

# Heart Disease

Heart disease kills more residents than cancer or injury.

In Contra Costa, heart disease accounts for 25.5% of all deaths, making it the number one cause of death in our county. From 2002-2004, there were 5,280 Contra Costa residents who died of heart disease. This means that, on average, 1,760 residents of Contra Costa die from heart disease each year.

The age-adjusted death rate from heart disease is lower in Contra Costa (179.9 per 100,000) than California (202.7 per 100,000).

Contra Costa's death rate from heart disease (179.9 per 100,000) does not meet the Healthy People 2010 objective (166.0 per 100,000).

The majority of deaths from heart disease occur among Whites (4,056), followed by African Americans (581), Asians (318) and Latinos (290).

Even though African Americans die in far fewer numbers than Whites, African Americans are more likely to die from heart disease. African Americans have the highest rate of death due to heart disease (305.5 per 100,000) – almost twice the rate of the county overall (179.09 per 100,000) and Whites (182.3 per 100,000), and over twice the rate of

- African Americans are more likely to die of heart disease.
- Residents of San Pablo, Oakley, Richmond, Martinez, Antioch and Pittsburg have higher death rates from heart disease.
- On average, 1,760 residents die from heart disease each year.
- Contra Costa's death rate from heart disease (179.9 per 100,000) does not meet the Healthy People 2010 objective.

## Heart Disease Deaths by Race/Ethnicity

Table 1. Contra Costa County 2002–2004

	<b>Deaths</b>	<b>Percent</b>	<b>Rate</b>
White	4,056	76.8%	182.3
African American	581	11.0%	*305.5
Asian	318	6.0%	**116.8
Latino	290	5.5%	**131.7
Contra Costa	5,280	100.0%	179.9

These are age-adjusted rates per 100,000 residents.

\* Significantly higher rate compared to the county.

\*\* Significantly lower rate.

Asians (116.8 per 100,000) and Latinos (131.7 per 100,000). This difference may be linked to the high prevalence of risk factors for heart disease such as high blood pressure, cholesterol, diabetes, smoking, and obesity in the African American community.

Whites are equally likely to die from heart disease and Latinos and Asians are less likely to die from heart disease compared to the county overall.

In Contra Costa, men are more likely to die from heart disease (219.0 per 100,000) than the county overall (179.9 per 100,000) and women (149.7 per 100,000). Women are less likely to die from heart disease than the county overall. Although men are more likely to die for heart disease, slightly more than half of the deaths from heart disease occur among women (2,675, 50.7%).

## Heart disease Deaths by Gender

Table 2. Contra Costa County 2002–2004

	Deaths	Percent	Rate
Women	2,675	50.7%	**149.7
Men	2,605	49.3%	*219.0
Contra Costa	5,280	100.0%	179.9

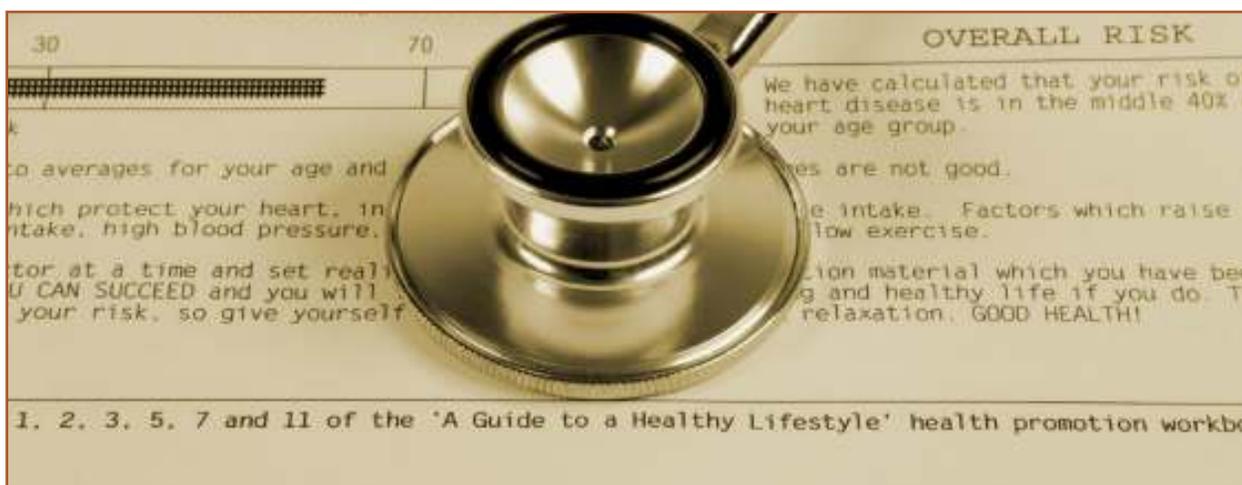
These are age-adjusted rates per 100,000 residents.

\* Significantly higher rate compared to the county.

\*\* Significantly lower rate.

Heart disease death rates are higher in some communities. People living in San Pablo, Oakley, Richmond, Martinez, and Antioch are more likely to die from heart disease compared to the county overall. Residents of Walnut Creek are less likely to die of heart disease than the county

overall. However, a large number of deaths from heart disease occur among people living in Walnut Creek (779), followed by Richmond (659), Concord (644), Antioch (411) and Pittsburg (279).



## Heart Disease Deaths by Place

Table 3. Contra Costa County 2002–2004

	<b>Deaths</b>	<b>Percent</b>	<b>Rate</b>
Walnut Creek	779	14.8%	**156.1
Richmond	659	12.5%	*265.2
Concord	644	12.2%	199.7
Antioch	411	7.8%	*222.7
Pittsburg	279	5.3%	*219.9
San Pablo	250	4.7%	*353.0
Oakley	106	2.0%	*310.0
Martinez	217	4.1%	*235.6
Brentwood	141	2.7%	202.7
Pinole	124	2.4%	200.3
Bay Point	75	4.4%	229.9
Contra Costa	5,280	100.0%	179.9

These are age-adjusted rates per 100,000 residents.

\* Significantly higher rate compared to the county.

\*\* Significantly lower rate.



**More improvement is still needed.<sup>1</sup>**

Despite declines in recent years, heart disease remains the leading cause of death and of premature and permanent disability in the United States for men, women and for nearly every racial and ethnic group. On average, one death from heart disease occurs every 35 seconds. Although heart disease is more common among adults age 65 and older, the number of sudden deaths from heart disease among people age 15-34 years has increased.

**Heart Disease can be prevented.** Heart disease can and does occur at any age. With timely treatment and management of risk factors, the risk of death and disability can be lowered. National guidelines suggest that blood pressure be checked regularly and blood cholesterol level be checked every five years.<sup>2</sup> Studies suggest that a 10% decrease in total cholesterol levels may reduce the development of coronary heart disease by almost 30%.<sup>2</sup>

People can reduce their risk for heart disease by not smoking, adopting a healthy diet, becoming physically active, controlling their weight, reducing stress, and avoiding other chronic conditions such as diabetes.<sup>3</sup>

## Text

1. National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control and Prevention (n.d.). *Women and Heart Disease Fact Sheet*. Retrieved February 21, 2007 from the CDC website: [www.cdc.gov/dhdsp/libaray/fs\\_men\\_heart.htm](http://www.cdc.gov/dhdsp/libaray/fs_men_heart.htm).
2. National Center for Chronic Disease Prevention and Health Promotion, CDC(n.d.). *At a Glance: Addressing the Nation's Leading Killers 2006*. Retrieved February 21, 2007 from the CDC website: [www.cdc.gov/nccdphp/publications/aag/pdf/aag\\_cvh2006.pdf](http://www.cdc.gov/nccdphp/publications/aag/pdf/aag_cvh2006.pdf).
3. National Center for Chronic Disease Prevention and Health Promotion, CDC (n.d.). *Men and Heart Disease Fact Sheet*. Retrieved February 21, 2007 from the CDC website: [www.cdc.gov/dhdsp/libaray/fs\\_men\\_heart.htm](http://www.cdc.gov/dhdsp/libaray/fs_men_heart.htm).

## Tables

Tables 1-3: Mortality data from the California Department of Health Services (CDHS), <http://www.dhs.ca.gov/>, Center for Health Statistics' Death Statistical Master File, 2002-2004. Any analyses, interpretations of conclusions of the data have been reached by CHAPE and are not from the CDHS. In Table 1, data for the following race/ethnicity groups was excluded due to small numbers: American Indian/Alaska Native, Native Hawaiian/Pacific Islanders, Two or More Races, and Other. Due to unstable estimates, rates could not be calculated for these groups. Tables 2 and 3 include all race/ethnic groups including those mentioned above. These tables include total deaths and age-adjusted average annual death rates for 2002 through 2004.

ICD10 coding for diseases of the heart (ICD I00-109, I11, I13, I20-151) from the Centers for Disease Control and Prevention National Center for Health Statistics, available online at: [http://www.cdc.gov/nchs/data/nvsr/nvsr50/nvsr50\\_16.pdf](http://www.cdc.gov/nchs/data/nvsr/nvsr50/nvsr50_16.pdf)

## Population data from:

California Department of Finance (April 2006). *Estimated Race/Ethnic Population with Age and Sex Detail 2000-2004*. Sacramento, CA.

California Department of Finance (May 2006). *E-4 Population Estimates for Cities, Counties and the State 2001-2006*, with DRU Benchmark. Sacramento, CA. Available online at: <http://www.dof.ca.gov/HTML/DEMOGRAP/Druhpar.htm>.

Note: City level denominators were extrapolated from the E-4 file to approximate the mid-year city-level population estimates that are needed to calculate city-level rates. For more information, see our section on statistical methods.

*Healthy People 2010* objectives from the U.S. Department of Health and Human Services' Office of Disease Prevention and Health Promotion, available online at: <http://www.healthypeople.gov/>