



HEART DISEASE AND STROKE PREVENTION PROGRAM APPROPRIATIONS FACT SHEET

FY 2012	President's 2013 Budget	FY 2013 Suggested
\$54,975,000	Coordinated	\$74,975,000

Additional funding would allow CDC to provide greater resources to some currently funded states to increase emphasis on the ABCs: appropriate aspirin use, better control of high blood pressure (including sodium reduction) and cholesterol, and smoking cessation; as well as increase the total number of states with heart disease and stroke prevention programs.

Basic Facts about Heart Disease and Stroke

- Heart Disease and Stroke are the first and fourth leading causes of death in the United States.
- Each year, an estimated 785,000 Americans will have a new coronary attack, and 470,000 will have a recurrent attack. Approximately every 25 seconds, an American will have a coronary event, and approximately every minute, someone will die of one.¹
- Each year, an estimated 795,000 people experience a stroke. On average, every 40 seconds, someone in the United States has a stroke.
- Among Americans with functional disabilities, heart disease, stroke, and hypertension are all among the 15 leading conditions that caused those disabilities.²
- Almost 6 million hospitalizations each year (1 of every 6) are due to heart disease and stroke.¹

Cost of Heart Disease and Stroke to the American Health Care System

- The total direct and indirect cost of cardiovascular disease and stroke in the United States for 2010 is an estimated \$444 billion.³
- CVD and stroke accounted for 15% of the total health expenditures in 2007.⁴
- The estimated direct and indirect cost of High Blood Pressure for 2010 is \$93.5 billion.³

Heart Disease and Stroke are Preventable and Controllable

- Approximately 69% of people who have a first heart attack, and 77% of those who have a first stroke have hypertension¹
- Nearly 1 in 3 U.S. adults have high blood pressure and approximately 37% have prehypertension. A 12 to 13 point drop in high blood pressure across the population can reduce cardiovascular disease deaths by 25%.

¹ Roger VL *et al.* Heart disease and stroke statistics—2012 update: a report from the American Heart Association. *Circulation*. 2012;125:e12 – e230.

² Hootman J, Helmick CG, Theis KA, Brault MW, Armour BS. Prevalence and most common causes of disability among adults—United States, 2005. *MMWR Morb Mortal Wkly Rep*. 2009;58:421–426. Available at: <http://www.cdc.gov/mmwr/PDF/wk/mm5816.pdf>.

³ Heidenreich PA, Trogon JG, Khavjou OA, Butler J, Dracup K, Ezekowitz MD, et al. Forecasting the future of cardiovascular disease in the United States: a policy statement from the American Heart Association. *Circulation* 2011;123(8):933–944.

⁴ Cohen JW, Cohen SB, Bantlin JS. The Medical Expenditure Panel Survey: a national information resource to support healthcare cost research and inform policy and practice. *Med Care*. 2009;47(suppl 1):S44 –S50.

- Reducing dietary salt across the population by an average of 3 grams per day is projected to reduce the annual number of new cases of coronary heart disease by 60,000 - 120,000 and of stroke by 32,000 – 66,000.⁵
- Cigarette smokers are 2-4 times more likely to develop heart disease and almost twice as likely to have a stroke than nonsmokers.⁶
- A 10% decrease in total cholesterol levels in the U.S. population overall may result in an estimated 30% reduction in the incidence of coronary heart disease.
- Current national guidelines recommend that all adults have their blood pressure checked every 2 years and their blood cholesterol levels checked every 5 years. Education among the public and health care practitioners about the importance of prevention will help improve awareness of the risk factors for cardiovascular diseases and how to address them before it's too late.

CDC's Cardiovascular Health Program

With an additional \$20 million in funding for Heart Disease and Stroke, CDC would expand the National Heart Disease and Stroke Prevention Program to ensure the nation has access to evidence-based interventions that prevent or detect and treat risk factors for heart disease and stroke, that improve quality of care following acute events, and that prevent recurrent events. CDC would especially work to promote cardiovascular health through increased attention on the ABCS. Funds would support the further development of a comprehensive national- and state-level heart disease and stroke surveillance (disease tracking) system. This system would include the tracking of pre- and post-hospital care and an enhanced Paul Coverdell National Acute Stroke Registry. Additionally, with this funding increase, CDC would expand work in sodium reduction at the federal, state, and local levels; and expand evaluation to increase monitoring, accountability and program effectiveness.

* For more information visit www.cdc.gov/dhdsp

⁵ Bibbins-Domingo K *et al.* Projected Effect of Dietary Salt Reductions on Future Cardiovascular Disease. *New England Journal of Medicine*. 2010; Jan. 20 Epub ahead of print (10.1056/NEJMoa0907355).

⁶ US Department of Health and Human Services. *Fact Sheet: Health Effects of Cigarette Smoking*. Atlanta, Ga: US Department of Health and Human Services, Public Health Service, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health; updated January 2008. Available at: http://www.cdc.gov/tobacco/data_statistics/fact_sheets/health_effects/effects_cig_smoking/.