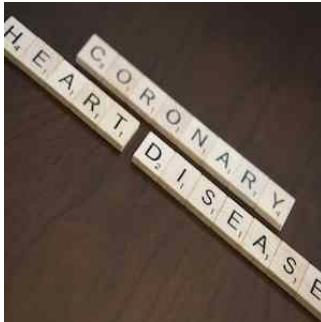

Study: Lower CHD Risk in Minority Populations



A ten-year study of over 1.3 million Kaiser Permanente members in Northern California shows that blacks, Latinos and Asians have lower risk of coronary heart disease as compared to whites. The study is published in the *American Journal of Preventive Medicine*.

The study evaluated ethnic differences in risk of CHD within a diverse population - including whites, blacks, Asians and Latinos - who had uniform access to care. The study included 1,344,899 members out of which 64 percent were white, 14 percent were Asian, 13 percent were Latino and 9 percent were black. Over 10 percent of Latinos and nearly 20 percent of blacks were from economically disadvantaged neighbourhoods. Both men and women were included in the study and members were between 30 to 90 years of age.

The study researchers evaluated the ethnic differences in risk of future CHD. Members were divided into four clinical risk categories including those with no diabetes with no prior coronary heart disease; no diabetes with prior coronary heart disease; diabetes with no prior coronary heart disease; and diabetes with prior coronary heart disease.

The findings revealed that blacks, Latinos and Asians who had no prior history of CHD had lower risk of CHD as compared to whites, regardless of whether they also had diabetes. Among those with prior CHD and no diabetes, blacks had a slightly higher risk of future CHD as compared to whites but the same was not observed in the group with both prior history of heart disease and diabetes. Latinos did not demonstrate any difference in risk compared to whites in both groups while Asians showed decreased risk.

See Also: [Cardiovascular Death Rates Show Inequalities Between European Countries](#)

These findings are similar to those of a study published in 2014 in the New England Journal of Medicine which showed that racial disparities between black and white Medicare beneficiaries covered by Kaiser Permanente were nearly eliminated for cardiac risks and diabetes markers. Lead author Jamal S. Rana, MD, PhD, of the Division of Cardiology and Clinical Adjunct with Division of Research at Kaiser Permanente Northern California explains, "The results in our report may reflect, not only access to high quality heart disease care, but also systematic efforts by the health plan to improve risk-factors such as high blood pressure and promote smoking cessation across its member population."

Dr. Rana believes the findings are quite encouraging and with further research, could help in policy development and interventions that could help identify and eliminate racial and ethnic disparities.

Source: [Kaiser Permanente](#)

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