CHRONIC DISEASE IN ALASKA
2012 Brief Report

Chronic diseases—such as cancer, heart disease, stroke, arthritis, asthma and diabetes—are among the most prevalent, costly, and preventable of all health problems. This annual Brief Report is intended to provide a snapshot of the burden of chronic disease in Alaska. For more detailed information on chronic disease burden and steps being taken by the Section of Chronic Disease Prevention and Health Promotion to impact chronic disease, visit: http://www.hss.state.ak.us/dph/chronic.

CHRONIC DISEASE MORBIDITY AND MORTALITY

CANCER
Cancer is the leading cause of death in Alaska.
- 25% of all deaths in Alaska in 2009 were due to cancer. (Alaska Bureau of Vital Statistics [ABVS])
- The most commonly diagnosed cancers in Alaska are: (1) breast, (2) prostate, (3) lung, and (4) colorectal. These four cancers account for 53% of all cancer cases. (AK Cancer Registry [ACR], 2009)

HEART DISEASE AND STROKE
- Heart disease and stroke are the 2nd and 5th leading causes of death in Alaska. (ABVS, 2009)
- In 2009 in Alaska, heart disease accounted for 20% of deaths; stroke accounted for 5%. (ABVS)
- In 2009, 26% of adults in Alaska reported having high blood pressure, and 35% of those tested reported having high blood cholesterol. (Behavioral Surveillance Risk Factor System [BRFSS])

DIABETES
In 2009, diabetes was the 8th leading cause of death in Alaska (ABVS) and 7th in the US. Likely to be underreported as a cause of death, the risk of death among people with diabetes is about twice that of people without diabetes of similar age.
- 84 Alaskans died from diabetes mellitus in 2009. (ABVS)
- In 2009, 6% of adults in Alaska reported being diagnosed with non-pregnancy related diabetes. (BRFSS)

ARTHRITIS
- Arthritis is the most common cause of disability in the US, affecting more than 50 million Americans. (National Health Interview Survey, 2007-2009)
- In 2009, 23% of adults in Alaska reported being diagnosed with arthritis.

5 Most Common Causes of Death, Alaska Compared with United States, 2009

<table>
<thead>
<tr>
<th>Cause</th>
<th>Alaska</th>
<th>US</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cancer</td>
<td>184.0</td>
<td>173.6</td>
</tr>
<tr>
<td>Heart Disease</td>
<td>155.9</td>
<td>179.8</td>
</tr>
<tr>
<td>Unintentional Injuries</td>
<td>54.0</td>
<td>37.0</td>
</tr>
<tr>
<td>Chronic Lower Respiratory Disease</td>
<td>49.2</td>
<td>42.2</td>
</tr>
<tr>
<td>Stroke</td>
<td>40.6</td>
<td>38.9</td>
</tr>
</tbody>
</table>

Data Sources: Alaska Bureau of Vital Statistics (AK); National Center for Health Statistics (US; preliminary)
Chronic Disease Risk Factors

Four healthy lifestyle factors—never smoking, maintaining a healthy weight, exercising regularly and following a healthy diet—together appear to be associated with as much as an 80 percent reduction in the risk of developing the most common and deadly chronic diseases. 

Conversely, engaging in tobacco use, being inactive, having a poor diet, and being overweight or obese greatly increase the likelihood that one will develop, have reduced quality of life from, and ultimately die from a chronic disease.

Nutrition, Physical Activity, and Obesity

In the past 30 years, the prevalence of overweight and obesity has increased sharply for both adults and children. Physical inactivity and unhealthy eating contribute to overweight and obesity and a number of chronic diseases, including some cancers, cardiovascular disease, and diabetes.

- 67% of Alaska adults (2010 BRFSS) and 26% of Alaska high school students (2011 Youth Risk Behavior Survey [YRBS]) were overweight or obese, based on self-reported height and weight.
- 79% of high school students (2011 YRBS) and 77% of adults (2009 BRFSS) in Alaska consumed fewer than 5 servings of fruits and vegetables per day.
- 53% of Alaska high school students did not attend PE class in the past week. (2011 YRBS)

Tobacco

Tobacco use is the leading cause of preventable disease and death in the United States. The use of tobacco products (both cigarettes and smokeless tobacco products, such as chewing tobacco) is responsible for 30% of all cancer deaths, 21% of all coronary heart disease deaths, and 18% of all stroke deaths. For every one person who dies from tobacco use, another 20 suffer reduced quality of life from tobacco-related illness.

- 21% of adults (2010 BRFSS) and 14% of high school students (2011 YRBS) in Alaska currently smoke.

Chronic Disease Risk Factors, Alaska Compared with United States, YRBS (2011) and BRFSS

### High School Students (YRBS)

- Overweight or obese
  - Alaska: 26%
  - US: 28%
  - Alaska: 79%
  - US: 77%

- Consume < 5 servings fruits/vegetables per day
  - Alaska: 53%
  - US: 48%
  - Alaska: 79%
  - US: 77%

- Not attending PE
  - Alaska: 14%
  - US: 18%

- Currently smoke cigarettes
  - Alaska: 14%
  - US: 18%

### Adults (BRFSS)

- Overweight or obese*
  - Alaska: 67%
  - US: 64%
  - Alaska: 77%
  - US: 77%

- Consume < 5 servings fruits/vegetables per day
  - Alaska: 26%
  - US: 20%
  - Alaska: 77%
  - US: 77%

- No physical activity*
  - Alaska: 20%
  - US: 24%

- Currently smoke cigarettes*
  - Alaska: 21%
  - US: 17%

- High blood pressure
  - Alaska: 26%
  - US: 29%

- High blood cholesterol
  - Alaska: 35%
  - US: 37%

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1 2009 data except 2010 where noted with an *
Access to health services includes gaining entry into the health care system, accessing a health care location where needed services are provided, and finding a health care provider with whom the patient can communicate and trust. Access to health care impacts everything from prevention of disease and disability, quality of life, and life expectancy. Among the health care services one can access are clinical preventive services, such as routine disease screening and scheduled immunizations. Optimal provision of these services can both prevent and detect illnesses and diseases in their earlier, more treatable stages, significantly reducing the risk of illness, disability, and early death.

**NO HEALTH CARE COVERAGE**

Uninsured adults are less likely than insured adults to receive preventive services or screenings, such as mammograms, pap smears, or prostate screening. In turn, inadequate prevention and screening increase the likelihood of preventable illness, missed diagnoses, and delays in treatment. 

- In 2010, 19% of adults aged 18-64 in Alaska reported having no health care coverage. (BRFSS)

**EARLY DETECTION**

Uncontrolled blood glucose increases the risks for heart disease, stroke, kidney disease, blindness and amputation.

- In 2010, 46% of Alaska adults had not had a blood glucose test in the past 3 years.

Mammography is a screening method that has been shown to reduce mortality due to breast cancer by approximately 20-25% over 10 years among women 40 years and over.

- In 2009, 32% of women in Alaska aged 40 years or older reported not having had a mammogram within the last 2 years (which was the recommendation at the time).

Up to 60% of deaths from colorectal cancer could be prevented if persons aged 50 and older were screened regularly. Colorectal cancer can be prevented by removing precancerous polyps or abnormal growths, which can be identified during a sigmoidoscopy or colonoscopy.

- In 2009, among Alaskans aged 50 years or older 42% reported never having had a sigmoidoscopy or colonoscopy. (BRFSS)

**Preventive Services, Alaska Compared with United States, BRFSS**

<table>
<thead>
<tr>
<th>Service</th>
<th>Alaska</th>
<th>US</th>
</tr>
</thead>
<tbody>
<tr>
<td>No health care coverage (2010)</td>
<td>19%</td>
<td>17%</td>
</tr>
<tr>
<td>No blood glucose test in last 3 years (2010)</td>
<td>46%</td>
<td>43%</td>
</tr>
<tr>
<td>Never had sigmoidoscopy or colonoscopy</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(adults 50+; 2009)</td>
<td>42%</td>
<td>38%</td>
</tr>
<tr>
<td>No mammogram in last 2 years (women 40+)</td>
<td>32%</td>
<td>24%</td>
</tr>
</tbody>
</table>
HEALTH INEQUITY IN CHRONIC DISEASE AND RELATED RISK FACTORS

Scientific evidence suggests that social and economic conditions drive population health to an equal or greater degree as do individual choice, genetic make-up, and access to health care. Consequently, to prevent chronic disease and optimize the health of all Alaskans, the focus of public health must extend beyond healthy behaviors and health insurance to address health equity. Health equity is achieved when every person has the opportunity to “attain his or her full health potential.”

Chronic Disease Risk Factors and Preventive Services, All Alaska Adults Compared with Select Populations, BRFSS

<table>
<thead>
<tr>
<th>Risk Factor</th>
<th>Low SES Alaskans</th>
<th>Rural Residents</th>
<th>Alaska Natives</th>
<th>All Adults</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eat &lt; 5 fruits and vegetables daily (2009)</td>
<td>77%</td>
<td>83%</td>
<td>87%</td>
<td>87%</td>
</tr>
<tr>
<td>Are physically inactive (2010)</td>
<td>20%</td>
<td>28%</td>
<td>31%</td>
<td>36%</td>
</tr>
<tr>
<td>Smoke (2010)</td>
<td>21%</td>
<td>37%</td>
<td>41%</td>
<td>56%</td>
</tr>
<tr>
<td>Have not had cholesterol screened in last 5 years (2009)</td>
<td>29%</td>
<td>41%</td>
<td>47%</td>
<td>56%</td>
</tr>
<tr>
<td>Have not had blood glucose test in past 3 years (2010)</td>
<td>21%</td>
<td>37%</td>
<td>41%</td>
<td>46%</td>
</tr>
</tbody>
</table>

Notes:
Low SES (Socioeconomic status) = adult 25 to 64 years of age at or below 185% of the Federal poverty level OR with less than a high school education;

Rural Residents = adults living in the BRFSS-defined Rural region of the state.

Such disparity in risk factors translates to disparities in chronic disease morbidity and mortality. For example:

- In 2009, the Alaska Native age-adjusted rate of death from stroke, chronic lower respiratory disease, heart disease, and cancer (all sites) was 1.4 to 2.1 times that of their White peers. (Alaska Bureau of Vital Statistics)
- Age-adjusted all-site cancer mortality rates are highest in the northern and western regions of Alaska, and lowest in southeast Alaska. (NCI, CDC, State Cancer Profiles, 2005-2009)

REFERENCES


This report can be accessed on the web at: www.hss.state.ak.us/dph/chronic/2012_cdbriefreport.pdf