

# Heart Disease and Stroke in Los Angeles County

## Data Trends to Inform Public Health Action

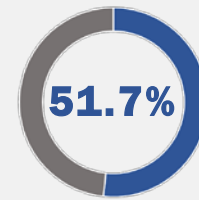
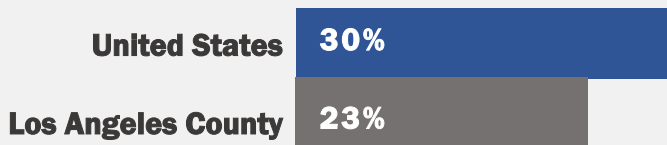
Heart disease and stroke are two of the leading causes of death in Los Angeles County. While countywide rates of hypertension, a major risk factor for these conditions, are lower than the nation, significant opportunities exist to better control blood pressure and improve outcomes among those at risk. Similarly, while recent trends in deaths from heart disease and stroke demonstrate some progress, inequities continue to exist, with Black men experiencing higher death rates than all other groups.

### HYPERTENSION



Between 2007–2014, the age-adjusted prevalence of hypertension was **lower** in Los Angeles County compared to the rest of the United States.<sup>1</sup>

Hypertension can be controlled through lifestyle change and medication. However, over half of the hypertensive adults **do not** have their hypertension under control,<sup>1</sup> putting them at **higher risk of heart disease or stroke**.

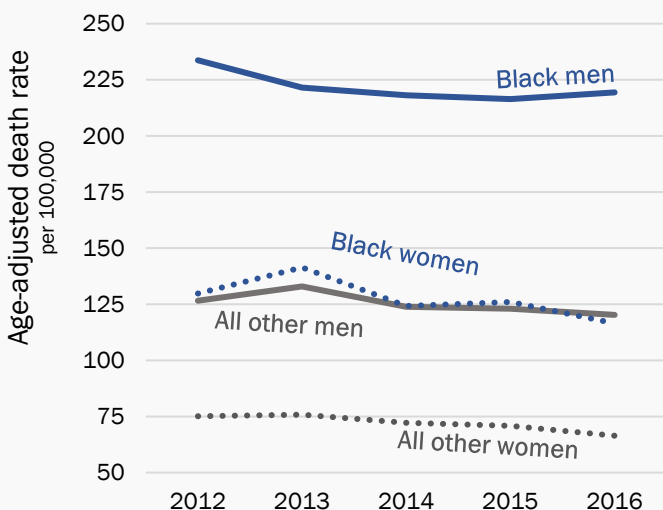


### HEART DISEASE



Heart disease mortality has declined in recent years in Los Angeles County. However, among all groups, **Black men have the highest heart disease mortality rates**.<sup>2</sup>

Heart disease mortality rate, Los Angeles County (2012–2016)

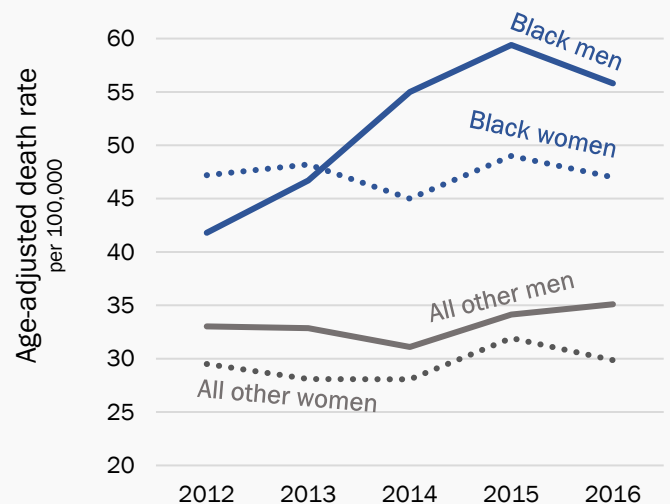


### STROKE



Stroke mortality has been relatively stable between 2012 and 2016. However, Black men and Black women have higher stroke mortality rates than other racial or ethnic groups, and despite a recent decrease, **rates for Black men have gotten worse**.<sup>3</sup>

Stroke mortality rate, Los Angeles County (2012–2016)



# What's Happening in Los Angeles County to Reduce Heart Disease and Stroke?

Three major, individual risk factors underlie the high rates of heart disease and stroke: smoking; poor diet and physical inactivity; and uncontrolled hypertension. These risk factors can be partially addressed by ensuring all individuals have the resources they need for optimal health, including access to healthy food; safe, walkable streets and outdoor spaces such as parks; and culturally competent, linguistically appropriate healthcare linked to evidence-based preventive practices (e.g., smoking cessation, lifestyle change, and medication therapy management). Reducing inequities, however, will require additional approaches to address factors such as historic disinvestment, high stress, and barriers to care that are associated with bias, discrimination, and poverty. These social factors can uniquely impact communities of color and contribute to their disproportionate burden of heart disease and stroke.

## PROMISING APPROACHES TO ADDRESS INEQUITIES

Address **root causes** of inequities in disease burden, such as poverty and racism, and promote protective factors, to strengthen community resiliency and well-being.<sup>4,5</sup>

Implement community-centered, culturally- and linguistically- tailored approaches to **ensure individuals are equipped to recognize heart attack and stroke and respond effectively** (e.g., community-participatory efforts to improve awareness of disease symptoms and treatment options to reduce delays in activating EMS, skill-building around CPR delivery and other effective responses to acute symptoms, and expansion of interventions such as Stroke Promoter programs).<sup>6</sup>

Offer training to **reduce implicit bias among healthcare professionals**, including first responders, to optimize the recognition, referral, and treatment of individuals at risk for heart attack or stroke, or in need of immediate care, regardless of gender, race/ethnicity or other personal characteristics.<sup>6</sup>

Advance policy and systems changes that **address barriers to accessing emergency services**, including cost barriers and mistrust of medical professionals and/or first responders.<sup>4,6</sup>

## RESOURCES FOR INDIVIDUALS



### SMOKING CESSATION

LA Quits provides evidence-based resources and information to help people quit tobacco for good: [laquits.com](http://laquits.com)



### HEALTHY EATING AND ACTIVE LIVING

Find healthy eating and active living resources in your neighborhood:  
**Choose Health LA** [choosehealthla.com](http://choosehealthla.com)  
**JUMPP** [publichealth.lacounty.gov/cardio/jumpp](http://publichealth.lacounty.gov/cardio/jumpp)  
**PLACE** [publichealth.lacounty.gov/place](http://publichealth.lacounty.gov/place)



### HYPERTENSION CONTROL

Resources to help individuals receive screenings, enroll in healthcare coverage, and make an appointment to discuss options for blood pressure control include:  
**LA Healthline** [publichealth.lacounty.gov/owh](http://publichealth.lacounty.gov/owh)  
**OneDegree** [1degree.org](http://1degree.org)  
**211 LA County** [211la.org](http://211la.org)

## References

1. Hales CM, Carroll MD, Simon PA, Kuo T, Ogden CL. Hypertension prevalence, awareness, treatment, and control among adults aged  $\geq 18$  years – Los Angeles County, 1999–2006 and 2007–2014. *MMWR Morb Mortal Wkly Rep.* 2017 Aug 18;66(32):846-849.
2. Los Angeles County Department of Public Health, Office of Health Assessment and Epidemiology. 2007-2016 coronary heart disease mortality trends among Los Angeles County resident deaths. Prepared by the Office of Health Assessment and Epidemiology in September 2018.
3. Los Angeles County Department of Public Health, Office of Health Assessment and Epidemiology. 2007-2016 stroke mortality trends among Los Angeles County resident deaths. Prepared by the Office of Health Assessment and Epidemiology in September 2018.
4. Clark LT. Issues in minority health: Atherosclerosis and coronary heart disease in African Americans. *Med Clin N Am.* 2005;89:977-1001.
5. Savitz ST. Literature-based appraisal of racial/ethnic cardiovascular health care disparities. *ISRN Public Health.* 2012.
6. Einstein AR, Song S, Mason M, Kandula NR, Richards C, Aggarwal NT, Prabhakaran SK. A community-partnered approach to inform culturally relevant health promotion intervention for stroke. *Health Educ Behav.* 2018;45(5):697-705.

## Suggested Citation

Los Angeles County Department of Public Health. Heart Disease and Stroke in Los Angeles County: Data Trends to Inform Public Health Action. Issue Brief, 2018.

