

2005 Georgia Data Summary:

SHAPP (Stroke and Heart Attack Prevention Program)



During the 2005 fiscal year, over 13,000 patients were served by SHAPP clinics.

DEFINITIONS

- **Stroke and heart attack (ischemic heart disease)** are two of the seven disease categories that comprise **cardiovascular disease (CVD)**.
- **Stroke (cerebrovascular disease)** refers to an infarct (loss of blood supply due to a blocked artery) or hemorrhage in the brain.
- **Ischemic heart disease (IHD)**, also known as coronary heart disease, refers to narrowing of the coronary arteries, which reduces blood flow and oxygen to the heart. Ischemic heart disease includes acute myocardial infarctions (“heart attacks”) and complications resulting from previous myocardial infarctions.

STROKE DEATHS

- Stroke was the third most frequent cause of death in Georgia, accounting for **6%** of all deaths, with **4,285** stroke deaths in 2003.
- In 2003, Georgia’s stroke death rate was **20% higher** than the national rate.
- Stroke death rates were similar for men and women in 2003.
- Stroke death rates were **1.5** times higher for blacks than whites in 2003.
- **19%** of persons dying from stroke in Georgia in 2003 were less than 65 years old.

STROKE HOSPITALIZATIONS

- **23,164** Georgia residents were hospitalized because of stroke in 2003.
- The average charge per stroke hospitalization in Georgia was **\$21,200** in 2003.¹
- Total hospital charges for stroke in Georgia were **\$490 million** in 2003.¹

CARDIOVASCULAR DISEASE DEATHS

<u>Causes</u>	<u># GA Deaths (2003)</u>
Heart Disease	17,180
Ischemic Heart Disease	9,579
Hypertensive Heart Disease	855
Other Heart Disease	6,746
Stroke	4,285
Hypertension	894
Atherosclerosis	305
Other	631

Cardiovascular Disease Deaths (total)	23,295

ISCHEMIC HEART DISEASE (IHD) DEATHS

- Heart disease was the leading cause of death in Georgia, accounting for **26%** of all deaths, with **17,180** heart disease deaths in 2003. Of the deaths from heart disease, **9,579** were attributable to ischemic heart disease.
- In 2003, Georgia’s IHD death rate was **16% lower** than the national rate.
- IHD death rates were **1.8** times **higher** for men than women in 2003.
- IHD death rates were similar for blacks and whites in 2003.
- **26%** of persons dying from IHD in Georgia in 2003 were less than 65 years old.

IHD HOSPITALIZATIONS

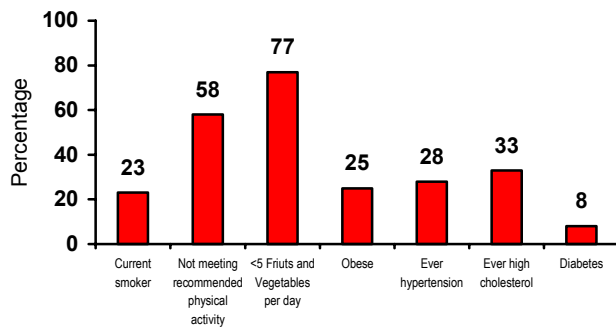
- **50,098** Georgia residents were hospitalized because of IHD in 2003.
- The average charge per IHD hospitalization in Georgia was **\$27,900** in 2003.¹
- Total hospital charges for IHD in Georgia were **\$1.4 billion** in 2003.¹

RISK FACTORS FOR STROKE AND HEART DISEASE

- Modifiable risk factors are those which can be changed in order to slow or reverse the disease process and decrease the risk of disease. Modifiable risk factors for stroke and heart attack include:

- Smoking
- Physical inactivity
- Poor diet
- Obesity
- High blood pressure
- High cholesterol
- Diabetes

PREVALENCE OF MODIFIABLE RISK FACTORS AMONG ADULTS, GEORGIA, 2003



THE ROLE OF HYPERTENSION IN STROKE AND HEART ATTACK

- Blood pressure is defined as “controlled” if the systolic and diastolic readings are below 140 and 90 mm Hg, respectively.
- Some people can control their high blood pressure by losing weight and engaging in physical activity.
- For those who are unable to decrease their blood pressure by lifestyle modification alone, medications prescribed by a physician can often control high blood pressure successfully.
- Adults with increased blood pressure have reduced life expectancy as well as more time spent living with cardiovascular disease. Life expectancy for those with controlled blood pressure is 5.1 years longer for men and 4.9 years longer for women compared to those with uncontrolled blood pressure.²

SHAPP CLINICS

- There are 142 SHAPP clinics throughout Georgia.
- SHAPP clinics are present in 16 of the 18 health districts.

SHAPP PATIENT DEMOGRAPHICS

- 13,776 patients were served by SHAPP during the 2005 fiscal year.
- 54% of the patients were African American.
- 74% of patients were less than 65 years old.

SHAPP CONTROL RATES

- SHAPP clinics have varying blood pressure control rates, ranging from 34% to 93% with a median control rate for all clinics of 61%.
- Private health plans in Georgia had a range of control rates from 47% to 68% with a median control rate of 60% for patients treated in their private setting.³
- Nationally, 53% of hypertension patients are controlled.⁴

SHAPP COSTS

- The annual medication cost is approximately \$29.68 per patient.
- Clinic visit costs range from \$24 and \$64 per visit and patients are generally seen on a quarterly basis once blood pressure control is established.

Data sources:

- ¹ Hospital charges from acute care non-federal hospitals
- ² Franco et al. Blood Pressure in Adulthood and Life Expectancy with Cardiovascular Disease in Men and Women. *Life Course Analysis. Hypertension*. 2005; 46: 280-286.
- ³ Based on performance indicators on the Health Plan Employer Data and Information Set (HEDIS), implemented by the National Committee for Quality Assurance.
- ⁴ Hajjer, I, Kotchen TA. Trends in Prevalence, Awareness, Treatment, and Control of Hypertension in the United States, 1988-2000. *JAMA* 2003;290:199-206.

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Visit <http://www.health.state.ga.us/epi/cdiiee/cardio.asp> for more information about cardiovascular disease in Georgia.