

The decline of ischaemic heart disease mortality in the ARIC study communities

Gerardo Heiss

Age-adjusted population-weighted mortality rates of ischaemic heart disease (1968-78) and all cardiovascular diseases (1962-82) are presented for the four study communities investigated by the Atherosclerosis Risk in Communities (ARIC) Study. Temporal trends in mortality rates and differences by gender, race and study community are discussed. There is an overall pattern of decline in ischaemic heart disease and cardiovascular disease mortality in the four study areas, but the onset and the magnitude of the decline differ markedly by study community, race and gender. Preliminary data on population levels of selected cardiovascular risk factors measured in the ARIC Study cohort participants are also presented.

The Atherosclerosis Risk in Communities (ARIC) Study is a multi-centre prospective study of cardiovascular and pulmonary diseases sponsored by the National Heart Lung and Blood Institute. The objectives of the ARIC Study are to investigate the aetiology and natural history of atherosclerosis; to study the aetiology of clinically manifest atherosclerotic disease; and to measure the variation in cardiovascular disease and its correlates according to race, sex, place and time. A primary interest of the ARIC Study is the identification of new risk factors of ultrasonographically defined Atherosclerosis and its progression, and their cardio- and cerebro-vascular sequale.

The purpose of this paper is to describe the temporal trends in cardiovascular and ischaemic heart disease mortality in the four geographical areas containing the ARIC study communities, to address briefly the onset and magnitude of the decline in mortality by gender and race (black and white) and to present selected examples from the ARIC cohort of individual and community risk factors putatively associated with temporal trends.

Related to MS #044