

Vermont Department of Health

Chronic Disease in Vermont: An Overview of 2012



Guidance • Support • Prevention • Protection

September, 2013

 VERMONT
DEPARTMENT OF HEALTH

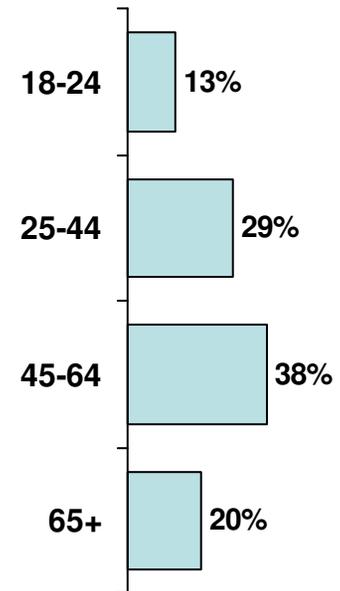
Demographics of Adult Vermonters

Vermont has an aging adult population. One-fifth of the adult population is 65 or older and nearly two-fifths are between age 45 and 64 years of age. Nearly a third of adults are age 25 to 44 years and slightly more than one in ten are age 18 to 24 years.

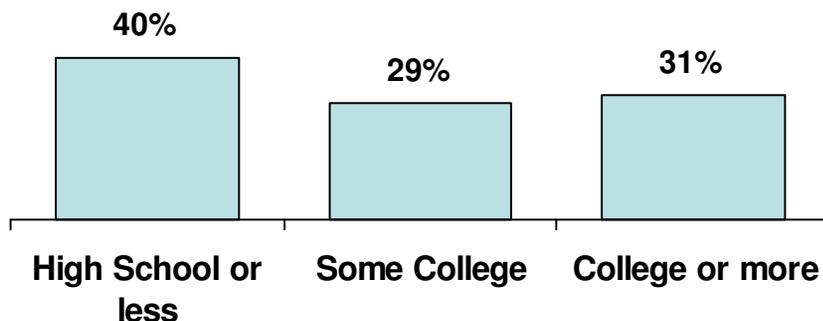
Nearly a third of adult Vermonters have at least a four-year college degree. However, a significant proportion of the population do not have any education beyond high school (40%).

Slightly more than half of Vermonters earn less than \$50,000; while slightly less than half earn more than \$50,000 a year.

Age (years)



Education



Income



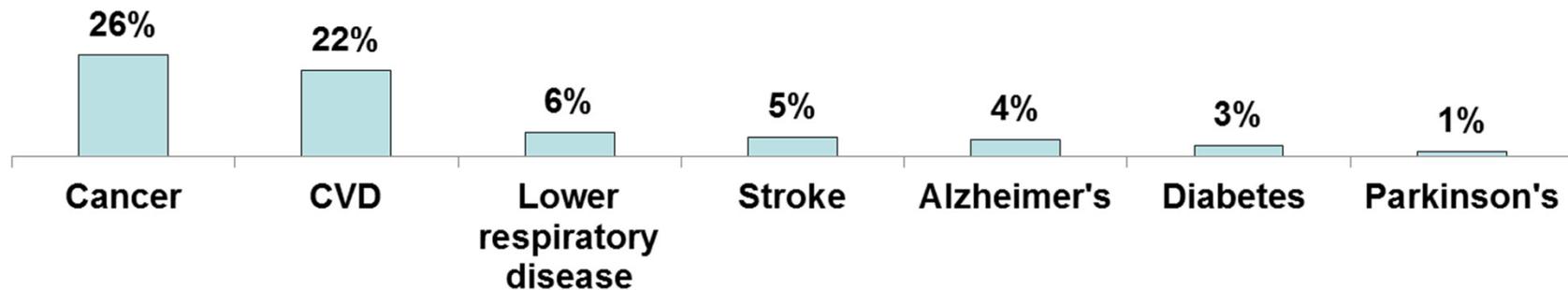
Leading Causes of Death

In 2011, the three leading causes of death in Vermont are related to chronic disease. Nearly half of all deaths are caused by cancer or heart disease. Chronic lower respiratory disease is the third leading cause of death.

The fourth leading cause of death is not related to chronic disease – accidental injury accounts for about six percent of death in Vermont.

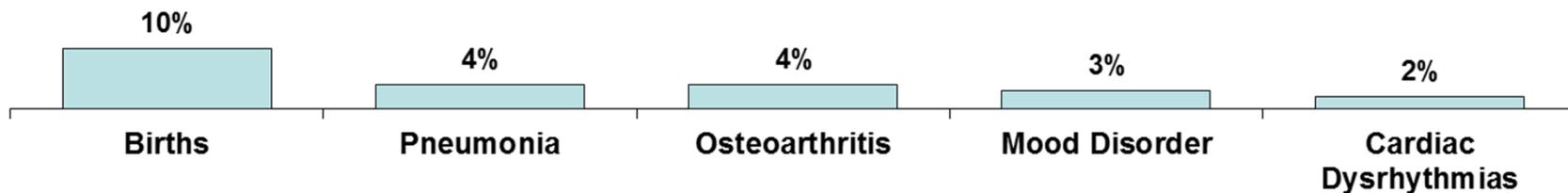
The fifth leading cause of death is stroke. Alzheimer's, diabetes, and Parkinson's are responsible for slightly fewer deaths in the state, but are still in the top 10 leading causes of death.

Leading Cause of Death (% of total resident deaths)



Leading Diagnoses of Hospital Discharges

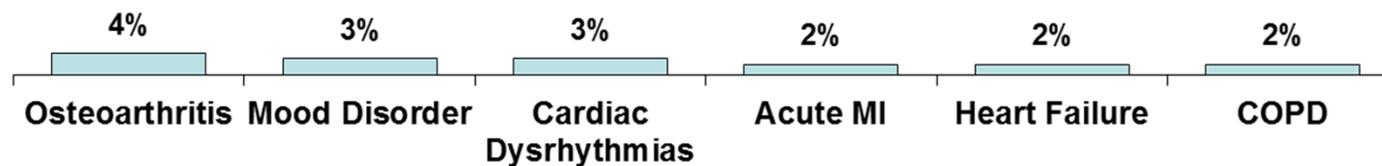
The leading primary diagnosis associated with a hospital discharge among Vermonters is not related to chronic disease. Live births were the most common hospital discharges in 2009. Independently, pneumonia and osteoarthritis, were the next most common primary diagnoses associated with a hospital discharge.



Leading Diagnoses of Hospital Discharges – For Chronic Disease

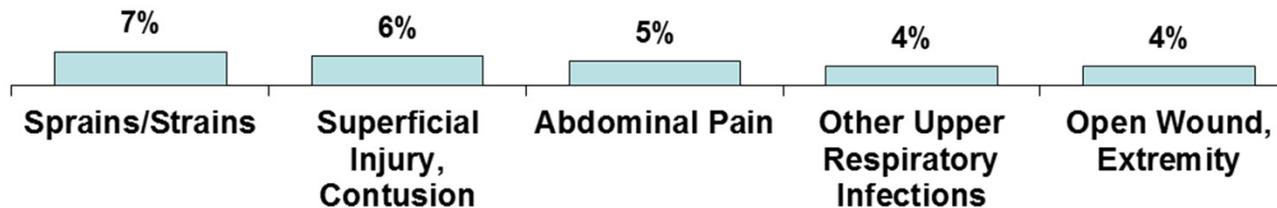
The leading chronic disease discharges for hospitalizations are osteoarthritis, mood disorders, and cardiac dysrhythmias.

Three of the six leading chronic disease diagnosis are related to cardiovascular disease. Combined, these three diagnosis make up 7% of all hospitalizations.



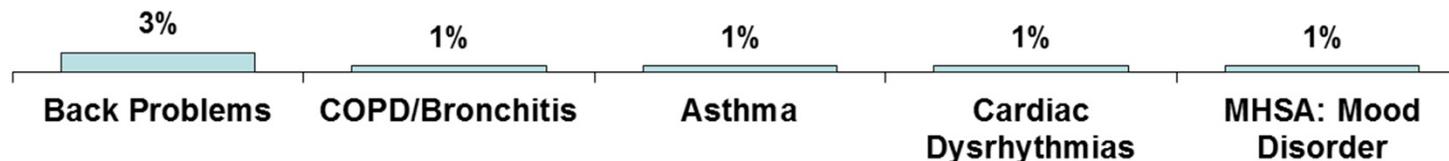
Leading Diagnoses of Emergency Department Discharges

As with hospitalizations, chronic disease does not account for the leading causes of emergency department visits in Vermont. Injury accounts for four of the top five causes and abdominal pain is the third leading cause of an ED visit.



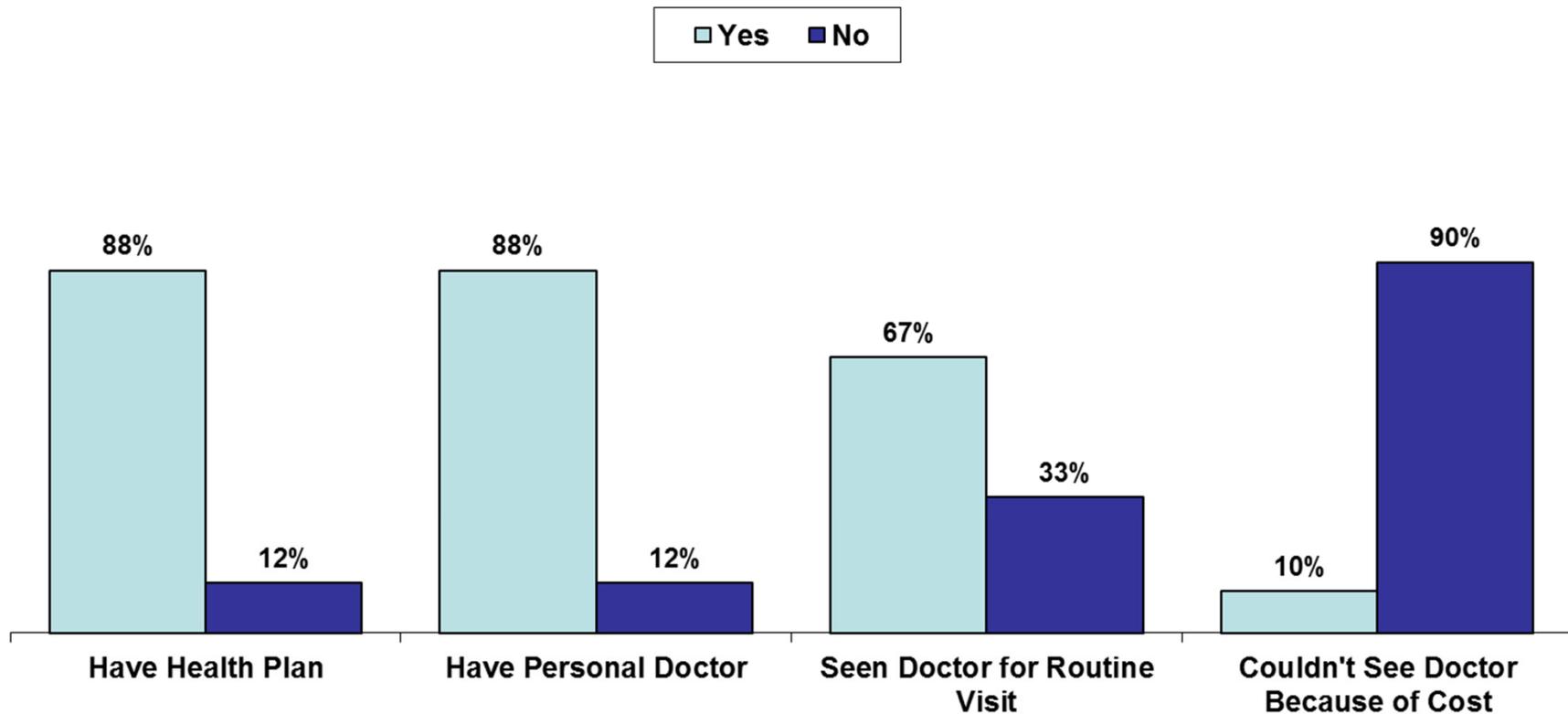
Leading Diagnoses of Emergency Department Discharges - For Chronic Disease

The primary chronic conditions diagnosed upon emergency department discharge include: back problems, respiratory problems, cardiac events and mental health/substance abuse.



Health Care Access

Nine out of ten Vermonters have access to health insurance, have someone they consider their personal doctor and did not find “cost” to be a barrier to seeing a doctor in the past year. Two-thirds have been to see their doctor for a routine care visit in the past year.



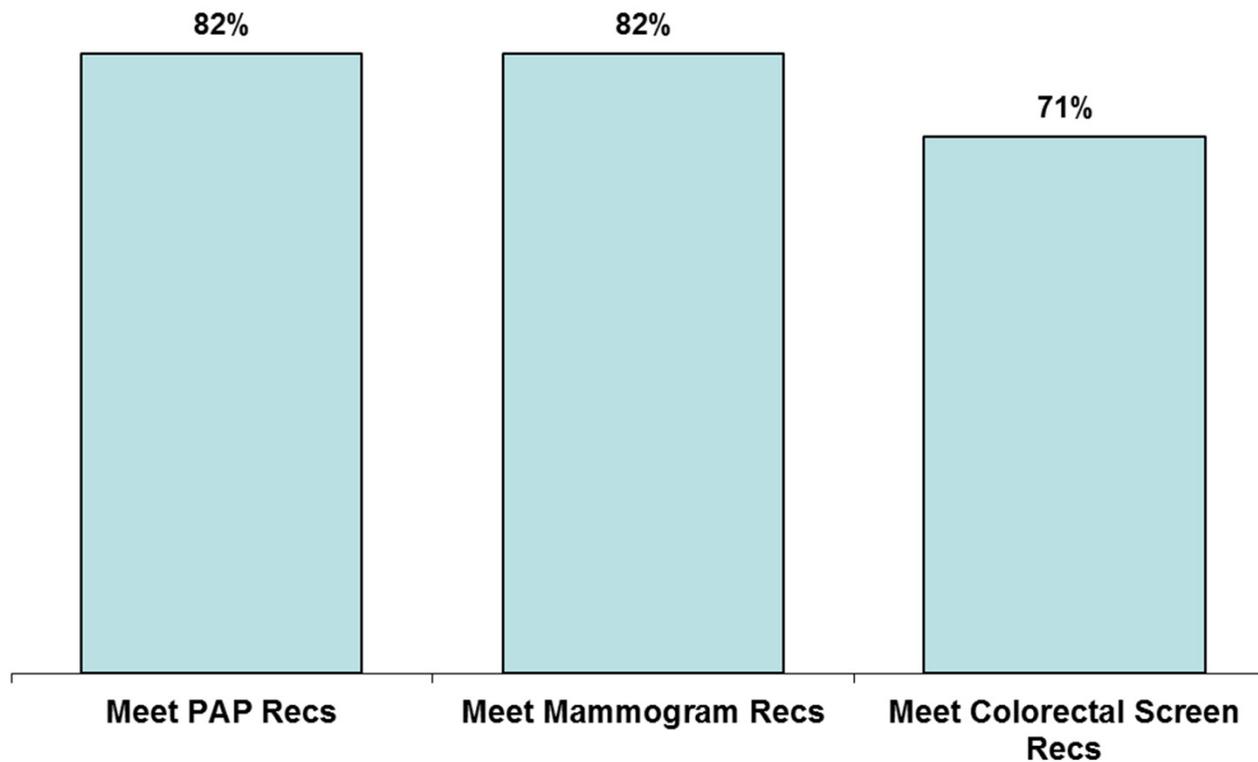
Health Care Access Trends

None of the health care access measures have changed significantly since 2000.

	Do Not Have Health Plan (18-64 yrs)	Do Not Have Personal Physician	Not Seen Doc in 12 Months	Could Not See Doctor Due To Cost
<i>2002</i>	14%	15%	--	--
<i>2003</i>	12%	15%	--	9%
<i>2004</i>	15%	14%	--	11%
<i>2005</i>	14%	12%	38%	10%
<i>2006</i>	13%	12%	36%	10%
<i>2007</i>	13%	14%	35%	10%
<i>2008</i>	13%	11%	34%	10%
<i>2009</i>	12%	13%	36%	11%
<i>2010</i>	10%	10%	35%	9%
2011	11%	12%	33%	11%
2012	12%	12%	33%	10%

Preventative Behaviors

Of those persons recommended to have cervical, breast, and colorectal cancer screenings, many have indeed had the recommended screenings in the recommended time frame.



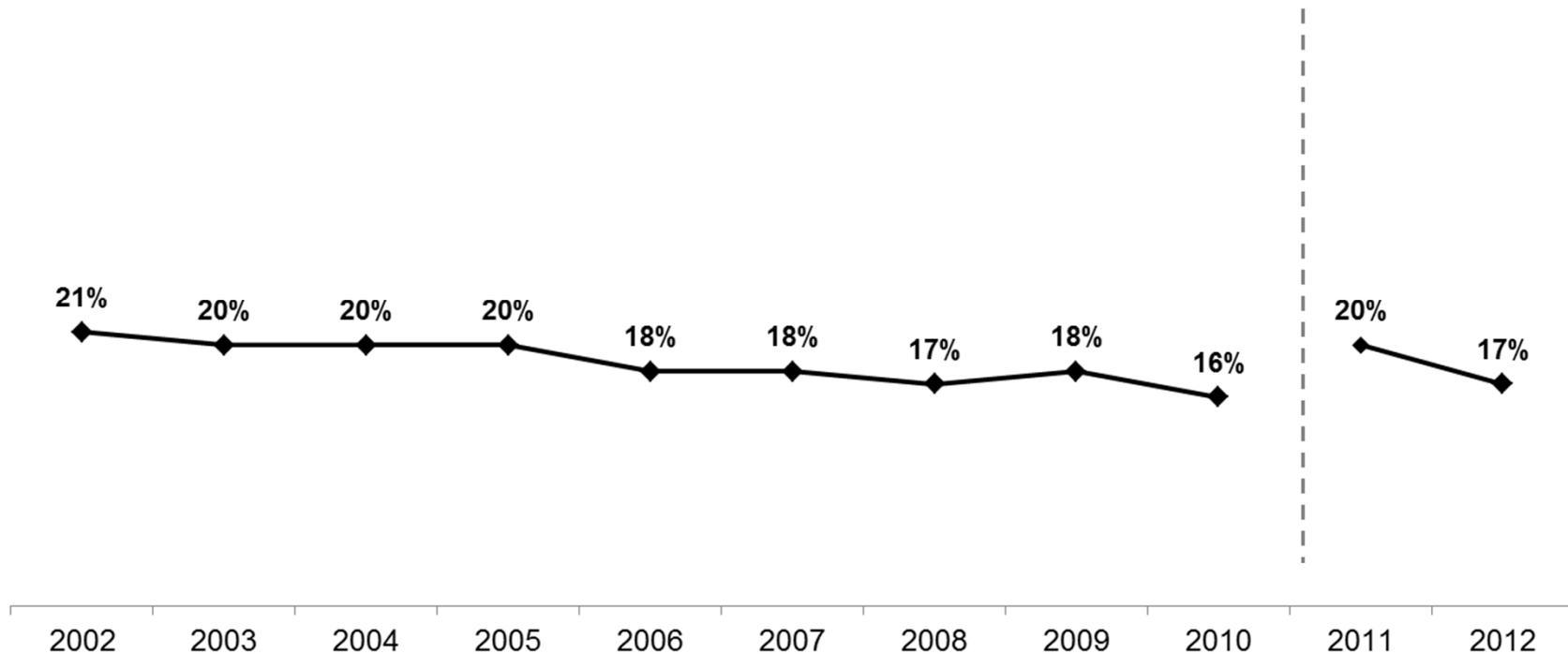
Preventative Behavior Trends

None of the preventative care measures have changed significantly since 2002.

	Mammogram	PAP	Colorectal	Prostate	5 A Day	Meets PA Recs
<i>2002</i>	<i>84%</i>	<i>89%</i>	--	<i>74%</i>	--	--
<i>2003</i>	<i>84%</i>	<i>89%</i>	--	--	--	--
<i>2004</i>	<i>80%</i>	<i>88%</i>	--	<i>71%</i>	--	--
<i>2005</i>	<i>84%</i>	<i>88%</i>	--	--	--	--
<i>2006</i>	<i>84%</i>	<i>88%</i>	--	<i>74%</i>	--	--
<i>2007</i>	--	--	--	--	--	--
<i>2008</i>	<i>83%</i>	<i>87%</i>	<i>68%</i>	<i>77%</i>	--	--
<i>2009</i>	--	--	--	--	--	--
<i>2010</i>	<i>83%</i>	<i>84%</i>	<i>71%</i>	<i>78%</i>	--	--
2011	--	--	--	--	23%	59%
2012	82%	82%	71%	63%	--	--

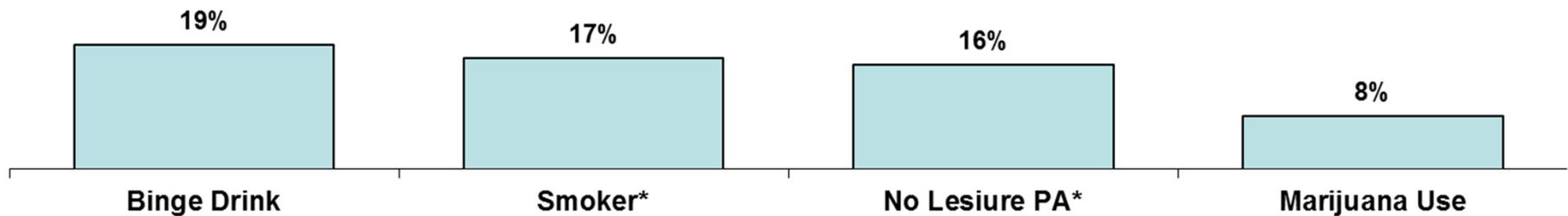
Smoking Prevalence

Smoking has significantly declined since 2000. While smoking prevalence in 2011 appeared to increase, this at least is partially due to the change in BRFSS weighting methodology. Smoking prevalence in 2012 did not significantly change from the previous year.



Risk Behaviors

Just fewer than one in five do not get any physical activity in their leisure time, binge drink or smoke. Just less than one in ten report current marijuana use.



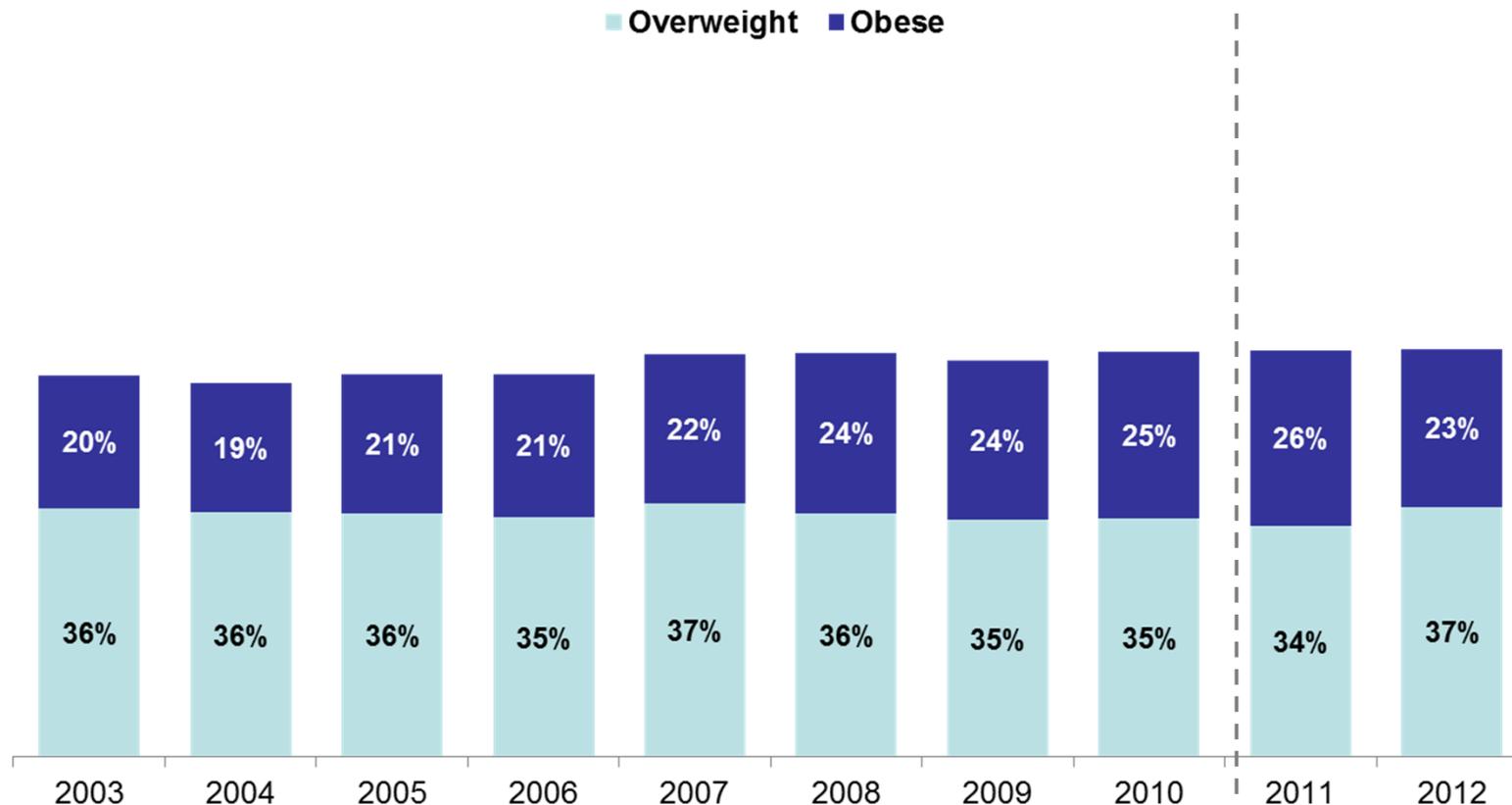
Other Risk Behavior Trends

The proportion of those reporting no leisure time for physical activity significantly decreased from 2011 to 2012. This is the only statistically significant change in trend of a risk behavior since 2006.

	No Leisure Time PA*	Binge Drink*	Marijuana Use
2006	17%	17%	--
2007	18%	18%	8%
2008	19%	17%	7%
2009	20%	17%	8%
2010	17%	17%	8%
2011	21%	18%	10%
2012	16%	19%	8%

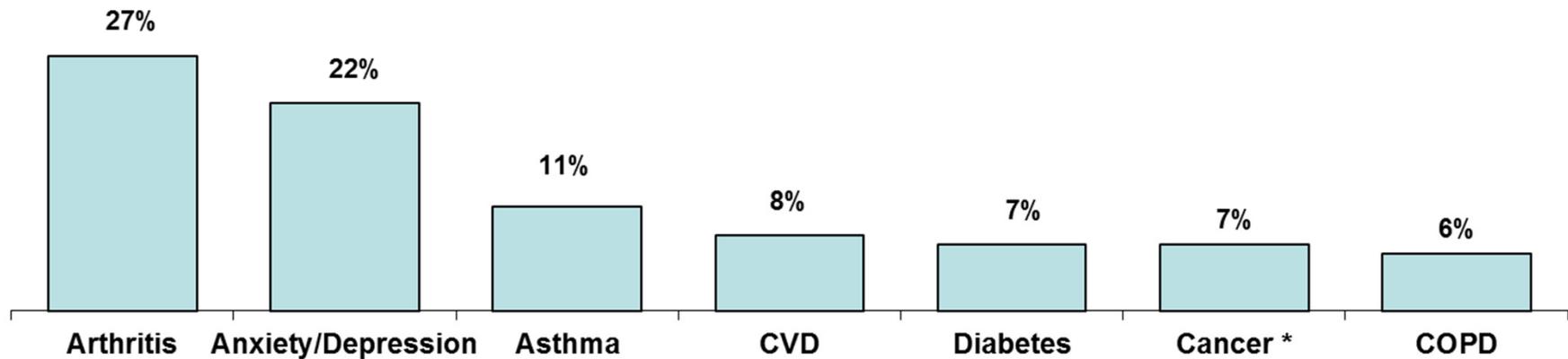
Obesity and Overweight

More than a third of Vermonters, age 20 and older, were overweight, and another quarter were considered obese in 2012. Neither obesity nor overweight prevalence significantly increased from 2011 to 2012. In 2003, 20% of Vermonters were obese and it increased to a quarter of adult Vermonters in 2010, a statistically significant increase.



Chronic Disease Prevalence

Arthritis is the most common chronic disease in Vermont. Slightly more than one fifth of Vermonters have anxiety and/or depression issues. Asthma impacts approximately one in ten adult Vermonters. Slightly fewer Vermonters have CVD, diabetes, or cancer. COPD effects 6% of the adult population.



2012 BRFSS,

*Cancer prevalence does not include squamous cell or basal cell carcinomas and is calculated according to cancer program methods

Chronic Disease Prevalence Trends

None of the chronic diseases listed below has increased significantly since 2002.

	Arthritis	Cancer	COPD	CVD	Hypertension	Depressive Disorder
<i>2002</i>	<i>25%</i>	--	<i>4%</i>	--	--	--
<i>2003</i>	<i>27%</i>	--	<i>4%</i>	<i>8%</i>	<i>22%</i>	--
<i>2004</i>	--	--	<i>4%</i>	<i>8%</i>	--	--
<i>2005</i>	<i>27%</i>	--	<i>5%</i>	<i>7%</i>	<i>22%</i>	--
<i>2006</i>	<i>25%</i>	--	--	<i>7%</i>	--	<i>20%</i>
<i>2007</i>	<i>28%</i>	--	<i>2%</i>	<i>7%</i>	<i>23%</i>	--
<i>2008</i>	--	--	<i>3%</i>	<i>8%</i>	--	<i>21%</i>
<i>2009</i>	<i>29%</i>	--	--	<i>7%</i>	<i>25%</i>	--
<i>2010</i>	--	--	--	<i>7%</i>	--	<i>21%</i>
2011	27%	7%	5%	8%	27%	23%
2012	27%	7%	6%	8%	--	22%

Multiple Chronic Conditions

More than half of adult Vermonters have at least one chronic condition. (*Chronic conditions include: diabetes, depression, arthritis, cardiovascular disease, asthma, COPD, cancer, and obesity.*)

