# **Appendix I: Capital Region Comparisons**

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Cardiovascular Disease is a major cause of death in NYS excl. NYC (Upstate) and in the Capital Region counties. Heart Disease was the #1 or #2 leading cause of death. Stroke was the #3 or #4 (except Greene) leading cause of death.<sup>9</sup>

# Leading Cause of Death and age-adjusted Mortality Rate per 100,000, Capital Region Counties and NYS excl. NYC, 2014 $^9$

	Heart Disease Rank Rate/100,000		Stroke		
			Rank	Rate/100,000	
Albany	#1	170	#4	24	
Columbia	#1	188	#3	39	
Greene	#2	127	not in top 5	23	
Rensselaer	#1	192	#4	27	
Saratoga	#2	147	#4	27	
Schenectady	#1	200	#4 31		
NYS excl. NYC	#1	173	#4	28	

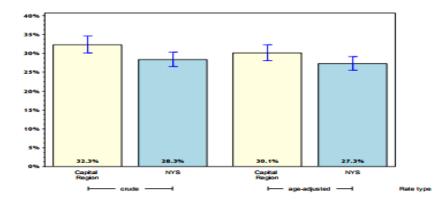
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# **High Blood Pressure**

#### Highlights:

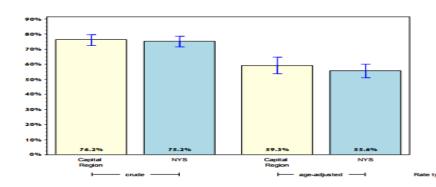
- About 244,000 Capital Region adults (32.3%) were estimated to have physician-diagnosed high blood pressure (HBP). Both the crude and age-adjusted Capital Region HBP prevalence rates were higher than NYS.
- Prevalence increased with age, with 61.4% of residents 65+ years of age diagnosed with HBP.
- Capital Region adult males had higher HBP prevalence compared to their female counterparts (36.5% vs 28.4%).
- Black non-Hispanic residents had the highest HBP prevalence (44.7%) and Hispanic residents the lowest (21.3%).
- For the adult population with HBP, 76.2% were taking HBP medications. This rate was higher than that of NYS, as was the Region's age-adjusted rate.
- Taking HBP medications increased with age; only 36.1% of the 25-34 year population taking their medications compared to over 90% in the 65+ year population. There was not much difference by gender and race/ethnicity.
- With the exception of Saratoga (25.7%), all Capital Region counties had age-adjusted HBP prevalence rates higher than NYS (27.3%). Greene County had the highest HBP rate of 33.8%.
- When reviewing the age-adjusted rates of the HBP population taking their medications, four of the six Capital Region counties had rates higher than NYS (55.6%).
- Rensselaer had the highest medication rate (77.1%), while Columbia (49.9%) and Saratoga (50.6%) had rates lower than NYS.

#### Percentage of adults with physician-diagnosed high blood pressure



	Capital Region				Statewide			
	Est. # of		Lower	Upper	Est. # of	_	Lower	Upper
	Adults	Percent	95% limit	95% limit	Adults	Percent	95% limit	95% limit
Total	243,986	32.3	30.1	34.6	4,323,615	28.3	26.5	30.3
Age								
18-24	4,516	4.8	1.7	12.9	103,520	5.2	3.3	8.0
25-34	17,383	13.8	9.4	19.9	299,126	10.9	7.8	15.0
35-44	26,620	23.1	18.0	29.1	470,752	18.9	14.1	24.8
45-64	100,694	38.3	34.7	42.1	1,715,223	34.1	31.2	37.2
65+	88,328	61.4	57.5	65.1	1,654,516	60.4	56.5	64.2
Race								
White, NH	209,708	32.6	30.4	35.0	2,701,979	29.7	28.0	31.4
Black, NH	16,696	44.7	33.4	56.6	740,669	34.2	27.2	42.0
Hispanic	5,472	21.3	14.7	30.0	609,542	23.8	18.7	29.9
Other, NH	12,111	24.3	13.7	39.3	271,424	18.9	12.7	27.1
Sex								
Male	133,745	36.5	33.0	40.1	2,116,294	29.0	26.2	32.1
Female	110,242	28.4	25.7	31.2	2,207,320	27.7	25.3	30.2
Age-adjusted <sup>®</sup>		30.1	28.0	32.3		27.3	25.6	29.1

#### Percentage of adults with diagnosed high blood pressure taking high blood pressure medication



	Capital Region				Statewide			
_	Est. # of Adults	Percent	Lower 95% limit	Upper 95% limit	Est. # of Adults	Percent	Lower 95% limit	Upper 95% limit
Total Age	184,933	76.2	72.5	79.6	3,243,246	75.2	71.5	78.5
18-24		#			8,688	8.4	3.9	17.4
25-34	6,283	36.1*	17.2	60.7	96,762	32.4*	18.9	49.5
35-44	16,792	63.1	49.8	74.6	186,971	39.7	26.7	54.3
45-64	76,505	76.4	70.5	81.4	1,395,152	81.6	77.8	84.9
65+	79,451	90.6	87.3	93.1	1,497,501	90.8	86.9	93.6
Race								
White, NH Black, NH	158,180 12,368	75.9 74.1	72.1 47.5	79.4 90.0	2,081,796 552,688	77.4 74.6^	74.1 60.0	80.3 85.3
Hispanic		#			420,934	69.1	56.3	79.5
Other, NH Sex		#			187,828	69.2	50.8	83.0
Male	99,560	75.2	69.6	80.1	1,525,386	72.2	66.5	77.2
Female	85,373	77.5	72.4	81.9	1,717,859	78.1	73.2	82.4
ge-adjusted <sup>®</sup>		59.3	53.7	64.6		55.6	51.1	60.0

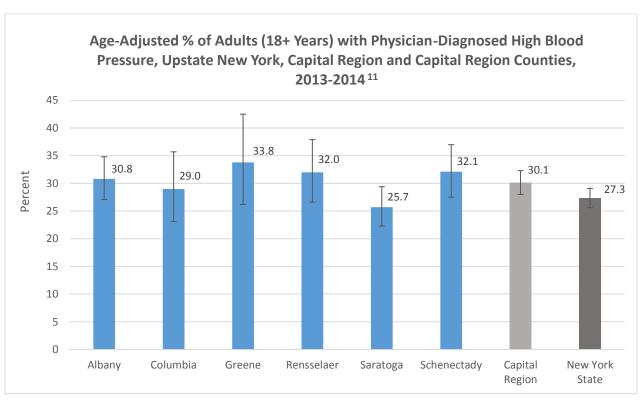
<sup>&</sup>amp; Percent is age adjusted to the 2000 United States Population.

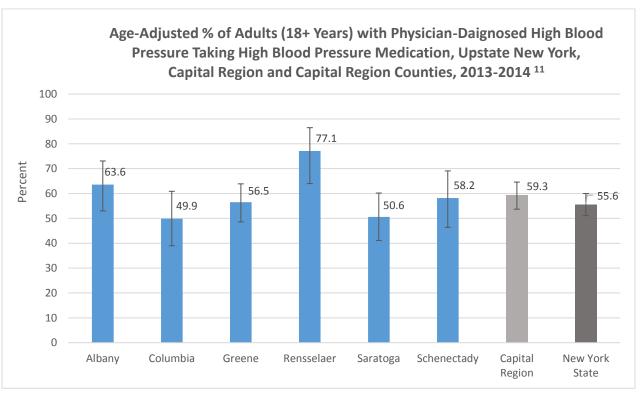
^ Highly variable rate (confidence interval with a half-width greater than 10).

<sup>&</sup>amp; Percent is age adjusted to the 2000 United States Population.

# Rates with <10 in the numerator or <50 in the denominator are suppressed.

Highly variable rate (confidence interval with a half-width greater than 10).





# **Coronary Heart Disease (CHD)**

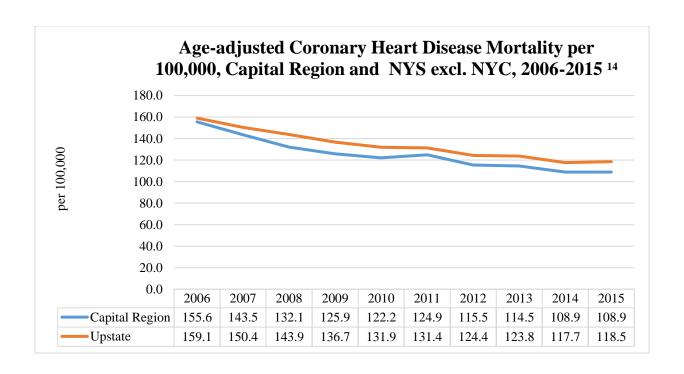
#### Highlights:

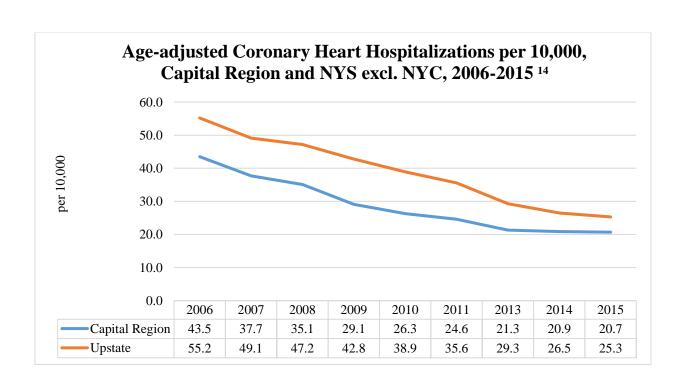
#### **CHD Mortality**

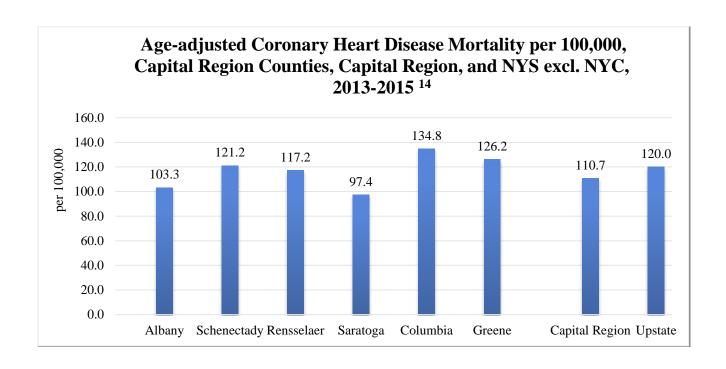
- An average of 1,400 Capital Region residents died from CHD each year (2013-15) for an age-adjusted rate of 110.7/100,000, 8% lower than Upstate.
- Over the last decade, the Capital Region's age-adjusted CHD mortality decreased 30% from 155.6 in 2006 to 108.9 in 2015.
- Columbia (134.8) and Greene (126.2) counties had the highest age-adjusted CHD mortality rates and fell into the 4<sup>th</sup> and 3<sup>rd</sup> risk quartile respectively for all NYS counties.
- Capital Region males had over 65% higher age-adjusted CHD mortality rate than female residents (142.3 vs 85.8).
- CHD mortality rates increase with age.
- Black non-Hispanic Capital Region residents had a 7% higher age-adjusted CHD mortality rate than their white non-Hispanic counterparts (118.8 vs 110.8). The CHD rate for Hispanic residents (76.3) was 31% lower than white non-Hispanic residents.
- Age-adjusted CHD mortality rates decreased with SES. SES 1 had over 75% higher CHD rates compared to SES 5 (156.2 vs 89.0).

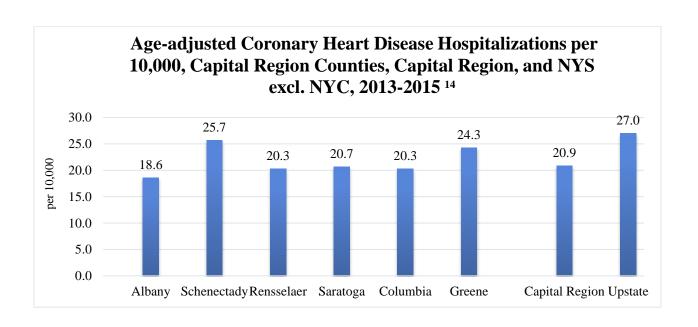
#### **CHD** Hospitalizations

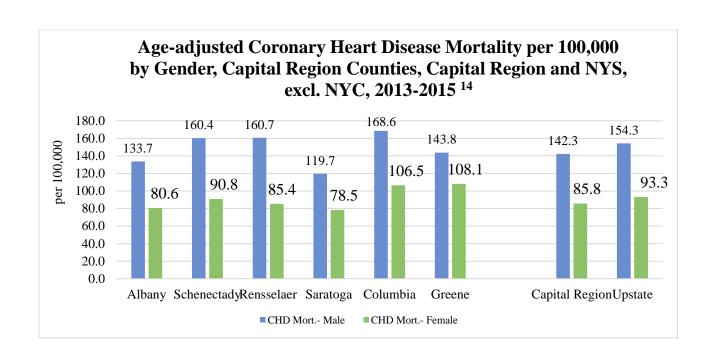
- An average of 2,500 Capital Region residents were hospitalized for CHD each year (2013-15) for an age-adjusted rate of 20.9/10,000, 23% lower than Upstate.
- Over the last decade, the Capital Region's age-adjusted CHD hospitalization rate decreased 52% from 43.5 in 2006 to 20.7 in 2015.
- Schenectady (25.7) had the highest age-adjusted CHD hospitalization rate, but still and fell below the Upstate average.
- Capital Region males had twice as high an age-adjusted CHD hospitalization rate than female residents (28.5 vs 14.3).
- CHD hospitalization rates increase with age.
- Black non-Hispanic Capital Region residents had a 9% higher age-adjusted CHD hospitalization rate than their white non-Hispanic counterparts (22.0 vs 20.1). The CHD rate for Hispanic residents (10.4) was 48% lower than white non-Hispanic residents.
- Age-adjusted CHD hospitalization rates decreased with SES. SES 1 had 60% higher CHD rates compared to SES 5 (27.9 vs 17.4).

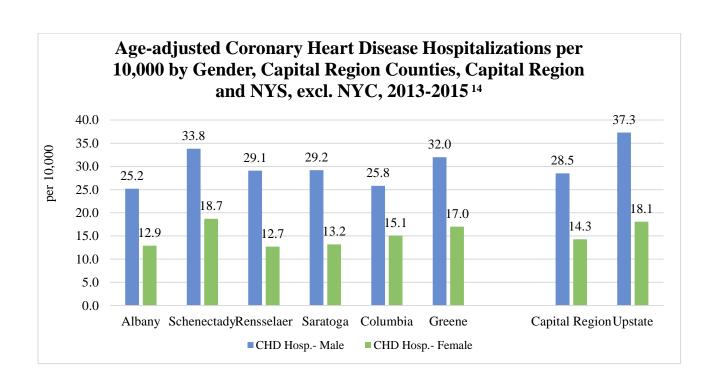


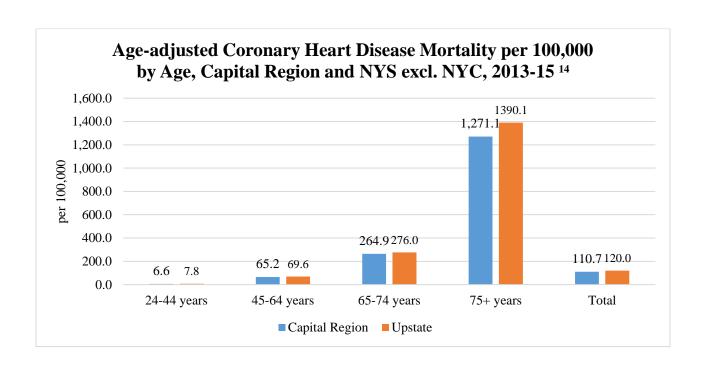


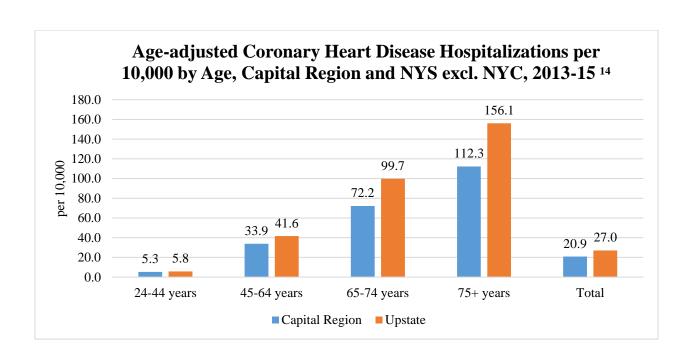


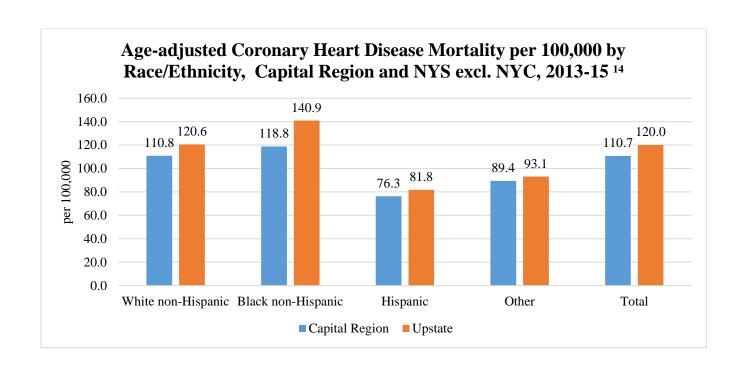


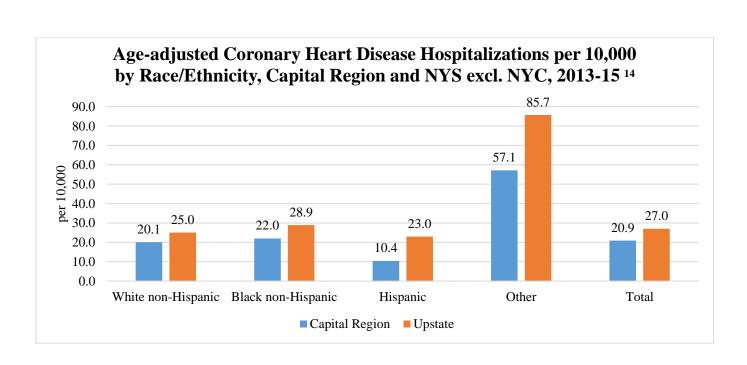


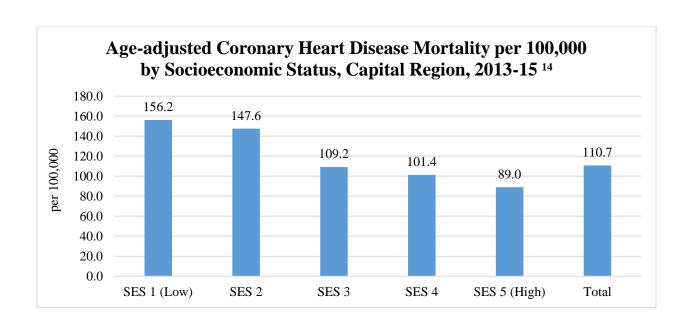


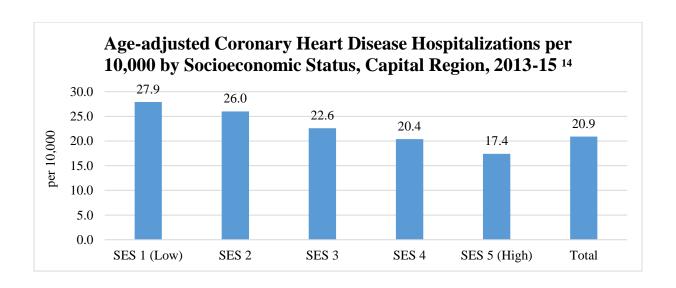












# **Heart Attack (Acute Myocardial Infarction)**

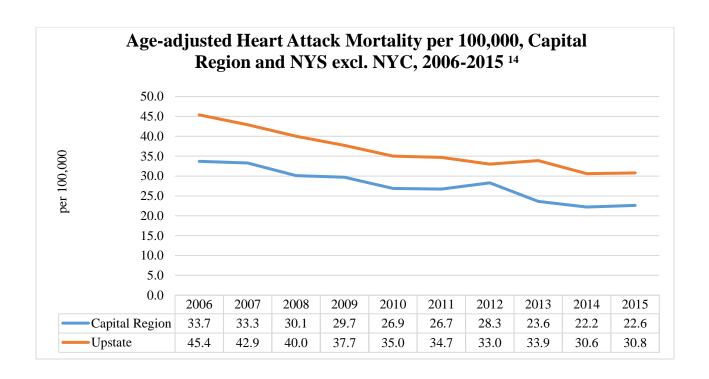
#### Highlights:

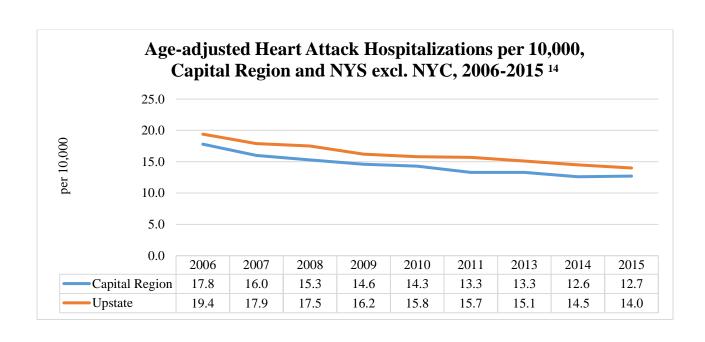
#### Heart Attack Mortality

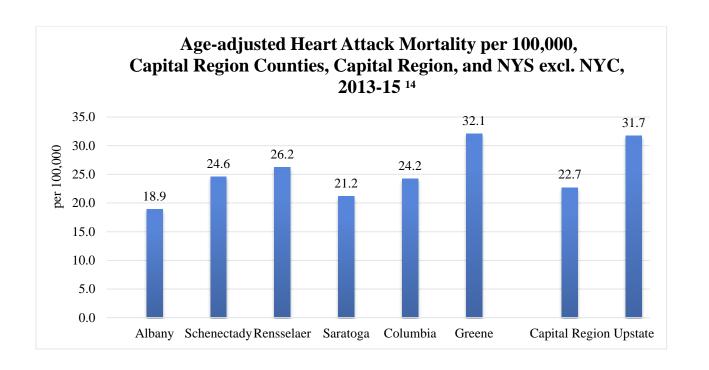
- An average of 285 Capital Region residents died from heart attack each year (2013-15) for an age-adjusted rate of 22.7/100,000, 28% lower than Upstate.
- Over the last decade, the Capital Region's age-adjusted heart attack mortality decreased 33% from 33.7 in 2006 to 22.6 in 2015.
- Greene (32.1) was the only Capital Region county that had an age-adjusted heart attack mortality rate higher than Upstate.
- Capital Region males had over 65% higher age-adjusted heart attack mortality rate than female residents (29.0 vs 17.6).
- Heart Attack mortality rates increase with age.
- Black non-Hispanic Capital Region residents had a 19% higher age-adjusted heart attack mortality rate than their white non-Hispanic counterparts (26.8 vs 22.6). The heart attack rate for Hispanic residents (19.3) was 15% lower than white non-Hispanic residents.
- Age-adjusted heart attack mortality rates decreased with SES. SES 1 had almost 50% higher CHD rates compared to SES 5 (25.3 vs 17.1).

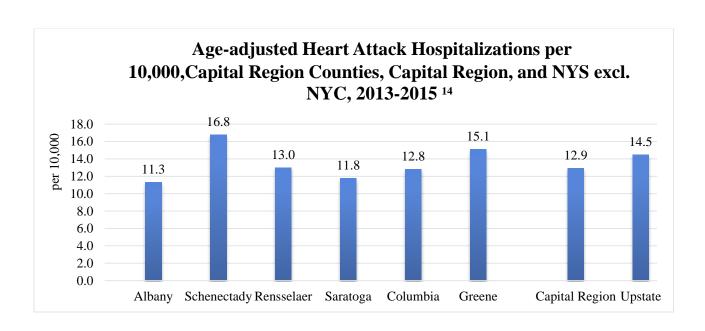
#### **Heart Attack Hospitalizations**

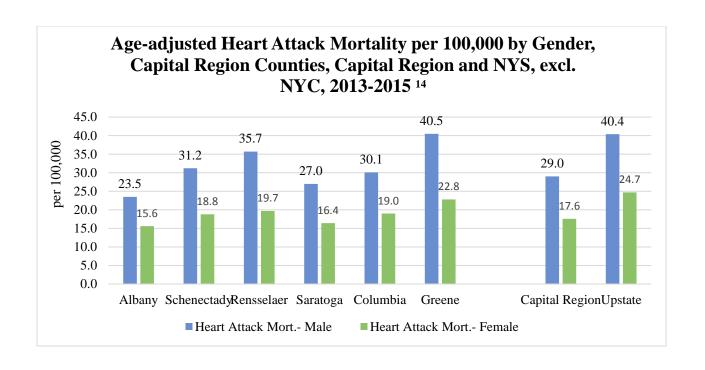
- An average of 1,550 Capital Region residents were hospitalized for heart attack each year (2013-15) for an age-adjusted rate of 12.9/10,000, 11% lower than Upstate.
- Over the last decade, the Capital Region's age-adjusted heart attack hospitalization rate decreased 29% from 17.8 in 2006 to 12.7 in 2015.
- Schenectady (16.8) had the highest age-adjusted heart attack hospitalization rate in the Region, and fell into the 3<sup>rd</sup> risk quartile for all NYS counties. Greene (15.1) was the only other Capital Region County that did not meet the Prevention Agenda Objective of 14.0/10.000.
- Capital Region males had an 86% higher age-adjusted heart attack hospitalization rate than female residents (17.1 vs 9.2).
- Heart attack hospitalization rates increase with age.
- Black non-Hispanic Capital Region residents had similar age-adjusted heart attack hospitalization rates as their white non-Hispanic counterparts (12.5 vs 12.4). The heart attack hospitalization rate for Hispanic residents (6.4) was 48% lower than white non-Hispanic residents.
- Age-adjusted heart attack hospitalization rates decreased with SES. SES 1 had over 70% higher heart attack hospitalization rates compared to SES 5 (18.5 vs 10.8).

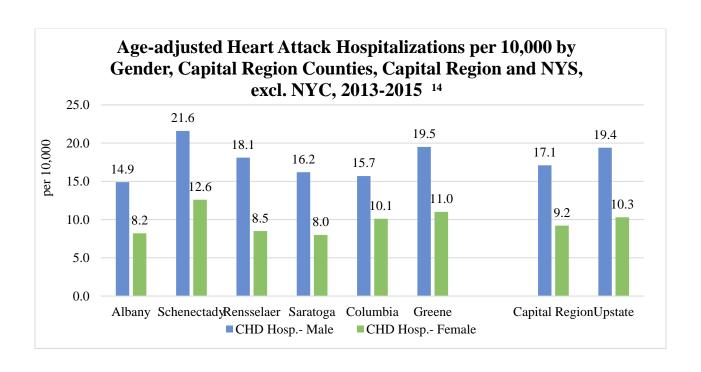


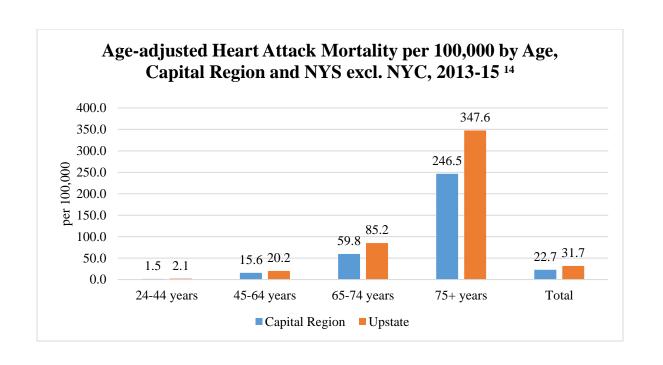


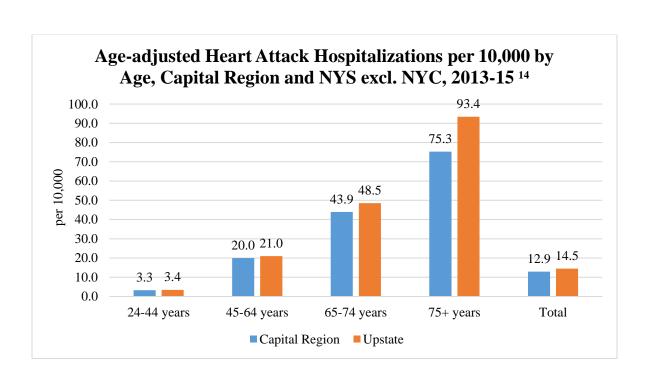


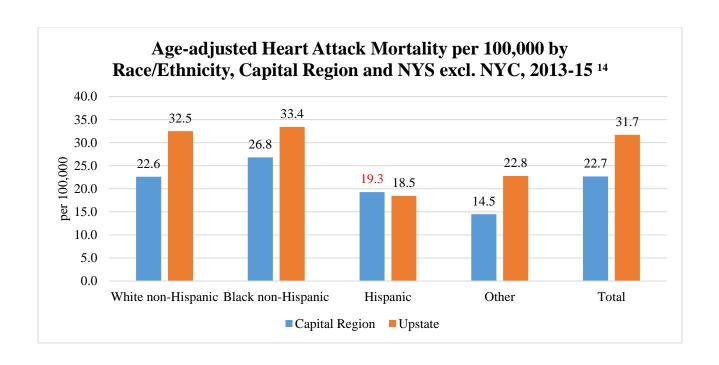


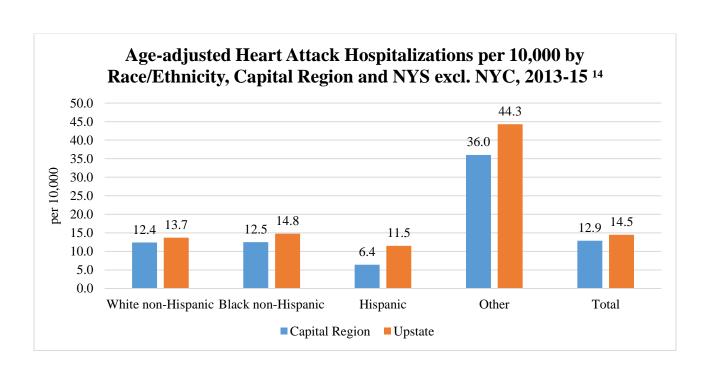


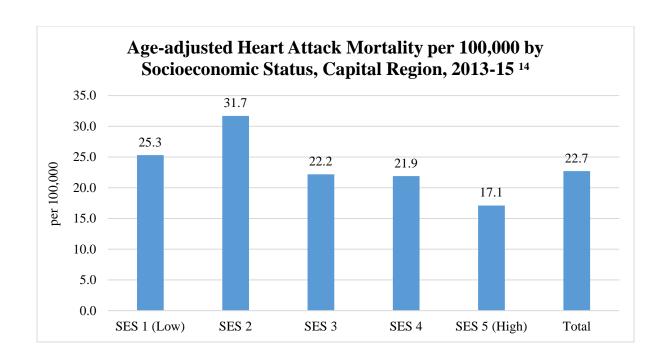


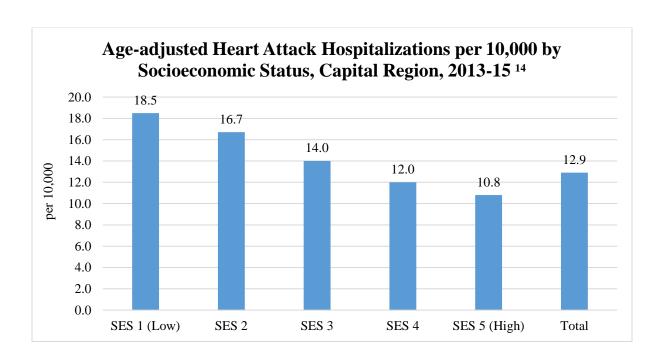












# **Congestive Heart Failure (CHF)**

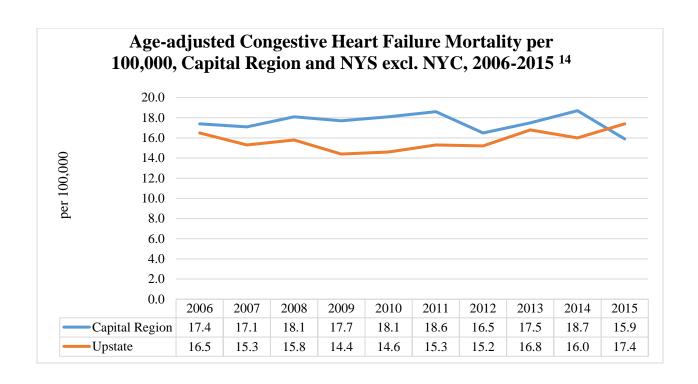
#### Highlights:

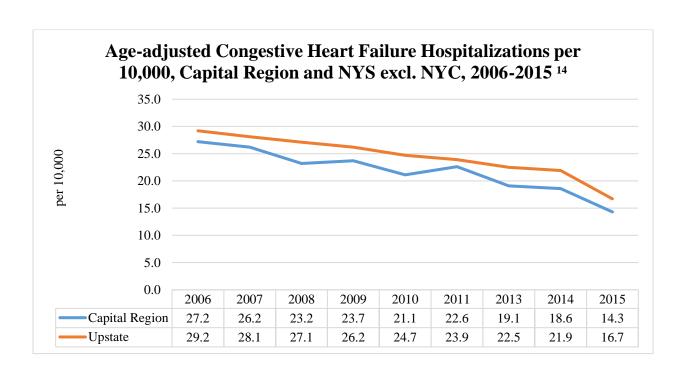
#### **CHF Mortality**

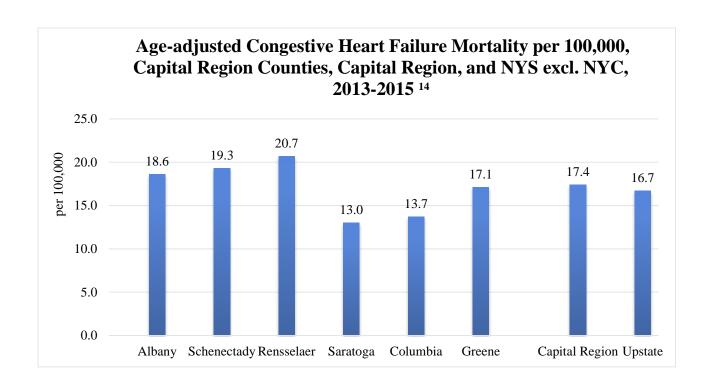
- An average of 227 Capital Region residents died from CHF each year (2013-15) for an age-adjusted rate of 17.4/100,000, 4% higher than Upstate.
- Over the last decade, the Capital Region's age-adjusted CHF mortality was fairly static, but with a 15% decrease from 2014 to 2015.
- Only Columbia and Saratoga counties had age-adjusted CHF mortality rates lower than Upstate. Rensselaer (20.7) and Schenectady (19.3) fell into the 4<sup>th</sup> risk quartile and Albany (18.6) and Greene (17.1) fell into the 3<sup>rd</sup> risk quartile for all NYS counties.
- Capital Region males had a 34% higher age-adjusted CHF mortality rate than female residents (20.6 vs 15.4).
- CHF mortality rates increase with age.
- Black non-Hispanic Capital Region residents actually had a 20% lower age-adjusted CHF mortality rate than their white non-Hispanic counterparts (13.9 vs 17.5). The CHF rate for Hispanic residents (18.5) was slightly higher than white non-Hispanic residents.
- Only low SES 1 had a higher age-adjusted CHF mortality rate (20.1) compared to residents of other SES levels (range: 16.5 to 17.8).

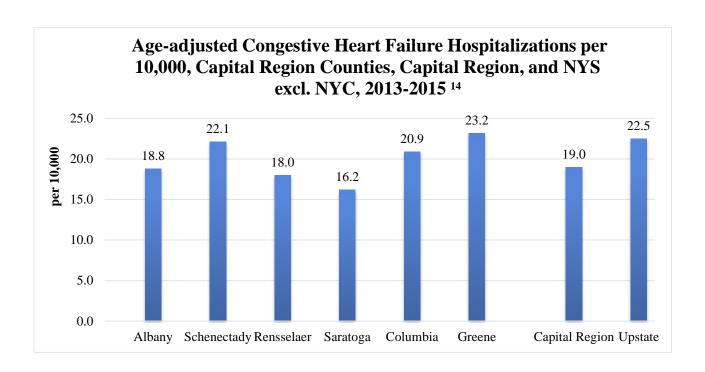
# **CHF** Hospitalizations

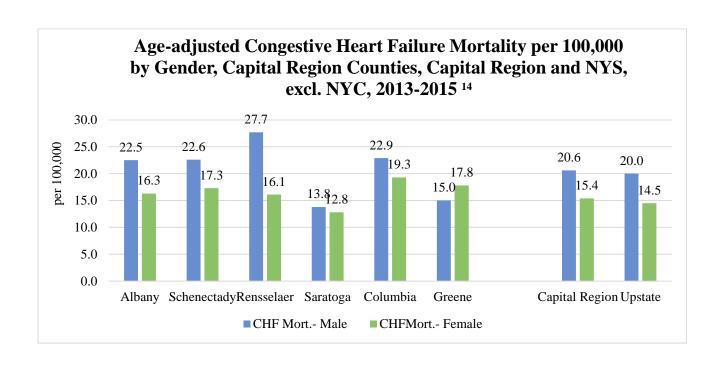
- An average of 2,325 Capital Region residents were hospitalized for CHF each year (2013-15) for an age-adjusted rate of 19.0/10,000, 16% lower than Upstate.
- Over the last decade, the Capital Region's age-adjusted CHF hospitalization rate decreased almost 50% from 27.2 in 2006 to 14.3 in 2015.
- Greene (23.2) was the only Capital Region with an age-adjusted CHF hospitalization rates higher than Upstate, and fell into the 3<sup>rd</sup> risk quartile for all NYS counties.
- Capital Region males had a 32% higher age-adjusted CHF hospitalization rate than female residents (22.0 vs 16.7).
- CHF hospitalization rates increase with age.
- Black non-Hispanic Capital Region residents had twice as high an age-adjusted CHF hospitalization rate compared to their white non-Hispanic counterparts (35.1 vs 17.6). The CHF rate for Hispanic residents (17.5) was similar to white non-Hispanic residents.
- Age-adjusted CHF hospitalization rates decreased with SES. SES 1 had 130% higher CHF rates compared to SES 5 (35.3 vs 15.4).

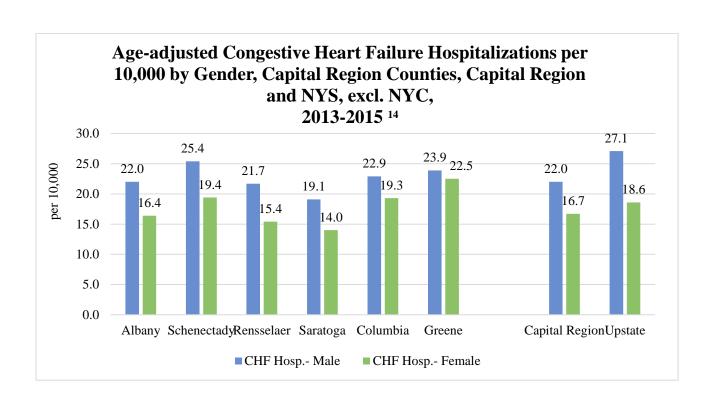


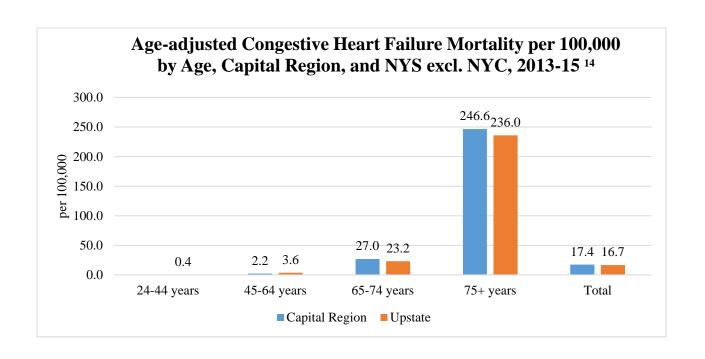


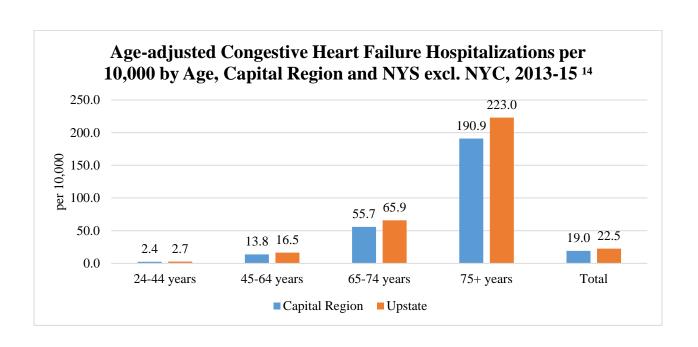


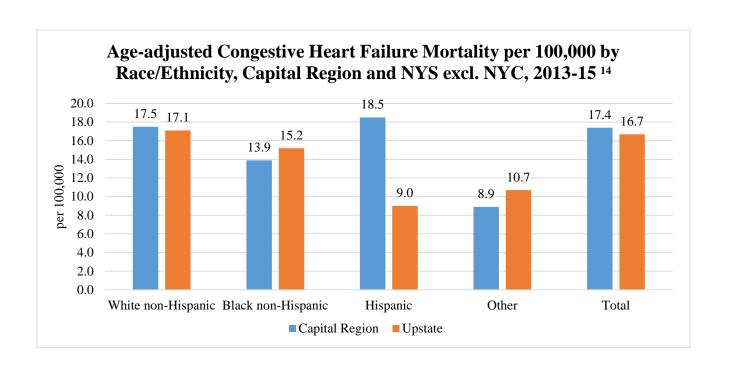


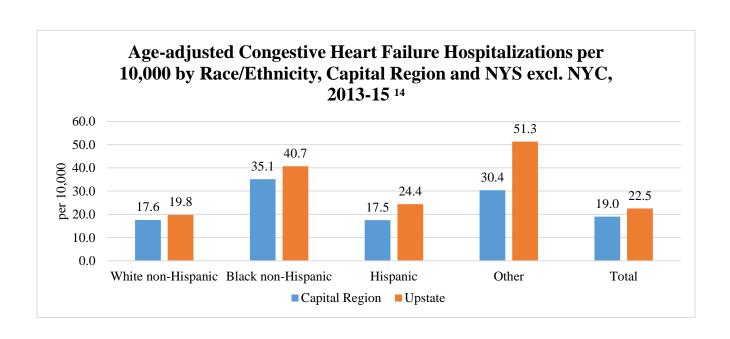


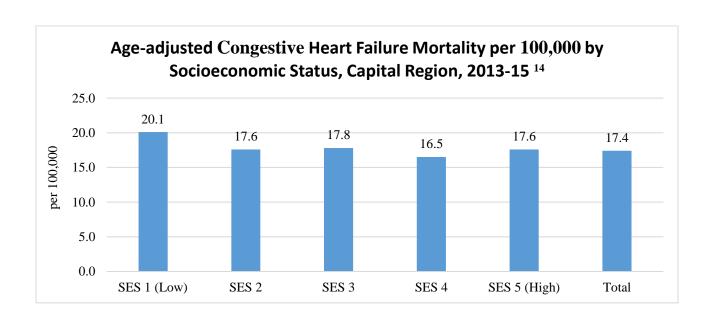


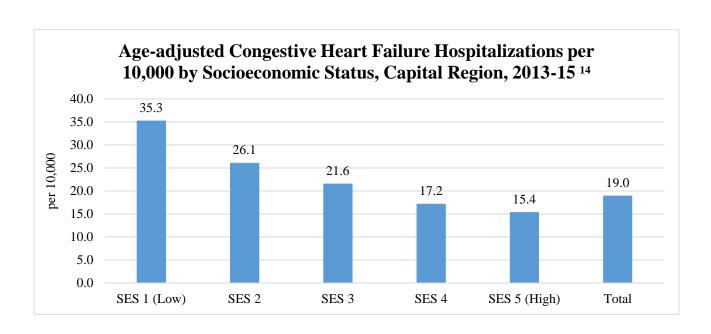












## **Cerebrovascular Disease (Stroke)**

#### Highlights:

#### Stroke Mortality

- An average of 345 Capital Region residents died from stroke each year (2013-15) for an age-adjusted rate of 27.5/100,000, similar to Upstate.
- Over the last decade, the Capital Region's age-adjusted stroke mortality decreased 22% from 36.0 in 2006 to 28.1 in 2015.
- Columbia (31.3) and Schenectady (31.2) were the only Capital Region counties that had an age-adjusted stroke mortality rate higher than Upstate; both fell into the 3<sup>rd</sup> risk quartile for all NYS counties.
- Capital Region males had a similar age-adjusted stroke mortality rate to female residents (27.5 vs 27.0).
- Stroke mortality rates increase with age.
- Black non-Hispanic Capital Region residents had a 4% lower age-adjusted stroke mortality rate than their white non-Hispanic counterparts (26.2 vs 27.3). The stroke mortality rate for Hispanic residents (22.9) was 16% lower than white non-Hispanic residents.
- Age-adjusted stroke mortality rates decreased with socioeconomic status. SES 1 had over 35% higher rates compared to SES 5 (32.8 vs 24.2).

## **Stroke Hospitalizations**

- An average of 2,344 Capital Region residents were hospitalized for stroke each year (2013-15) for an age-adjusted rate of 19.4/10,000, 13% lower than Upstate.
- Over the last decade, the Capital Region's age-adjusted stroke hospitalization rate decreased 25% from 27.3 in 2006 to 20.4 in 2015.
- Schenectady and Greene (23.6) were the only counties in the Region with age-adjusted stroke hospitalization rates higher than Upstate, and fell into the 3<sup>rd</sup> risk quartile for all NYS counties.
- Capital Region males had a 23% higher age-adjusted stroke hospitalization rate than female residents (21.6 vs 17.6).
- Stroke hospitalization rates increase with age.
- Black non-Hispanic Capital Region residents had a 58% higher age-adjusted stroke hospitalization rates as their white non-Hispanic counterparts (28.7 vs 18.2). The stroke hospitalization rate for Hispanic residents (12.0) was 34% lower than white non-Hispanic residents.
- Age-adjusted stroke hospitalization rates decreased with socioeconomic status. SES 1 had almost 70% higher stroke hospitalization rates compared to SES 5 (29.4 vs 17.4).

