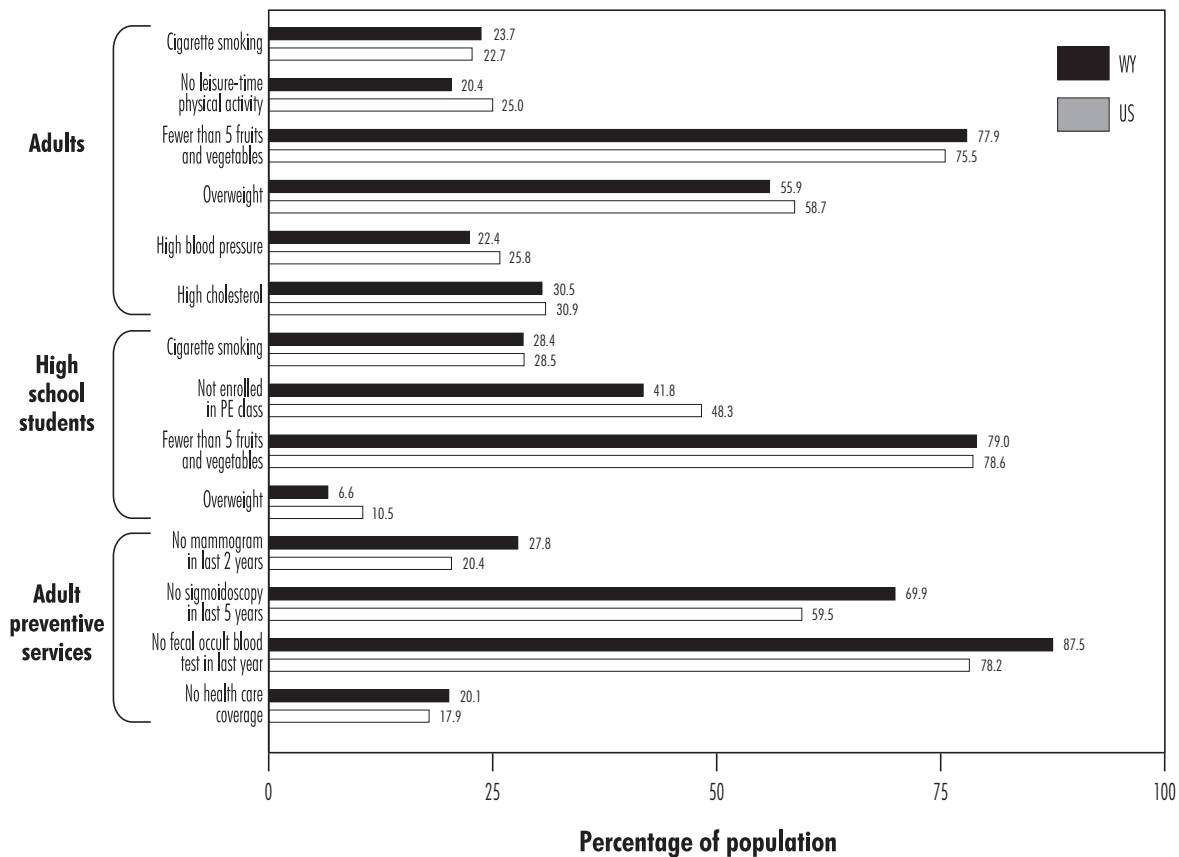
- Cigarette smoking was reported by 34% of Hispanic and 28% of white students in 2001.

- Fifty percent of female and 34% of male students were not enrolled in physical education class.
- Nine percent of male and 4% of female high school students were overweight.
- Seventy-nine percent of students ate fewer than five servings per day of fruits and vegetables during the 7 days preceding the survey.

Preventive Services

- Among women aged 50 years or older, 28% reported not having had a mammogram within the last 2 years.
- Of adults aged 50 years or older, 70% reported not having had a sigmoidoscopy or colonoscopy within the last 5 years.
- Among adults aged 50 years or older, 88% reported not having had a fecal occult blood test within the last year.
- Among adults aged 18–64, no health care coverage was reported by 28% of Hispanics and 18% of whites.

Risk Factors and Preventive Services, Wyoming Compared With United States



Source: CDC, Behavioral Risk Factor Surveillance System, 2002.
 CDC, Youth Risk Behavior Surveillance System, 2001.

Section V

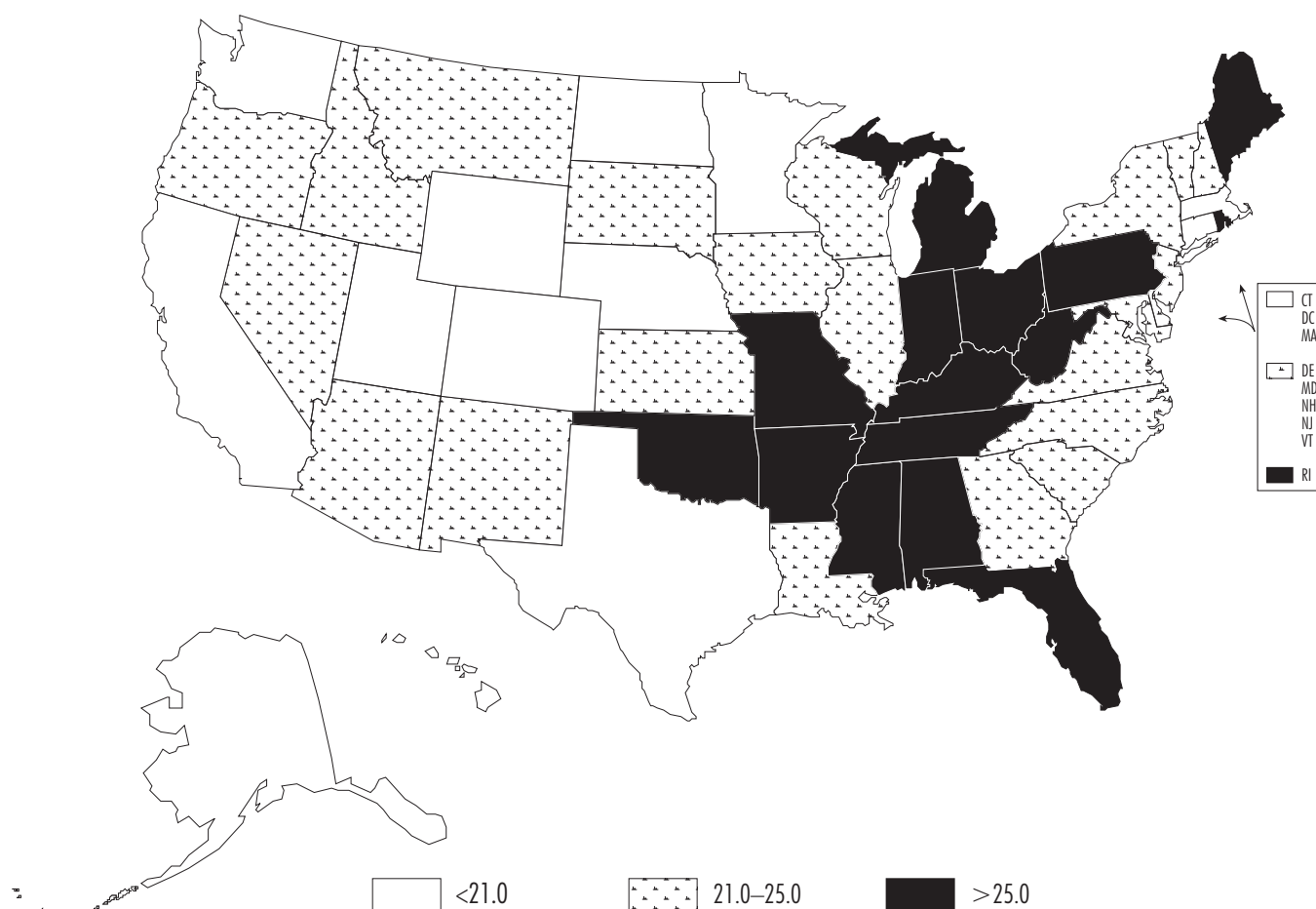
The Burden of Arthritis, United States

The Burden of Arthritis as a Cause of Disability

Arthritis and other rheumatic conditions are the leading cause of disability in the United States. They encompass more than 100 diseases that affect the joints, the tissues surrounding the joints, and other connective tissue. The pain and disability that accompany arthritis can be lessened through early diagnosis and appropriate management, including weight control, physical activity, and other self-management programs that increase people's ability to manage their condition.

- Doctor-diagnosed arthritis affects 49 million adults, or nearly one of every four Americans, making it one of the most common health conditions in the United States.
- Arthritis is the most common cause of disability in the United States. Over 8 million Americans are limited in some activity because of arthritis.
- Arthritis and its related disability will increase. In 2030, an estimated 71 million Americans will report doctor-diagnosed arthritis.
- In 1997, arthritis and other rheumatic conditions resulted in 36 million physician visits and 750,000 hospitalizations. The estimated total cost associated with arthritis (including medical care and lost productivity) exceeded \$86 billion.

Percentage of Adults Who Reported Doctor-Diagnosed Arthritis,* 2001



Source: CDC, Behavioral Risk Factor Surveillance System.

Note: Unlike the previous report, this report focuses on adults with self-reported, doctor-diagnosed arthritis. Previously, adults with either doctor-diagnosed arthritis or chronic joint symptoms were included in the heading of arthritis.

Number and Percentage of Adults Who Reported Doctor-Diagnosed Arthritis, by Age Group, 2001

State	Total		18–44 Years		45–64 Years		65+ Years	
	Number*	Percent	Number*	Percent	Number*	Percent	Number*	Percent
Alabama	1,012	30.2	209	12.3	409	40.0	386	64.7
Alaska	74	16.7	21	7.9	37	26.9	16	39.8
Arizona	906	23.6	183	9.3	327	29.8	384	55.8
Arkansas	549	27.3	117	11.9	196	32.1	233	57.2
California	4,720	18.8	844	6.2	1,988	26.2	1,888	50.0
Colorado	645	19.8	136	7.9	249	24.8	253	52.7
Connecticut	541	20.7	88	6.9	215	26.4	231	48.8
Delaware	140	23.4	26	8.4	59	32.9	52	50.1
District of Columbia	92	20.3	13	5.4	36	27.0	42	57.3
Florida	3,182	25.3	508	9.0	1,085	29.5	1,543	51.0
Georgia	1,419	23.1	302	9.0	618	33.0	486	54.7
Hawaii	109	11.8	17	3.6	45	15.8	45	28.9
Idaho	203	21.9	37	7.8	90	31.2	75	46.7
Illinois	2,119	22.8	381	8.0	867	30.3	868	54.0
Indiana	1,216	26.7	252	10.9	507	36.2	454	56.4
Iowa	463	21.1	67	6.2	185	28.3	207	45.9
Kansas	467	23.4	89	8.7	169	28.9	204	54.5
Kentucky	912	29.9	220	14.2	375	39.5	314	58.1
Louisiana	738	22.9	144	8.5	312	32.9	275	52.2
Maine	246	25.5	51	10.6	100	33.5	92	52.2
Maryland	864	21.5	155	7.4	399	31.1	302	50.3
Massachusetts	1,014	20.7	181	7.2	417	28.8	407	46.1
Michigan	2,116	28.6	466	12.3	876	38.5	760	60.3
Minnesota	736	20.2	155	8.2	302	26.7	278	44.6
Mississippi	535	26.0	117	10.7	215	36.0	203	56.5
Missouri	1,130	26.9	229	11.0	466	36.4	421	52.6
Montana	161	24.1	32	9.9	67	31.1	61	49.2
Nebraska	257	20.3	41	6.5	96	25.8	118	48.6
Nevada	326	21.2	72	9.1	139	27.5	116	46.6
New Hampshire	198	21.0	42	8.5	82	28.8	72	47.9
New Jersey	1,376	21.2	232	7.3	544	27.0	588	49.7
New Mexico	286	21.8	62	8.8	122	31.1	101	47.8
New York	3,270	22.5	508	7.0	1,363	30.8	1,345	52.0
North Carolina	1,445	23.3	299	9.4	598	31.4	536	50.9
North Dakota	99	20.9	20	8.3	33	24.3	45	49.4
Ohio	2,185	25.7	428	10.0	898	34.4	834	55.2
Oklahoma	692	26.9	135	10.4	275	35.2	277	57.4
Oregon	567	21.9	102	8.0	237	28.7	226	48.3
Pennsylvania	2,487	26.4	476	10.5	943	32.5	1,058	54.8
Rhode Island	211	26.0	46	11.2	78	33.6	83	52.5
South Carolina	722	24.0	146	9.2	302	33.5	261	53.0
South Dakota	121	22.1	23	8.5	43	27.3	53	48.6
Tennessee	1,148	26.4	234	10.6	498	36.1	412	53.9
Texas	3,007	19.7	543	6.5	1,270	28.3	1,178	51.4
Utah	291	19.7	62	7.4	127	29.3	101	50.6
Vermont	99	21.6	21	9.0	41	28.6	37	48.7
Virginia	1,240	22.9	255	8.9	525	31.7	443	53.2
Washington	908	20.5	165	7.2	379	27.4	360	49.6
West Virginia	424	30.5	91	13.9	180	40.2	150	53.6
Wisconsin	990	24.8	176	8.7	422	34.3	390	53.2
Wyoming	70	19.7	18	9.8	27	23.9	24	43.0
United States	48,728	23.0	9,242	8.5	19,833	30.8	19,289	52.3

*Number in 1,000's. Source: CDC, Behavioral Risk Factor Surveillance System Note: Unlike the previous report, this report focuses on adults with self-reported, doctor-diagnosed arthritis. Previously, adults with either doctor-diagnosed arthritis or chronic joint symptoms were included under the heading of arthritis.

Number and Percentage of Adults Who Reported Doctor-Diagnosed Arthritis, by Sex, Race, and Ethnicity,* 2001

State†	Women		Men		Non-Hispanic White*		Non-Hispanic Black*		Hispanic*	
	Number‡	Percent	Number‡	Percent	Number‡	Percent	Number‡	Percent	Number‡	Percent
Alabama	639	36.2	373	23.6	738	30.6	197	28.2	21	33.6
Alaska	45	20.9	30	12.9	53	17.2	2	18.5	1	5.5
Arizona	521	26.5	385	20.5	704	26.5	34	26.9	94	13.2
Arkansas	330	31.3	218	22.9	447	27.3	45	20.8	10	18.0
California	3,014	23.8	1,706	13.7	2,927	23.1	327	23.1	1,010	12.9
Colorado	370	22.3	276	17.3	540	21.6	21	21.6	55	11.5
Connecticut	347	25.4	194	15.6	466	22.3	27	17.4	26	12.0
Delaware	88	28.2	52	16.1	114	25.1	15	16.9	3	16.6
District of Columbia	58	23.7	34	16.3	24	16.8	61	25.9	2	5.6
Florida	1,991	30.3	1,192	19.8	2,390	28.2	246	22.0	415	17.8
Georgia	879	27.4	540	18.3	955	24.3	361	21.7	27	19.7
Hawaii	67	14.6	42	9.0	39	14.8	1	3.2	6	8.4
Idaho	118	25.1	84	18.5	185	22.0	—	—	7	17.5
Illinois	1,306	27.0	813	18.2	1,573	24.3	305	27.4	89	9.5
Indiana	749	31.5	467	21.5	1,081	27.6	67	25.4	20	11.3
Iowa	289	25.2	174	16.6	436	21.0	—	—	8	20.5
Kansas	276	26.8	190	19.7	414	23.8	17	24.5	14	14.0
Kentucky	543	34.0	369	25.3	829	30.5	48	23.9	10	24.0
Louisiana	473	27.9	265	17.3	470	23.4	195	22.5	20	21.7
Maine	148	29.7	97	21.0	227	25.1	—	—	—	—
Maryland	531	25.3	332	17.3	607	24.0	195	20.8	22	9.2
Massachusetts	659	25.6	355	15.3	897	22.0	29	17.1	52	13.7
Michigan	1,282	33.2	834	23.5	1,655	28.4	251	33.6	36	16.6
Minnesota	447	23.8	289	16.3	688	20.7	12	13.0	13	21.7
Mississippi	331	30.3	204	21.0	340	25.9	160	25.8	8	18.7
Missouri	680	30.8	450	22.5	994	27.8	62	19.0	13	19.8
Montana	101	29.7	60	18.3	143	23.9	—	—	5	30.7
Nebraska	156	23.8	101	16.7	241	21.5	6	21.7	6	6.9
Nevada	206	26.9	120	15.6	242	22.3	12	18.4	18	10.2
New Hampshire	118	24.3	80	17.6	188	21.4	—	—	3	14.7
New Jersey	874	25.7	502	16.2	1,048	24.0	148	21.4	113	13.5
New Mexico	170	25.2	116	18.2	163	25.8	5	21.1	95	18.1
New York	2,072	27.1	1,197	17.5	2,348	25.4	321	20.0	430	17.6
North Carolina	930	28.7	515	17.4	1,094	24.6	262	22.3	18	8.2
North Dakota	61	25.7	37	16.0	91	20.8	—	—	—	—
Ohio	1,291	28.9	894	22.2	1,909	26.2	140	21.0	53	22.8
Oklahoma	417	31.1	275	22.3	570	28.4	25	19.3	22	12.8
Oregon	355	26.6	213	16.9	504	23.2	—	—	18	9.0
Pennsylvania	1,542	31.0	945	21.2	2,111	26.5	190	27.2	59	21.3
Rhode Island	128	30.0	82	21.6	182	27.5	9	28.5	11	14.2
South Carolina	439	27.7	283	19.7	503	24.6	163	22.4	17	15.9
South Dakota	69	24.4	52	19.5	112	22.1	—	—	3	28.2
Tennessee	683	29.9	465	22.5	972	27.6	128	21.1	18	18.7
Texas	1,926	24.6	1,081	14.6	2,066	24.2	254	19.2	493	11.2
Utah	186	24.6	105	14.6	269	20.5	—	—	13	15.6
Vermont	61	25.5	39	17.4	95	21.7	—	—	—	—
Virginia	786	28.1	454	17.3	938	23.8	178	22.5	21	9.7
Washington	568	25.1	340	15.7	802	21.4	15	19.6	23	12.3
West Virginia	251	34.3	172	26.2	370	29.7	8	28.2	—	—
Wisconsin	557	27.0	433	22.4	876	24.6	36	28.7	23	24.4
Wyoming	40	22.1	30	17.2	65	20.0	—	—	2	16.7
United States	30,171	27.5	18,556	18.2	37,694	25.0	4,592	22.8	3,461	13.9

*Race and ethnicity were combined to form 3 groups: white non-Hispanic, black non-Hispanic, and Hispanic. Respondents who did not fall into one of the three groups were excluded from the race and ethnicity analysis. †A dash indicates too few respondents (< 50) to calculate a reliable estimate. ‡Number in 1,000's. Source: CDC, Behavioral Risk Factor Surveillance System, 2001.

Note: Unlike the previous report, this report focuses on adults with self-reported, doctor-diagnosed arthritis. Previously, adults with either doctor-diagnosed arthritis or chronic joint symptoms were included under the heading of arthritis.

Proportion of National Arthritis* Cases and Estimated Direct, Indirect, and Total Costs† of Arthritis and Other Rheumatic Conditions, by State, 1997

State	% national cases	Direct	Indirect	Total‡
Alabama	2.08	\$1,064	\$730	\$1,794
Alaska	0.15	77	53	129
Arizona	1.86	951	653	1,604
Arkansas	1.13	578	397	975
California	9.69	4,955	3,402	8,357
Colorado	1.32	675	463	1,138
Connecticut	1.11	568	390	957
Delaware	0.29	148	102	250
District of Columbia	0.19	97	67	164
Florida	6.53	3,339	2,293	5,632
Georgia	2.91	1,488	1,022	2,510
Hawaii	0.22	112	77	190
Idaho	0.42	215	147	362
Illinois	4.35	2,224	1,527	3,752
Indiana	2.50	1,278	878	2,156
Iowa	0.95	486	334	819
Kansas	0.96	491	337	828
Kentucky	1.87	956	657	1,613
Louisiana	1.51	772	530	1,302
Maine	0.50	256	176	431
Maryland	1.77	905	622	1,527
Massachusetts	2.08	1,064	730	1,794
Michigan	4.34	2,219	1,524	3,743
Minnesota	1.51	772	530	1,302
Mississippi	1.10	562	386	949
Missouri	2.32	1,186	815	2,001
Montana	0.33	169	116	285
Nebraska	0.53	271	186	457
Nevada	0.67	343	235	578
New Hampshire	0.41	210	144	354
New Jersey	2.82	1,442	990	2,432
New Mexico	0.59	302	207	509
New York	6.71	3,431	2,356	5,787
North Carolina	2.96	1,514	1,039	2,553
North Dakota	0.20	102	70	172
Ohio	4.49	2,296	1,577	3,872
Oklahoma	1.42	726	499	1,225
Oregon	1.16	593	407	1,000
Pennsylvania	5.10	2,608	1,791	4,399
Rhode Island	0.43	220	151	371
South Carolina	1.48	757	520	1,276
South Dakota	0.25	128	88	216
Tennessee	2.36	1,207	829	2,035
Texas	6.17	3,155	2,166	5,321
Utah	0.60	307	211	517
Vermont	0.20	102	70	172
Virginia	2.54	1,299	892	2,191
Washington	1.86	951	653	1,604
West Virginia	0.87	445	305	750
Wisconsin	2.03	1,038	713	1,751
Wyoming	0.14	72	49	121
United States §	100	\$51,132	\$35,113	\$86,245
State Median	—	\$726	\$499	\$1,225

* Doctor-diagnosed arthritis cases. †In millions of dollars. Direct costs are medical care expenditures. Indirect costs are lost earnings. Total costs are the sum of direct and indirect costs. ‡State-specific direct and indirect values do not add to state total because of rounding. § State-specific values do not add to national total because of rounding. Source: CDC. Direct and indirect costs of arthritis and other rheumatic conditions — United States, 1997. MMWR 2003;52(46):1124-1127. (Note: MMWR will publish an updated version early in 2004.)

Section VI

Appendix

CDC's Chronic Disease Prevention and Health Promotion Grants to States

National Center for Chronic Disease Prevention and Health Promotion, FY 2003

State	Chronic Diseases		Associated Risk Factors		Surveillance			School Health Programs	Oral Health	Comprehensive Cancer Control		
	Arthritis	Heart Disease & Stroke	Breast & Cervical Cancer	Diabetes	Tobacco	Nutrition & Physical Activity	Cancer Registry				Adult Risk Behaviors (BRFSS*)	Youth Risk Behaviors (YRBSS†)
Alabama	●	●	●	●	●	○	●	●	■	○	○	○
Alaska	●	●	●	●	●	○	●	●	□	○	●	○
Arizona	●	○	●	●	●	●	●	●	□	○	○	○
Arkansas	●	●	●	●	●	○	●	●	■	●	●	○
California	●	○	●	●	●	○	●	●	□	●	○	○
Colorado	●	●	●	●	●	●	●	●	■	●	●	○
Connecticut	●	●	●	●	○	○	○	○	□	○	○	○
Delaware	○	○	●	●	●	○	●	●	■	○	○	○
Dist of Columbia	○	●	●	●	●	○	●	●	□	○	○	○
Florida	●	●	●	●	●	●	●	●	■	●	○	○
Georgia	●	●	●	●	●	●	●	●	■	○	○	○
Hawaii	○	○	●	●	●	○	○	○	■	○	○	○
Idaho	●	○	●	●	●	○	○	○	■	○	○	○
Illinois	●	○	●	●	●	●	●	●	■	○	○	○
Indiana	●	○	●	●	●	○	○	○	■	○	○	○
Iowa	●	○	●	●	●	○	○	○	■	○	○	○
Kansas	●	○	●	●	●	○	○	○	■	○	○	○

*BRFSS, Behavioral Risk Factor Surveillance System

† YRBSS, Youth Risk Behavior Surveillance System

● Funding for Basic Implementation ● Funding for Capacity Building

○ No CDC/NCCDPHP Funding

■ Conducted Survey in 2001

□ Did Not Conduct Survey in 2001

CDC's Chronic Disease Prevention and Health Promotion Grants to States (Continued)

State	Chronic Diseases			Associated Risk Factors		Surveillance			School Health Programs	Oral Health	Comprehensive Cancer Control	
	Arthritis	Heart Disease & Stroke	Breast & Cervical Cancer	Diabetes	Tobacco	Nutrition & Physical Activity	Cancer Registry	Adult Risk Behaviors (BRFSS*)				Youth Risk Behaviors (YRBSS†)
Kentucky	●	●	●	●	●	●	●	●	■	●	○	●
Louisiana	○	●	●	○	●	○	●	●	■	○	○	●
Maine	○	●	●	○	●	●	●	●	■	●	○	●
Maryland	●	○	●	○	●	●	●	●	□	○	○	●
Massachusetts	○	●	●	●	●	●	●	●	■	●	○	●
Michigan	○	●	●	●	●	○	●	●	■	●	●	●
Minnesota	○	●	●	●	●	○	●	●	□	○	○	●
Mississippi	○	●	●	○	●	○	●	●	■	○	○	●
Missouri	○	●	●	●	●	●	●	●	■	○	○	●
Montana	○	●	●	●	●	○	●	●	■	○	○	○
Nebraska	○	●	●	○	●	○	●	●	■	○	○	●
Nevada	○	●	●	○	●	○	●	●	■	○	●	●
New Hampshire	○	●	●	○	●	○	●	●	■	○	○	●
New Jersey	○	●	●	○	●	○	●	●	■	○	○	○
New Mexico	○	●	●	○	●	○	●	●	□	○	○	●
New York	○	●	●	○	●	○	●	●	■	●	●	●
North Carolina	○	●	●	○	●	○	●	●	■	○	○	●
North Dakota	○	●	●	○	●	○	●	●	■	○	●	●

* BRFSS, Behavioral Risk Factor Surveillance System

† YRBSS, Youth Risk Behavior Surveillance System

● Funding for Basic Implementation ● Funding for Capacity Building

○ No CDC/NCCDPHP Funding

■ Conducted Survey in 2001

□ Did Not Conduct Survey in 2001

CDC's Chronic Disease Prevention and Health Promotion Grants to States (Continued)

State	Chronic Diseases			Associated Risk Factors		Surveillance			School Health Programs	Oral Health	Comprehensive Cancer Control	
	Arthritis	Heart Disease & Stroke	Breast & Cervical Cancer	Diabetes	Tobacco	Nutrition & Physical Activity	Cancer Registry	Adult Risk Behaviors (BRFSS*)				Youth Risk Behaviors (YRBSS†)
Ohio	●	●	●	●	●	○	●	●	□	○	○	○
Oklahoma	●	●	●	○	●	○	●	●	□	○	○	○
Oregon	●	●	●	●	●	●	●	●	■	●	●	●
Pennsylvania	●	○	●	●	●	●	●	●	□	○	○	○
Rhode Island	●	○	●	●	●	○	●	●	■	●	●	○
South Carolina	●	●	●	●	●	●	●	●	■	●	●	○
South Dakota	○	○	●	○	●	○	●	●	■	●	○	○
Tennessee	●	●	●	○	●	○	●	●	■	●	○	○
Texas	●	●	●	●	●	●	●	●	■	○	○	○
Utah	●	●	●	●	●	○	○	●	■	○	○	○
Vermont	●	○	●	○	●	○	●	●	■	●	○	○
Virginia	●	●	●	○	●	○	●	●	□	○	○	○
Washington	○	○	●	●	●	●	●	●	□	○	○	○
West Virginia	○	●	●	●	●	○	●	●	■	●	○	○
Wisconsin	●	●	●	○	●	●	●	●	■	●	○	○
Wyoming	○	○	●	○	●	○	●	●	■	○	○	○
Total Basic Implementation	0	11	51	24	51	3	44	51	38	0	0	0

*BRFSS, Behavioral Risk Factor Surveillance System

†YRBSS, Youth Risk Behavior Surveillance System

● Funding for Basic Implementation ○ Funding for Capacity Building

○ No CDC/ANCDPHP Funding

■ Conducted Survey in 2001

□ Did Not Conduct Survey in 2001

Background Information on Death Rates

All mortality data for 2001 were obtained from the National Vital Statistics System (NVSS), which contains information from all death certificates filed in the 50 states and the District of Columbia. Mortality data from the NVSS are compiled by CDC's National Center for Health Statistics (NCHS) in cooperation with state vital statistics offices and processed in accordance with regulations from the World Health Organization. These regulations specify that member nations use the current International Classification of Diseases (ICD) to classify causes of death. The Tenth Revision of the ICD (ICD-10) is currently in use.

Death rates in this report are presented by state, sex, race/ethnicity, and cause-of-death category. Death rates are based on the decedent's state of residence and exclude the deaths of nonresidents of the United States. Population data (denominators for death rates) were obtained from the vintage 2002 postcensal estimates for the year 2001. (Note: The race-specific postcensal bridged estimates are published not by the Census Survey but by NCHS.) Thus, death rates in this publication may differ from those in NCHS publications using 2001 vintage estimates. Death rates for a particular racial/ethnic group are not presented if there were 20 or fewer deaths in that group.

In this publication, racial ethnic categories are defined as white, black, Asian/Pacific Islander, American Indian/Alaska Native, and Hispanic. According to definitions from the Office of Management and Budget, people of Hispanic origin can be of any race, and conversely, people listed as white, black, Asian/Pacific Islander, or American Indian/Alaska Native can be of Hispanic or non-Hispanic origin. More information on race/ethnicity standards and the OMB directives may be obtained from the Federal Register (Volume 62, No. 210, October 30, 1997) or the OMB Web site: www.whitehouse.gov/omb/fedreg/ombdir15.html.

Cause-of-death categories are classified by ICD-10. Death rates in this publication may differ from rates reported in previous publications because of changes to the titles and content of some cause-of-death categories and changes in coding rules used to select the underlying cause of death. More information

on ICD-10 codes may be obtained from the NCHS Web site: <http://www.cdc.gov/nchs>.

All death rates included in this publication are age-adjusted. Age-adjusted rates are more appropriate for making comparisons between groups or over time because, unlike crude rates, they take into account the effect of different or changing age distributions in different populations. Age-adjusted death rates are weighted averages of the age-specific death rates where the weights correspond to a standard population age distribution

Age-adjusted rates should not be compared with crude rates or with rates adjusted to a different standard population. For example, rates adjusted to the 1940 or 1970 U.S. standard populations should not be compared with rates adjusted to the 2000 US standard population. The magnitude of age-adjusted rates typically depends on the standard population used. Additional information on age-adjusted death rates and the 2000 U.S. standard population may be found at the NCHS Web site: <http://www.cdc.gov/nchs>.

Differences in Death Rates in Different Publications

The state-specific numbers of deaths and the mortality rates due to a specific cause in this publication may differ from those published by the states or by other groups for the following reasons:

- a) The cut-off dates for accepting vital statistics records into the annual file for producing statistics may differ between states.
- b) The interstate exchange program, through which states receive data on events that involved residents but occurred in other states, might not include all records.
- c) The standard U.S. population used for age adjustment may not have been the 2000 standard population used here.
- d) Race/ethnicity may have been classified differently. Some states may have implemented the 1997 OMB-15 directive, the standard for collecting and publishing data on race and ethnicity, while other states may still be using the 1977 OMB-15 directive.

Cause-of-Death Classifications

The following ICD-10 codes are used in this report:

Diseases of the heart	I00-I09, I11, I13, I20-I51
Stroke	I60-I69
All cancers	C00-C97
Breast cancer, women	C50
Colorectal cancer	C18-C20, C26.0
Lung cancer	C34
Unintentional injuries	V01-X59, Y85-Y86
Chronic lower respiratory disease	J40-J47
Pneumonia and influenza	J10-J18
Diabetes mellitus	E10-E14
Alzheimer's disease	G30
Nephritis and nephrosis	N00-N07, N17-N19, N25-N27

Surveillance of Behavioral Risk Factors, Chronic Conditions, and Preventive Services Among Adults

Most of the prevalences of behavioral risk factors, chronic conditions, and use of preventive services among adults are state-based estimates from CDC's 2002 Behavioral Risk Factor Surveillance System (BRFSS). The exceptions are the estimates for hypertension and high cholesterol, which are based on 2001 BRFSS data.

Initiated in 1981 and developed in conjunction with the states, the BRFSS now enables all states to gather information on the prevalence of behavioral risk factors and other health-related measures in their individual jurisdictions. The BRFSS is an

annual, state-based, random-digit-dialed telephone survey of health-related behavior. Each participating state selects a probability sample of its noninstitutionalized civilian adult population (aged ≥ 18 years) who have telephones. The data are reported by sex and race/ethnicity (white, black, Asian/Pacific Islander, American Indian/Alaska Native, Hispanic, and multiracial origin). The design of the BRFSS allows for comparisons both between states and between individual states and the nation.

Missing responses, respondents who refused to answer, or respondents who said they did not know the answer are excluded from the denominator in the prevalence calculations except for the arthritis estimates. Estimates are not provided for a racial or ethnic category if the denominator had fewer than 50 respondents because the estimate would be unreliable. The *average value* for a risk factor, chronic condition, or preventive service is used as a prevalence estimate for the United States as a whole; in addition, it is used to provide an estimate for all the respondents within the sex and race/ethnicity categories.

The methods used for calculating the results are consistent with the methods used in previous editions of this publication.

In this publication, neither Puerto Rico nor the five territories are included in the overall prevalence estimates for the United States.

The following questions from the BRFSS were included in this report.

Chronic Conditions:

- About how much do you weigh without shoes?
- About how tall are you without shoes?
- Have you ever been told by a doctor, nurse, or other health professional that you have high blood pressure?
- Have you ever been told by a doctor, nurse, or other health professional that your blood cholesterol is high?
- Have you ever been told by a doctor that you have diabetes?
- Have you ever been told by a doctor that you have arthritis?

For adults, overweight in this report is defined by the 1998

guidelines released by the National Institutes of Health's National Heart, Lung, and Blood Institute (NHLBI) for identifying overweight and obese adults. Overweight is based on self-reported height in inches and weight in pounds. These values are converted into height in meters and weight in kilograms and used to calculate a body mass index (BMI), the number of kilograms divided by the number of meters squared ($BMI = kg/m^2$). BMI represents a height-to-weight ratio. According to the 1998 guidelines, people with BMI values of 25 or greater are overweight, and those with BMI values of 30 or greater are obese.

Adults with diabetes are defined as those having doctor-diagnosed diabetes. Women with diabetes diagnosed only during pregnancy are excluded from the numerator in the prevalence calculation. Estimates are based on data from 2001 and 2002 to obtain an adequate sample of people with diabetes.

In this report, arthritis is defined as self-reported doctor-diagnosed arthritis among adults. In previous publications, the definition of arthritis included both doctor-diagnosed arthritis and self-reported chronic joint symptoms. For calculating percentages, or prevalence estimates, the numerator is the number of respondents with doctor-diagnosed arthritis, and the denominator is the total number of respondents, including those who for whatever reason did not answer the question. The BRFSS program generally excludes such missing responses from the denominator in prevalence calculations. Therefore, arthritis prevalence estimates in this publication will be somewhat lower than those in BRFSS publications. Prevalence estimates are not reported for any racial and ethnic groups with fewer than 50 respondents in the denominator because these estimates would be unreliable.

Adult Risk Behaviors:

- Have you smoked at least 100 cigarettes in your entire life?
- Do you smoke cigarettes everyday, some days, or not at all?
- During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?
- How often do you drink fruit juices, such as orange, grapefruit, or tomato?

- Not counting juice, how often do you eat fruit?
- How often do you eat green salad?
- How often do you eat potatoes, not including french fries, fried potatoes, or potato chips?
- How often do you eat carrots?
- Not counting carrots, potatoes, or salad, how many servings of vegetables do you usually eat?

Preventive Services:

A mammogram is an x-ray of each breast to look for breast cancer. Have you ever had a mammogram? How long has it been since you had your last mammogram?

A blood stool test is a test that may use a special kit at home to determine whether the stool contains blood. Have you ever had this test using a home kit? How long has it been since you had your last blood stool test using a home kit?

Sigmoidoscopy or colonoscopy are exams in which a tube is inserted in the rectum to view the bowel for signs of cancer and other health problems. Have you ever had either of these exams?

How long has it been since you had your last sigmoidoscopy or colonoscopy?

Do you have any kind of health care coverage, including health insurance, prepaid plans such as HMOs, or government plans such as Medicare?

Limitations and Caveats:

To be consistent with estimates in BRFSS publications, prevalence estimates based on BRFSS data are not age adjusted.

More information about the BRFSS is available at CDC's Web site, located at www.cdc.gov/nccdphp/brfss.

Surveillance of Behavioral Risk Factors and Chronic Conditions Among Youth

The Youth Risk Behavior Survey (YRBS) is part of CDC's Youth Risk Behavior Surveillance System (YRBSS). Since 1990, the YRBSS has provided vital information on health-related practices among U.S. high school students. This information enables states and school jurisdictions to better target efforts to prevent health risk behaviors among young people. The data in this report are from the national and state 2001 YRBSS surveys. Students in grades 9–12 participated in the surveys, which were conducted by CDC and state departments of education and health. This report summarizes selected results from the national survey and 35 state surveys. Of the 35 states that reported results, 13 did not have an overall response rate of at least 60%. These states are Colorado, the District of Columbia, Hawaii, Illinois, Indiana, Iowa, Kentucky, Louisiana, Nebraska, New Hampshire, New York, South Carolina, and Tennessee. The data from these states are unweighted and thus apply only to the students participating in the survey. The Illinois survey excludes students from Chicago; the Louisiana survey excludes students from New Orleans; and the New York survey excludes students from New York City. Data were not available for the remaining 16 states. YRBS data are reported by sex and by race/ethnicity (white, black, Hispanic, other).

The following questions from the YRBS were used to determine the prevalence of the risk behaviors among high school students included in this report:

- During the past 30 days, on how many days did you smoke cigarettes?
- In an average week when you are in school, on how many days do you go to physical education (PE) classes?
- During the past 7 days, how many times did you drink 100% fruit juices, such as orange juice, apple juice, or grape juice?
- During the past 7 days, how many times did you eat fruit?
- During the past 7 days, how many times did you eat green salad?
- During the past 7 days, how many times did you eat potatoes?
- During the past 7 days, how many times did you eat carrots?

- During the past 7 days, how many times did you eat other vegetables?
- How tall are you without your shoes on?
- How much do you weigh without your shoes on?

For the YRBS, overweight is defined as having a body mass index (BMI) greater than or equal to the 95th percentile by age and sex. The BMI values in the following table represent the 95th percentile for each age:

BMI Reference Data for Overweight

Age	BMI	
	Males	Females
≤9	21.58	22.35
10	22.64	23.52
11	23.69	24.66
12	24.67	25.74
13	25.59	26.75
14	26.42	27.67
15	27.18	28.49
16	27.88	29.25
17	28.58	29.95
18	29.30	30.64

Source: Kuczmarski RJ, Ogden CL, Grummer-Strawn LM, et al. CDC growth charts, United States. *Advance Data from Vital and Health Statistics*; no.314. Hyattsville, MD: National Center for Health Statistics, 2000.

Limitations and Caveats:

- These data apply only to youth who attend school and, therefore, are not representative of all people in this age group.
- Although the survey questions demonstrate good test-retest reliability, the extent of under-reporting and over-reporting of behaviors cannot be determined.
- Prevalence estimates based on YRBS data are not age-adjusted. Generally, YRBS data are not age-adjusted because the age range for high school students varies little from state to state.

For more information about the YRBSS, call (888) 231-6405 or visit the Web site, located at www.cdc.gov/yrebs.

For More Information:

For questions related to the *2001 death rates*, please contact Ralph Donehoo, M.P.H., by e-mail at rsd1@cdc.gov, telephone at (770) 488-5441, or FAX at (770) 488-5441.

For questions related to *BRFSS prevalence estimates or for general questions about the BRFSS data*, contact Luann Rhodes, Ph.D., by e-mail at lgr5@cdc.gov or by telephone at (404) 498-2302.

For questions related to *prevalence estimates from the YRBSS*, contact Joanne Grunbaum, Ed.D., by telephone at (770) 488-6182 or by FAX at (770) 488-6156.

For questions related to *2001 prevalence estimates for arthritis*, contact Chad Helmick, M.D., by e-mail at cgh1@cdc.gov or telephone at (770) 488-5486.

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Web sites with expanded information related to this report:

General Information

CDC's main Web site <http://www.cdc.gov>

Chronic Diseases and Their Risk Factors

CDC's National Center for Chronic Disease Prevention and Health Promotion <http://www.cdc.gov/nccdphp>

Arthritis <http://www.cdc.gov/nccdphp/arthritis/>

Arthritis Foundation <http://www.arthritis.org>

American College of Rheumatology <http://www.rheumatology.org>
(Information from the medical specialists who deal with arthritis)

Cancer <http://www.cdc.gov/cancer/>

American Cancer Society <http://www.cancer.org>

Diabetes <http://www.cdc.gov/diabetes/>

American Diabetes Association <http://www.diabetes.org>

Heart disease and stroke <http://www.cdc.gov/cvh>

American Heart Association <http://www.americanheart.org>

National Institutes of Health, National Heart, Lung and Blood Institute <http://www.nhlbi.nih.gov>

American Stroke Association <http://www.strokeassociation.org>

National Stroke Association <http://www.stroke.org>

Brain Attack Coalition <http://www.stroke-site.org>

Centers for Medicare and Medicaid Services <http://www.cms.hhs.gov>

National Institute of Neurological Disorders and Stroke <http://www.ninds.nih.gov>

Nutrition, physical activity, overweight, and obesity <http://www.cdc.gov/nccdphp/dnpa>

The Surgeon General's Call to Action To Prevent
and Decrease Overweight and Obesity

<http://www.surgeongeneral.gov/topics/obesity/>

State-level estimates of annual
medical expenditures attributable to obesity

<http://www.obesityresearch.org/cgi/content/full/12/1/18>

Tobacco

<http://www.cdc.gov/tobacco>

Youth-related activities

<http://www.cdc.gov/nccdphp/dash>

Data and Statistics

National Center for Health Statistics
CDC's Behavior Risk Factor

<http://www.cdc.gov/nchs>

Surveillance System

<http://www.cdc.gov/brfss>

CDC's Youth Risk Behavior Survey

<http://www.cdc.gov/nccdphp/yrebs/>



For more information, please contact the
 Centers for Disease Control and Prevention,
 National Center for Chronic Disease Prevention and Health Promotion, Mail Stop K-40,
 4770 Buford Highway NE, Atlanta, GA 30341-3717
 (770) 488-5706
ccdinfo@cdc.gov
<http://www.cdc.gov/nccdphp>