

## WHAT IS CARDIOVASCULAR DISEASE (CVD)?

Cardiovascular disease (CVD) encompasses diseases of the heart (cardio) and blood vessels (vascular). The most common forms of cardiovascular disease in seniors include [1]:

- ♥ **Coronary heart disease** – diseases of the coronary arteries and their complications, such as chest pain and/ or a heart attack.
- ♥ **Atherosclerosis** – the most common form of arteriosclerosis. It is a condition in which the walls of arteries become thick and stiff due to accumulation of fatty deposits and other substances.
- ♥ **High blood pressure** – also known as **hypertension**, is an excessive force of blood pumping through the blood vessels.
- ♥ **Stroke** – a sudden loss of brain function due to obstruction or complete blockage of blood flow to the brain.

## HOW PREVALENT IS CVD?

Cardiovascular disease is the number one killer of men and women in the United States, accounting for 36 percent of all deaths annually. The American Heart Association estimates that 74.9 million people in the US currently have some form of CVD. The cost for CVD-related medical care and disability in the United States during 2007 is expected to be \$431.8 billion. Additionally, 105.2 million people in the US currently have cholesterol levels that put them at risk for developing CVD. [2]

Heart disease and stroke alone accounted for 40 percent of all US deaths in 2002 for adults aged 65 or older. [3] Eighty-three percent of people who die from coronary heart disease and 72 percent of people who suffer a stroke in a given year are 65 or older. [4]

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## MEDICARE PREVENTIVE SERVICES POLICY RESOURCE CENTER

The Medicare Preventive Services Policy Resource Center is dedicated to identifying specific policy issues related to Medicare's disease prevention and early detection services. The Resource Center supports state legislative and outreach activity and serves as a clearinghouse of information and educational materials on Medicare's preventive services for state policymakers.

## SOURCES:

- [1] Mayo Clinic. 2005. Cardiovascular disease 101: know your heart and blood vessels. Retrieved on July 9, 2007 from <http://www.mayoclinic.com/health/cardiovascular-disease/HB00032>
- [2] American Heart Association. (2006) Heart Facts 2007. Retrieved July 9, 2007 from <http://www.americanheart.org/presenter.jhtml?identifier=1200026>.
- [3] CDC. (2006) State of Aging and Health 2007. Retrieved on June 30, 2007 from <http://www.cdc.gov/aging/saha.htm>.
- [4] American Heart Association. (2001) 2002 heart and stroke statistical update.
- [5] CDC. Eliminate disparities in Cardiovascular Disease (CVD). <http://www.cdc.gov/omh/AMH/factsheets/cardio.htm>.
- [6] USDHHS. (2005) High blood cholesterol: What you need to know. [http://www.nhlbi.nih.gov/health/public/heart/chohlhbc\\_what.htm](http://www.nhlbi.nih.gov/health/public/heart/chohlhbc_what.htm).
- [7] Brown, David L., Gregory L. Burke, John B. Kostis, Albert Oberman, Nathan Wong and Sylvia Wassertheil-Smoller: "Many postmenopausal women with cardiovascular disease don't use lifesaving aspirin therapy." Circulation: Journal of the American Heart Association, Feb 2005. <http://www.americanheart.org/presenter.jhtml?identifier=3028970>



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## WOMEN IN GOVERNMENT

# PREVENTING CARDIOVASCULAR DISEASE



## WHAT POLICYMAKERS NEED TO KNOW

## WHAT ARE THE RISK FACTORS FOR CVD?

The major risk factors for CVD that can be prevented or controlled include: smoking, high blood pressure, physical inactivity, obesity, diabetes, and high cholesterol. The more risks factors an individual has, the higher their chance for developing CVD.

## WHAT IS CHOLESTEROL?

High cholesterol is one of the major risk factors for developing CVD. Cholesterol is a fat-like substance that can build up in the walls of the arteries and over time lead to the narrowing and hardening of these arteries. This blockage can obstruct blood flow to the heart and may lead to chest pain, a heart attack, or stroke.

## WHAT CVD SCREENINGS ARE AVAILABLE TO MEDICARE BENEFICIARIES?

There are three forms of cholesterol that physicians monitor to measure risk of CVD. These are:

- ♥ **HDL-C (high density lipoprotein cholesterol)** – the good form of cholesterol. A higher level means lower risk for CVD.
- ♥ **LDL-C (low density lipoprotein cholesterol)** – the bad form of cholesterol. A higher level means higher risk for CVD.
- ♥ **Triglycerides** – a form of fat. Individuals with high triglyceride levels often also have high total cholesterol levels and increased risk for CVD.

## ARE THERE HEALTH DISPARITIES IN CVD PREVALENCE RATES?

Cardiovascular disease affects nearly half of all non-Hispanic black adults. Among this group, 44.6 percent of men and 49 percent of women have some form of CVD.<sup>[2]</sup>

In addition, studies have shown that socioeconomic status and education are correlated with a higher rate of CVD in minority populations.<sup>[5]</sup>

## WHAT CAN INDIVIDUALS DO TO PREVENT CVD?

Individuals should have their cholesterol, lipid, and triglyceride levels tested to monitor risk for CVD. Therapeutic lifestyle changes through smoking cessation, weight management, physical activity, and proper nutrition can help prevent and control CVD risk factors. Drug treatments are available to lower high blood pressure and cholesterol in individuals at high risk for CVD and should be used in conjunction with therapeutic lifestyle changes.<sup>[6]</sup> For other individuals, low-dose aspirin therapy has been shown to reduce the chances of a secondary heart attack or stroke in those who already have CVD.<sup>[7]</sup>

HDL-C Levels	
Less than 40 mg/dL (men), 50 mg/dL (women)	Low (high risk)
40 to 50 mg/dL (men)	Average
50 to 60 mg/dL (women)	Average
More than 60 mg/dL	High/Optimal
LDL-C Levels	
Less than 100 mg/dL	Optimal
100 to 129 mg/dL	Near Optimal/ Above Optimal
130 to 159 mg/dL	Borderline High
160 to 189 mg/dL	High
190 mg/dL and above	Very High
Triglyceride Levels	
Less than 150 mg/dL	Normal
150 to 199 mg/dL	Borderline-High
200 to 499 mg/dL	High
500 mg/dL and above	Very High

Source: American Heart Association.

## WHAT CAN STATE POLICYMAKERS DO TO HELP REDUCE THE BURDEN OF CVD?

Early detection and prevention are the best measures for reducing the burden of CVD. State policymakers can address the issue of CVD in their respective states by:

- ♥ **Collaborating with Department of Health officials, Medicare Program directors, the Center for Medicare and Medicaid Services, state departments of aging, and state offices of health to disseminate information about Medicare coverage of CVD screenings and other preventive services for beneficiaries;**
  - Visit our website at [www.womeningovernment.org/medicare](http://www.womeningovernment.org/medicare) to view contact information for these offices in your states.
- ♥ **Designating a day/week/month for CVD awareness;**
  - Call our Policy Resource Center at 888-333-0164 to request copies of sample resolutions and legislation from other states on these topics.
- ♥ **Emphasizing the importance of prevention and early detection through education and awareness; and,**
  - Email us at [medicare@womeningovernment.org](mailto:medicare@womeningovernment.org) to request a copy of our multimedia clip from our Prevention Takes More Than An Apple Campaign regarding Medicare's preventive services for your website or to share with constituents.
- ♥ **Appropriating funds for disease management and screening programs.**
  - Work with colleagues in your states to provide specific funding for essential early detection screening programs, educational campaigns, and disease management programs for your constituents.

