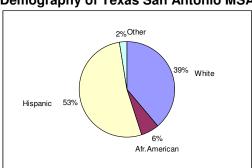
Texas Cardiovascular Health & Wellness Program **Texas Department of State Health Services**

Cardiovascular Health Facts 2001-2005

Texas Metropolitan Area San Antonio MSA



Demography of Texas San Antonio MSA in 2005



Demograph	nics			
Age	Total	Males	Females	Percent
0-17	510,624	260,898	249,726	27.1
18-29	337,891	171,676	166,215	18.0
30-34	130,697	64,535	66,162	6.9
35-64	699,872	340,112	359,760	37.2
65+	202,550	85,856	116,694	10.8
Total	1,881,634	923,077	958,557	100.0

Prevalence of Cardiovascular Disease(CVD) and Stroke Among Adults¹ (18+ years) 2005

	CVD		Heart Disease		Stroke	
	Estimated Cases	%	Estimated Cases	%	Estimated Cases	%
Total	78,148	5.7	63,066	4.6	23,307	1.7
Male	43,042	6.5	38,406	5.8	9,933	1.5
Female	35,442	5.0	24,100	3.4	12,759	1.8
White	42,590	7.4	34,532	6.0	13,237	2.3
African American	-	-	-	-	-	-
Hispanic	23,021	3.7	13,542	2.7	7,448	1.1

CVD and Stroke Age-adjusted Mortality Rates² (per 100,000) 2001-2004

CVD			Heart Disease		Stroke	
	Estimated Cases	Rates	Estimated Cases	Rates	Estimated Cases	Rates
Total	18,878	307.1	10,655	173.5	3,612	59.1
Male	8,960	350.7	5,416	212.5	1,490	59.4
Female	9,918	217.7	5,239	143.6	2,122	58.1
White	11,026	303.5	6,108	167.8	2,038	55.8
African American	1,447	465.6	776	253.6	301	99.6
Hispanic	6,301	295.3	3,723	176.8	1,242	58.5

Hospital Discharges 2005		Texas EMS/Trauma Registry Data ⁴ 2003 for PHR 8				
	Charges (\$)		TOMAS ENTENT	Time (in Minutes) for CVD	Time (in Minutes) for Stroke	
Ischemic Heart Disease	\$422,856,680	Response Time = Time - Time EMS	*	8.4	8.5	
Hemorrhagic Stroke	\$29,019,698	Scene Time = (Tim Scene – Time EMS		20.8	21.1	
Ischemic Stroke	\$71,424,988	Transport Time = Departed Scene - Arrived at Destina	-`Time EMS	13.4	13.1	
Congestive Heart Failure	\$167,538,720	Delivery Time = (C - Time EMS Arrive		42.0	42.3	

¹²⁰⁰⁵ Texas Behavioral Risk Factor Surveillance System, Statewide BRFSS Survey, for Respondents 18 years and older who report that they have been diagnosed as having had a Heart Attack, Myocardial Infarction, Angina, Coronary Heart Disease, or Stroke.

- Calls received during 2003
- Suspected Illness Types include Cardiac Arrest, Cardiac Rhythm Disturbance, and Chest Pain/Discomfort
 Medical-related calls only (i.e. calls exclusively related to trauma were excluded)
- 911 calls only (no inter-facility transfers)
- Texas residents only

²1999-2004 Texas Department of State Health Services Vital Statistics. Mortality due to CVD was defined as the (ICD-10 Code I00-I99) cause of death. 2004 mortality data is still preliminary and may

³ 2003 Texas Health Care Information Council, Inpatient Hospital Discharge Public Use File, for persons all ages. Ischemic heart disease (ICD-9 Code 410-414); Hemorrhagic Stroke (ICD-9 Code 430-432); Ischemic Stroke (ICD-9 Code 436-438,433,434); Congestive Heart Failure (ICD-9 Code 428).

⁴ Texas EMS/Trauma Registry Data Selected in 2003. the selection criteria as:

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CVD Risk Facto	or in 2005				
Diabetes	Estimated Cases	Percent	High Blood Cholesterol	Estimated Cases	Percent
Total	139,843	10.2	Total	444,207	32.4
Gender			Gender		
Male	76,813	11.6	Male	235,736	35.6
Female	62,377	8.8	Female	206,979	29.2
Current Smoker	Estimated Cases	Percent	High Blood Pressure	Estimated Cases	Percent
Total	230,330	16.9	Total	320,816	23.4
Gender			Gender		
Male	123,827	18.7	Male	166,207	25.1
Female	107,033	15.1	Female	153,816	21.7
Obesity	Estimated Cases	Percent	No Leisure Time Physical Activity	Estimated Cases	Percent
Total	400,335	29.2	Total	318,074	23.2
Gender			Gender		
Male	196,667	29.7	Male	130,449	19.7
Female	202,726	28.6	Female	188,549	26.6
Recognition of	CVD Symptoms ¹				
Heart Attack		%	Stroke		%
Pain or discomfort in jaw, neck or back 39		39.6		Sudden confusion or trouble speaking Sudden numbness or weakness of face, arms, legs	
Feeling weak, lighth	Feeling weak, lightheaded, or faint		(especially on one side)	(especially on one side)	
Chest pain or discor	mfort	92.6	Sudden trouble seeing in one or both eyes		64.6
Sudden trouble see	Sudden trouble seeing in one or both eyes 34.6		Sudden chest pain or discomfort		41.2
Pain or discomfort in the arms or shoulders 82.6		Sudden trouble walking, dizziness, or loss of balance		77.7	
Shortness of breath 82.9		Severe headache with no known cause		60.9	
Recognizes all heart attack symptoms 10.5			Recgnizes all stroke symptoms		20.3
Would call 911 as a	first response if Heart Attac	ck OR Stroke is s	uspected		83.4

Heart and Stroke Healthy City Recognition Community Indicators

M=Indicator Met, P=Indicator Partially Met, N=Indicator Not Met

- 1. M Cardiovascular disease and stroke ongoing public information campaigns are provided in the community.
- 2. P Physical activity areas are designated, safe, accessible and promoted.
- 3. M Healthy food options are accessible and promoted.
- 4. P Public schools (grades K-8) comply with all legislated components of a coordinated school health program and daily physical activity.
- 5. P Moderate to strong city smoking ordinances are in place.
- 6. M CPR classes are available.
- 7. P A plan is in place to reduce disparities in CVD and stroke.
- 8. M Defibrillators (Manual and/or Automated External) are available.
- 9. P Stroke is treated as a medical emergency in the community and appropriate acute stroke treatment protocols are in place.

10.M Health Sites in the Community Promote Primary and Secondary Prevention of CVD and Stroke.

¹ 2005 Texas Behavioral Risk Factor Surveillance System, Statewide BRFSS Survey, for Respondents 18 years and older who report that they have been diagnosed with high Blood Pressure, but not during pregnancy; Respondents 18 years and older who report that they have been diagnosed with Diabetes. Does not include gestational diabetes

These questions cannot provide information about "typical" individual behaviors, since it is only 1 day of data.

However, if we look at the aggregate results of a group of students, we can get a reasonable idea of what the group is doing overall.

²Recommendation: Physical Activity -The 2005 Dietary Guidelines recommends: All children and adolescents participate in at least 60 minutes of moderate intensity physical activity on most, preferably all, days of the week.

The National Association for Sport and Physical Education (NASPE) adds: Children should engage in up to several hours a day of age and developmentally appropriate physical activity 10 – 15 minutes should include moderate to vigorous activities. http://www.aahperd.org/naspe/template.cfm?template=ns index.html

³ Recommendation: Media Time- The American Academy of Pediatrics recommends that parents limit children's total entertainment media time to: No more than 1 – 2 hours per day. http://www.aap.org/policy/re0043.html

⁴Some questions in the survey ask the students questions about "yesterday".

^{*} At risk of overweight is <u>></u>85th but <95th Percentile for BMI by Age/Sex

^{**}Overweight is \geq 95th Percentile for BMI by Age/Sex