nebraska HDSP program

SCOTTS BLUFF
County Health Department

| 2011** | STROKE BURDEN

A stroke occurs when the blood supply to part of the brain is blocked or when a blood vessel in the brain bursts, causing damage to part of the brain. A stroke is sometimes called a brain attack[1].

There are two main types of stroke. An ischemic stroke occurs when there is blockage in a blood vessel supplying oxygen to the brain. Approximately 85 percent of all strokes fall into this category. A hemorrhagic stroke occurs when a blood vessel in the brain ruptures[2].

A transient ischemic attack (TIA) is a temporary interruption in the blood supply to the brain. Sometimes a TIA is called a mini-stroke. It starts just like a stroke, but symptoms clear within 24 hours. A TIA is a warning that the person is at risk for a more serious stroke[2].

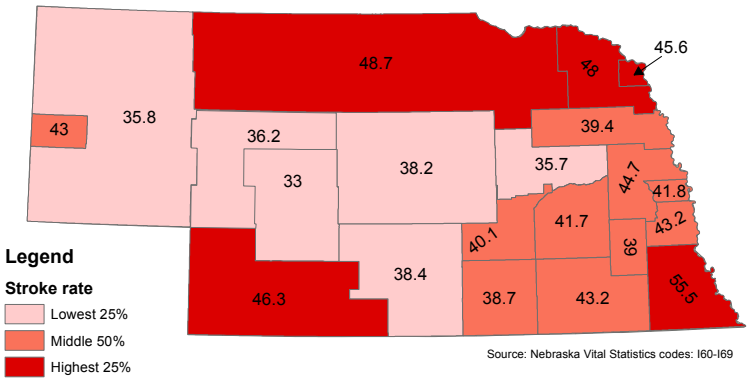
PREVALENCE[3]

- During 2008-2010, approximately 3.2% (900) of all adults reported ever being diagnosed with a stroke.

DEATH[4]

- Stroke was the **fourth leading cause of death** and claimed 21 lives, accounting for approximately 1 in every 20 deaths.
- Stroke death rates increase with age but 1 in 7 people who died from stroke between 2006 and 2010 were less than 65 years of age.
- The stroke age-adjusted death rate was 51% **higher** for women than men.

Stroke Mortality by Local Health Departments
Age-Adjusted Rates per 100,000 population 2006-2010



Source: Nebraska Vital Statistics codes: I60-I69

HOSPITALIZATIONS[5]

- There were 77 hospitalizations among residents due to stroke.

Stroke Hospitalizations Outcomes
Scotts Bluff County Health Department Residents, 2010

	Stroke Overall[6]	Ischemic Stroke[7]	Hemorrhagic Stroke[8]
Number of hospitalizations	77	59	13
Hospitalization rate(age-adjusted)[8]	15.8	11.9	2.5
Number of residents that received (one or more) hospitalizations	68	52	13
Average length of stay per hospitalization(in days)	4.0	3.6	6.0

ESTIMATED CHARGES[5]

- Total hospital charges for stroke increased by **$1.4 million** between 2001 and 2010, from $900,000 to $2.3 million.
- The average charge per stroke hospitalization was $29,300 in 2010.
- In 2010, Medicare was charged an estimated $1.3 million for hospitalizations due to stroke, accounting for approximately 57% of all hospitalization charges for stroke.

* All information on this fact sheet is for persons that reside in counties served by Scotts Bluff County Health Department

** Published December 2011. All data is the most current data available at the time of publishment.

STROKE MODIFIABLE RISK FACTORS

HIGH BLOOD PRESSURE[3]

- Nearly 1 in every 3 (29.6%) adults reported being told by a healthcare professional that they had high blood pressure for the years 2007 and 2009 combined.
- Over half (55.6%) of adults age 65 and older had high blood pressure for the years 2007 and 2009 combined.

SMOKING[3]

- Approximately 1 in 5 adults (19.9%) reported smoking cigarettes for the years 2007-2010 combined.

HIGH BLOOD CHOLESTEROL[3]

- Approximately 1 in every 4 (29.4%) adults had not had a blood cholesterol screening in the past five years for the years 2007 and 2009 combined.
- Of adults that reported having their blood cholesterol checked, more than 1 in every 3 (35.1%) reported being told by a healthcare professional that they had high blood cholesterol for the years 2007 and 2009 combined.

PHYSICAL INACTIVITY[3]

- 2 in 5 adults (42.8%) did not meet recommended guidelines for physical activity for the years 2007 and 2009 combined.

UNHEALTHY EATING[3]

- Fewer than 1 in 4 adults (22.9%) consumed five or more servings of fruits and vegetables per day for 2007 and 2009 combined.

OVERWEIGHT & OBESITY[3]

- Approximately 2 in 3 adults were overweight (34.8%) or obese (32.1%) for the years 2007-2010 combined.
- Males (73.6%) were significantly more likely to be overweight or obese than females (60.7%) for 2007-2010 combined.
- Hispanics (52.5%) were significantly more likely to be obese than whites (27.3%) for 2007-2010 combined[10].

DIABETES[3]

- Nearly 1 in 9 (10.7%) adults reported ever being diagnosed with diabetes for 2007-2010 combined.
- 1 out of every 5 adults (20.6%) 65 and older reported ever being diagnosed with diabetes for the years 2007-2010 combined.
- Hispanics (17.0%) were significantly more likely to have diabetes than whites (8.6%) for 2007-2010 combined[10].

MULTIPLE RISK FACTORS[3]

- Among adults, more than 9 in 10 (95.9%) had one or more CVD risk factors, almost 3 in 4 (71.9%) had 2 or more CVD risk factors, and more than 2 in 5 (43.0%) had 3 or more CVD risk factors for 2007 and 2009 combined.

SIGNS & SYMPTOMS

HEART ATTACK

- Chest discomfort: Most heart attacks involve discomfort in the center of the chest that lasts for more than a few minutes or goes away and comes back. The discomfort can feel like uncomfortable pressure, squeezing, fullness, or pain.
- Discomfort in other areas of the upper body: Can include pain or discomfort in one or both arms, the back, neck, jaw, or stomach.
- Shortness of breath: Often occurs along with chest discomfort, but it also can occur before chest discomfort.
- Other symptoms: May include breaking out in a cold sweat, nausea, or light-headedness.

STROKE

- Sudden numbness or weakness of the face, arm or leg, especially on one side of the body.
- Sudden confusion, trouble speaking or understanding.
- Sudden trouble seeing in one or both eyes.
- Sudden trouble walking, dizziness, loss of balance or coordination.
- Sudden, severe headache with no known cause.

For more information, contact:
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2. Centers for Disease Control and Prevention http://www.cdc.gov/stroke/types_of_stroke.htm
3. Nebraska Behavioral Risk Factor Surveillance System. Year 2010. Nebraska Department of Health and Human Services. Financial Services, Research and Performance Management. Public Health Support Unit.
4. Nebraska Vital Records. Year 2010. Nebraska Department of Health and Human Services. Financial Services, Research and Performance Management.
5. Nebraska Hospital Discharge Data. Year 2010.
6. ICD-9 codes 430-434, 436-438
7. ICD-9 codes 433-434, 436
8. ICD-9 codes 430-432
9. Age-adjusted per 10,000 population (2000 U.S. standard population)
10. Data age-adjusted due to age differences in racial and ethnic groups.

Department of Health & Human Services
DHHS
NEBRASKA

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