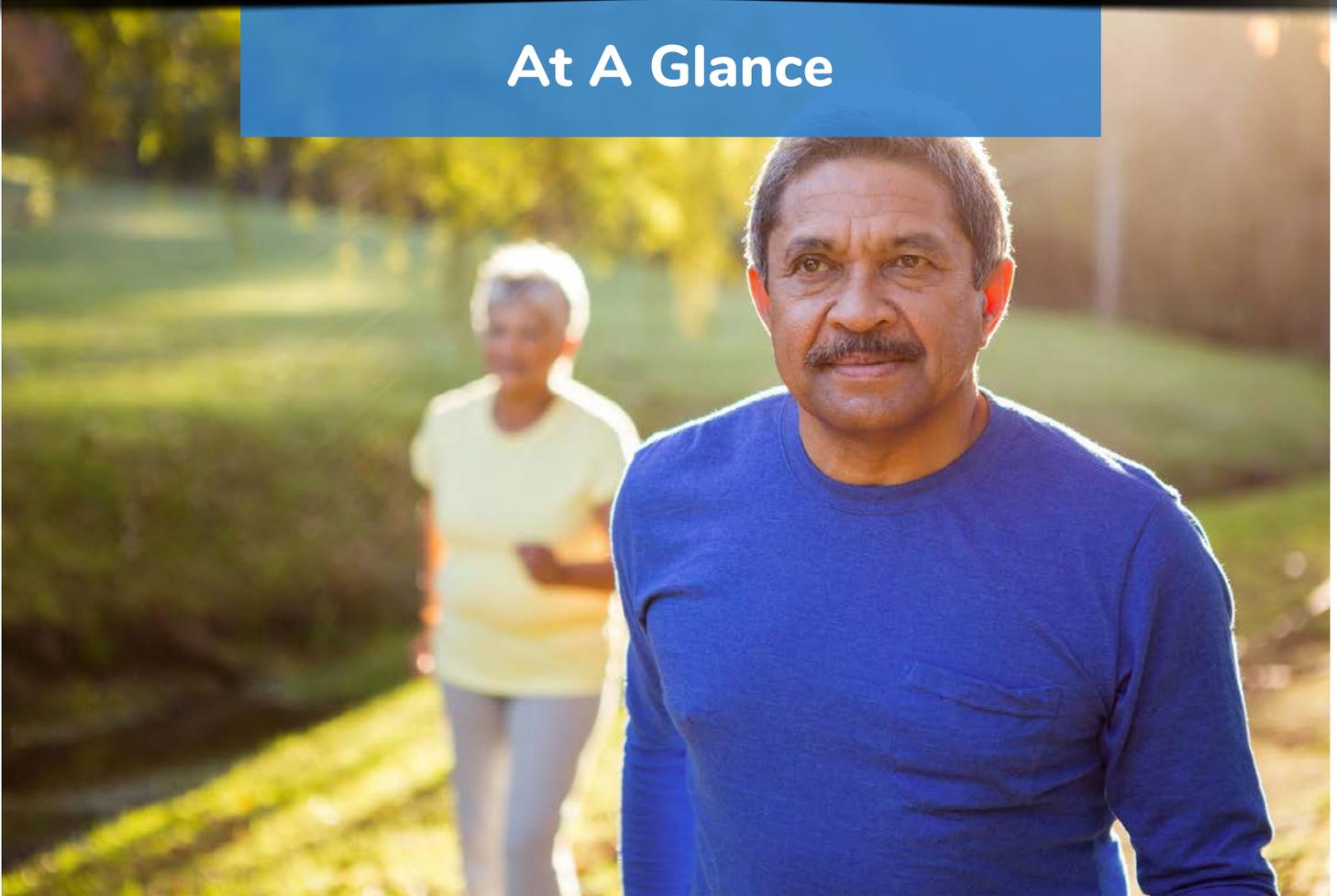


# Division for Heart Disease and Stroke Prevention

## At A Glance



CDC's Division for Heart Disease and Stroke Prevention supports state, local, tribal, and territorial heart disease and stroke prevention programs that help millions of Americans control their high blood pressure and reduce other risk factors for heart disease and stroke. These efforts have helped lower death rates from heart disease and stroke, which are the first and fifth leading causes of death in the United States.



Centers for Disease Control and Prevention  
National Center for Chronic Disease Prevention and Health Promotion

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## What We Do

The leading preventable risk factors for heart disease and stroke are high blood pressure, high LDL (bad) cholesterol, smoking, poor nutrition, lack of physical activity, type 2 diabetes, and obesity. With an FY 2020 budget of \$172 million, CDC's [Division for Heart Disease and Stroke Prevention](#) works to reduce these risk factors, especially for groups affected by health disparities, which are differences in health across different geographic, racial, ethnic, and socioeconomic groups. To meet this goal, CDC works to:



Measure how many Americans live with, are treated for, or die from heart disease and stroke.



Study interventions to find out what works best to prevent heart disease and stroke and to develop tools for partners to use.



Fund and guide states, cities, tribes, and territories to use interventions to prevent and manage heart disease and stroke.



Share information to help all Americans understand the risk factors for heart disease and stroke and how to prevent and reduce them.

## Why We Do It

Nothing kills more Americans than heart disease and stroke. More than 868,000 Americans die of heart disease, stroke, or other cardiovascular diseases every year—that's one-third of all US deaths. These diseases also take an economic toll, costing \$214 billion a year to our health care system and causing \$138 billion in lost productivity from premature death alone. One hundred and eight million people have high blood pressure (defined as having blood pressure of 130/80 mm Hg or higher or taking medicine to control blood pressure), a key risk factor for heart disease and stroke.



**1 IN 3**  
DEATHS

or more than 859,000 people each year



**\$214**  
BILLION

in health care system costs



**\$138**  
BILLION

in lost productivity from premature death



**108**  
MILLION

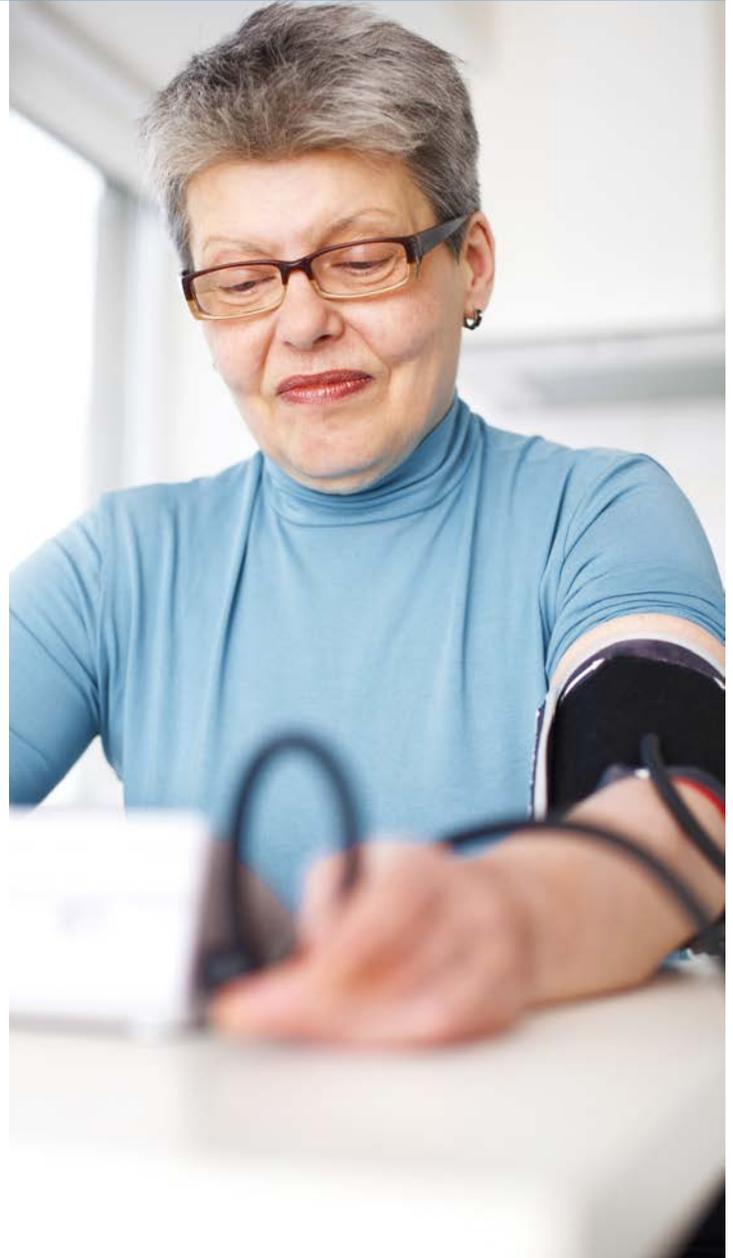
people with high blood pressure

## How We Do It

### State Funding: Improve Health Care and Self-Management

CDC funds heart disease and stroke prevention and management activities and interventions in states, local areas, tribes, and US territories through several cooperative agreements. In FY 2019, CDC used these cooperative agreements to award about \$82 million to all 50 states, the District of Columbia, 12 tribes, 23 tribal-serving organizations, 5 large cities or counties, and 2 groups of city and county health departments to:

- Increase the use of electronic health records and other technology to identify people who have heart disease and stroke risk factors and make sure they get the right treatment.
- Expand the use of team-based care, in which doctors work with pharmacists, community health workers, and others outside of medical settings to manage a patient's risk factors.
- Increase the number of people with high blood pressure who can check their own blood pressure regularly and share those measurements with their health care professional.
- Refer people to effective lifestyle programs that can help them learn to be physically active and eat nutritious foods.



### Examples of Our Impact

- ▶ In 2014, only 69% of patients in South Carolina health care systems who had high blood pressure were aware of their condition. The state worked with the Care Coordination Institute to increase the use of electronic health records to identify patients with undiagnosed high blood pressure and improve their treatment. Four years later, the percentage of patients who were aware of their high blood pressure had increased to 94%.
- ▶ Montana partnered with the state's three largest health centers to use team-based care and self-management programs for patients with high blood pressure. As a result, blood pressure control rates at the three centers rose from 63.2% in 2014 to 73.1% in 2017.

## How We Do It



### Paul Coverdell Program: Reduce Disability and Death From Stroke and Prevent Recurrence

CDC provides funding and guidance to nine states to collect and study data on the quality of acute stroke care through the [Paul Coverdell National Acute Stroke Program](#). This information is used to identify gaps in care.

CDC then works with funded states to develop and improve care—from the onset of stroke symptoms through ambulance transport, hospitalization, and discharge to home—and to increase awareness of the signs and symptoms of stroke.

Since the 1970s, death rates for cardiovascular disease have gone down by more than half, and stroke has dropped from the third to fifth leading cause of death. Since 2005, Coverdell Program has improved the quality of stroke care for more than 1 million stroke patients across 13 states and 794 hospitals.

## Examples of Our Impact

- ▶ The percentage of patients who received intravenous tissue plasminogen activator (tPA) within the national standard of 60 minutes rose from 26.4% in 2008 to 68.2% in 2019 at hospitals participating in the Coverdell Program.
- ▶ In Ohio, the percentage of patients who received care that meets national guidelines rose from 19% to 83%. The percentage who received tPA within the national standard of 60 minutes rose from 21.9% in 2008 to 70.5% in 2017.

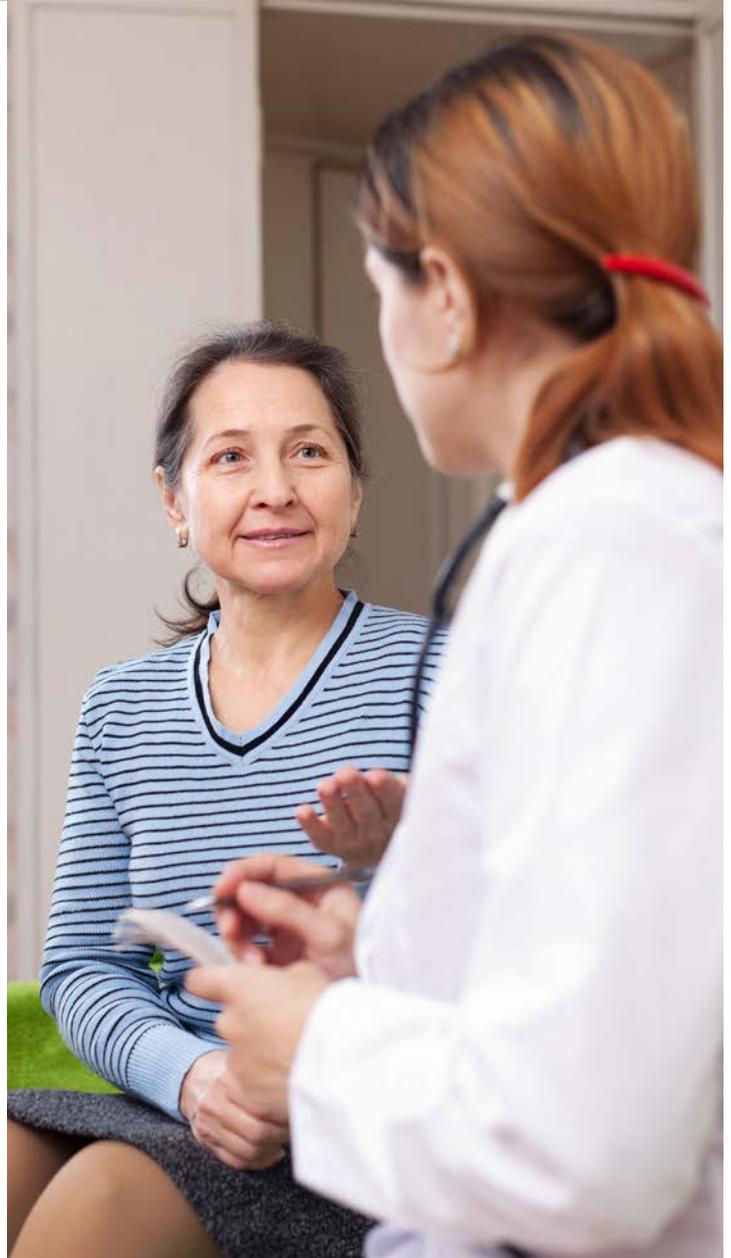
## How We Do It

### WISEWOMAN: Provide Heart Disease and Stroke Services for Low-Income Women

The [WISEWOMAN](#) (Well-Integrated Screening and Evaluation for WOMen Across the Nation) program works to reduce heart disease and stroke risk factors for low-income women aged 40 to 64 who have little or no health insurance.

WISEWOMAN consists of 24 programs in 21 states and 3 tribal organizations that offer preventive health services to women who participate in the [National Breast and Cervical Cancer Early Detection Program](#). It promotes a team-based approach to medical care, where patients and their doctors work with nurses, pharmacists, and community health workers.

The program's preventive services include blood pressure, cholesterol, and diabetes screenings. Women are counseled about their risk of heart disease and stroke and referred to lifestyle programs and other community resources that can help them control their blood pressure, eat a healthier diet, be physically active, and quit smoking.



### Examples of Our Impact

- ▶ From 2008 to 2018, WISEWOMAN provided 324,435 screenings to 226,461 women. In recent years, the program has primarily focused on referring women to services designed to help them make healthy lifestyle changes. Thanks to these efforts, participants have received 431,755 healthy behavior support services to help them reduce their risk of heart disease and stroke.
- ▶ From 2014 to 2018, the Utah WISEWOMAN program provided 17,435 heart disease and stroke risk factor screenings to 10,537 women. It also provided 41,405 healthy behavior support services. A total of 674 women who were previously undiagnosed learned that they had high blood pressure and were referred for treatment.

## How We Do It



### Million Hearts: Prevent 1 Million Heart Attacks and Strokes by 2022

[Million Hearts](#)<sup>®</sup> 2022 is a national initiative co-led by CDC and the Centers for Medicare & Medicaid Services to prevent 1 million heart attacks and strokes within 5 years. It focuses on a small set of priorities selected for their ability to reduce heart disease, stroke, and related conditions. CDC works with other federal agencies and private partners to:

- Reduce sodium intake, tobacco use, and physical inactivity.
- Improve the ABCS of heart health (Aspirin when appropriate, Blood pressure control, Cholesterol management, and Smoking cessation).
- Increase the use of cardiac rehabilitation, a medically supervised program to improve heart health among people who have had a heart attack or who have heart failure.

Million Hearts<sup>®</sup> 2022 focuses additional attention and action on improving outcomes for the following priority populations: African Americans with high blood pressure, people who have already had a heart attack or stroke, people with mental or substance use disorders who smoke, and people aged 35 to 64 with heart disease and stroke risk factors.

## Examples of Our Impact

- ▶ Since 2012, the Million Hearts Hypertension Control Challenge has recognized 118 health care practices and systems across 37 states for helping at least 70% of their patients reduce their high blood pressure. These Hypertension Control Champions serve over 15 million US adults. In 2018, Million Hearts raised the champion goal to 80% control.
- ▶ In 2016, 10 Federally Qualified Health Centers diagnosed nearly 2,000 patients with high blood pressure who were previously undiagnosed. Over the next 18 months, these health centers helped 2,491 patients bring their blood pressure under control.

## How We Do It

### Sodium Reduction in Communities: Change Food Environments to Reduce Sodium

High sodium intake can lead to high blood pressure, which is a major risk factor for heart disease and stroke. CDC strongly supports sodium reduction as an achievable and effective public health strategy to reduce blood pressure and prevent heart attacks and strokes. Reducing sodium intake to 2,300 mg a day, as recommended by the *Dietary Guidelines for Americans*, could save 280,000 to 500,000 lives and nearly \$100 billion in health care costs over the next 10 years.

CDC's [Sodium Reduction in Communities Program](#) funds eight grantees to work with local organizations that serve or sell food to help make lower-sodium foods available in more settings. These settings include public and private worksites, hospitals, schools, early care and education centers, colleges and universities, emergency food services, elder care services, homeless shelters, jails, and prisons.

Because most of the sodium that people eat is already in the foods they buy, the focus is on working with food manufacturers and food buyers, including restaurants, to serve more lower-sodium items.



### Examples of Our Impact

- ▶ From 2013 to 2016, 10 Sodium Reduction in Communities Program recipients partnered with 455 organizations to provide lower-sodium food options to over 2 million people. Their efforts also helped CDC identify effective sodium reduction strategies at the community level. These strategies include developing nutrition standards that limit sodium in meals, replacing food products with lower-sodium alternatives, and modifying recipes to reduce sodium.
- ▶ Oregon saw a 17% reduction in the amount of sodium in meals served from 2016 to 2019 to adults in custody at the state's 14 correctional institutions. Food services staff in the Oregon Department of Corrections and inmates serve more than 16 million meals a year.

CDC's National Center for Chronic Disease Prevention and Health Promotion prevents chronic disease and promotes health for people of all ages.



## We Work to Improve Health Across the Life Span

### Where People Live, Learn, Work, and Play



#### Infants

Reduce the leading causes of infant death and illness.



#### Children and Adolescents

Help support healthy communities, child care programs, and schools so children can eat well, stay active, and avoid risky behaviors.



#### Adults

Help adults lead healthy and active lives and increase the use of preventive services like cancer screenings.



#### Older Adults

Promote quality of life and independence for people as they age.

### For more information, contact

Centers for Disease Control and Prevention  
National Center for Chronic Disease Prevention and Health Promotion  
[Division for Heart Disease and Stroke Prevention](#)  
1-800-CDC-INFO (232-4636); TTY 1-888-232-6348  
Contact [CDC-INFO](#)

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