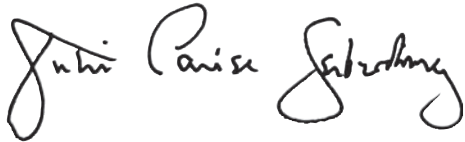


A Message from the Director of CDC

As the nation's prevention agency, the Centers for Disease Control and Prevention (CDC) is committed to reducing the burden of heart disease and stroke, which are the first and third leading causes of death and major contributors to disability in the United States. These two cardiovascular diseases are largely preventable, and targeted public health efforts can help reduce their impact. To meet this challenge, CDC works to monitor temporal and geographic trends in heart disease and stroke rates among different racial and ethnic groups, to strengthen the delivery of primary and secondary preventive health services to all such groups, and to implement policy changes that support the alleviation of disparities among all U.S. residents.

Among American Indians and Alaska Natives, heart disease and stroke are the first and sixth leading causes of death. I am pleased to provide you with the *Atlas of Heart Disease and Stroke Among American Indians and Alaska Natives*, which presents the mortality rates and distribution of common risk factors for these diseases for this population in geographic units that allow communities to see where they stand. This information is essential to helping health professionals and policy makers at local, state, and national levels identify populations at greatest risk for cardiovascular disease and in greatest need of prevention efforts. This atlas provides county-level maps of heart disease and stroke mortality, as well as state maps of the geographic patterns of common risk factors. The magnitude of the burden of these risk factors also is compared for American Indians and Alaska Natives, Asians and Pacific Islanders, blacks, Hispanics, and whites. The comprehensive information provided in this atlas will allow health officials to tailor their prevention efforts to specific communities as needed.

This publication is the fourth in a series of CDC atlases related to cardiovascular disease. However, it is the first to focus on geographic patterns of heart disease and stroke mortality and risk factors for a specific racial/ethnic group in the United States. I encourage you to use these data to improve the delivery of preventive health services and to create heart-healthy and stroke-free living and working environments for all American Indians and Alaska Natives.

A handwritten signature in black ink that reads "Julie Louis Gerberding". The signature is written in a cursive, flowing style.

Julie Louis Gerberding, MD, MPH
Director
Centers for Disease Control and Prevention

A Message from the Director of IHS

The Indian Health Service (IHS), an agency of the U.S. Department of Health and Human Services (HHS), is the principal federal health care provider and advocate for the health of American Indians and Alaska Natives. Employing a community-based system of care, the IHS is the primary source of personal and public health care services for the majority of the nation's estimated 2.4 million American Indians and Alaska Natives. The IHS is the only source of care for the many American Indian and Alaska Native people who live on or near a reservation in remote and poverty-stricken areas of the country where other sources of health care are less available.

Heart disease has become the leading cause of death among American Indians and Alaska Natives, and stroke is the sixth leading cause of death. The incidence of coronary heart disease among American Indians and Alaska Natives occurs at rates almost double that of non-Indian communities. In addition to the higher rates of cardiovascular disease compared with the general U.S. population, the burden of premature cardiovascular disease among the American Indian and Alaska Native population also appears greater than for other racial and ethnic populations in the United States.

The *Atlas of Heart Disease and Stroke Among American Indians and Alaska Natives* provides insights into the geographic disparities in heart disease and stroke experienced by American Indians and Alaska Natives. Health information contained in publications such as this will support efforts at the community level—developed by the community and focused on the individual and the community as a whole—in conjunction with the support and collaborative efforts of public health institutions, federal and state agencies, universities, and service organizations, to eliminate cardiovascular disease among American Indians and Alaska Natives.

The *Atlas of Heart Disease and Stroke Among American Indians and Alaska Natives* provides information to assist in the successful implementation of efforts to reach the two overarching goals of *Healthy People 2010*, which are “. . . to increase the quality and years of healthy life and to eliminate health disparities,” and to support the successful implementation of HHS's Steps to a HealthierUS Initiative. This publication is an important and significant step toward these goals.



Charles W. Grim, DDS, MHSA
Assistant Surgeon General
Director, Indian Health Service

I am pleased to present the *Atlas of Heart Disease and Stroke Among American Indians and Alaska Natives*. The maps in this atlas highlight the great diversity—in culture, language, history, and the burden of heart disease and stroke—that exists among American Indian and Alaska Native populations of the United States.

This landmark document supports the elimination of health disparities, one of the two overarching goals of *Healthy People 2010*, and addresses the important need to reduce the risk for heart disease and stroke among American Indians and Alaska Natives. The maps in this atlas present county-by-county heart disease and stroke mortality rates, as well as state-specific prevalences of eight major risk factors for heart disease and stroke. Public health professionals at local, state, and national levels will be able to use this information to tailor prevention resources to the populations of American Indians and Alaska Natives who need additional services the most.

Mortality trends for heart disease and stroke indicate that the rate of decline among American Indians and Alaska Natives has been relatively slow since the early 1970s. This observation is in stark contrast to the large declines in heart disease and stroke mortality reported for the total U.S. population during the same period. These alarming trends underscore the importance of enhancing our efforts to support innovative, community-based strategies for reducing the risk for heart disease and stroke among American Indians and Alaska Natives. We can expect to achieve the greatest cardiovascular health benefits through prevention. The *Atlas of Heart Disease and Stroke Among American Indians and Alaska Natives* indicates where prevention programs and policies are most needed and can have the greatest benefit.

We hope that you will find this publication to be a valuable resource as you design programs and policies to prevent heart disease and stroke in your communities.



Darwin R. Labarthe, MD, MPH, PhD
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Centers for Disease Control and Prevention