

# POLICY ■ STATEMENT



National Forum for Heart Disease & Stroke Prevention

[www.hearthealthystrokefree.org](http://www.hearthealthystrokefree.org)

**November 2008**

## **National Forum Encourages the Establishment of a National Surveillance Unit to Support the Prevention and Management of Heart Disease and Stroke**

### **RECOMMENDATION**

Heart disease and stroke are leading causes of death, disability, illness, and health care costs in the United States. Unfortunately, although deaths due to cardiovascular disease are well-captured in the nation's health tracking (surveillance) systems, current data systems do not have the capacity to track incidence and prevalence of these diseases or their major risk factors in a systematic way. A national surveillance system that tracks the cardiovascular health of the population is essential to successfully intervene and be accountable for improving public health. Without this information it is difficult to effectively plan, implement, and evaluate intervention efforts. **Establishment of a national surveillance unit should be the first step toward the development of this coordinated, comprehensive system.**

### **CURRENT TRACKING**

The National Forum for Heart Disease and Stroke Prevention (National Forum) is committed to Healthy People 2010 goals related to the prevention of cardiovascular

disease risk factors, detection and treatment of risk factors, early identification and treatment of heart attacks and strokes and prevention of recurrent cardiovascular events. However, the current health tracking (surveillance) systems in the United States cannot track progress toward these goals in a comprehensive and systematic manner.

These surveillance systems, while useful, are fragmented and incomplete and do not facilitate timely reporting and tracking of key indicators of progress in the prevention and management of heart disease and stroke. While there are a variety of available published statistics on heart disease and stroke in the United States, there is currently no central place for the analysis, management, and dissemination of this information, nor is there a common methodology for its collection and use.

Much of what is known about heart disease and stroke across the nation is based on a patchwork of death statistics, national estimates of disease incidence and cost, national health examination data on the prevalence of major risk factors, national and state hospitalization data, and national and state telephone

survey data on prevalence of disease and risk factors. Critical surveillance data is particularly lacking at the state and local level. It is important to note that surveillance is one of the ten essential public health services. In most states, for instance, knowledge of the prevalence of cardiovascular diseases, high blood pressure, and high cholesterol is solely based upon self-reported telephone survey data, which is known to be inadequate, and incidence and cost estimates are nearly non-existent.

## **SURVEILLANCE UNIT**

In 2007, the National Forum published an article which describes the essential features of a comprehensive surveillance system, assesses the extent to which these features are in place, and offers twelve specific recommendations key to the development of a national heart disease and stroke surveillance system. The twelve recommendations were categorized by priority, staging (time-frame in which it should be implemented), and cost. The article, "Essential Features of a Surveillance System to Support the Prevention and Management of Heart Disease and Stroke," ("Essential Features") was published in the January 2/9, 2007, issue of *Circulation*, the professional journal of the American Heart Association.

One of the twelve recommendations in "Essential Features" – the establishment of a National Heart Disease and Stroke surveillance unit to track and publish key indicators of progress in the prevention and management of heart disease and stroke - was identified as a top priority for early staging (within one to two years). This unit would be charged with assembling

and making available the most current and relevant data, identifying critical gaps in knowledge and data systems, and proposing modifications to existing surveillance components or development of new ones to fill these gaps.

Establishing a coordinated, comprehensive national surveillance system is critical to the implementation of *A Public Health Action Plan to Prevent Heart Disease and Stroke*. It is also urgent for development of the Healthy People 2020 goals. A strengthened surveillance system will enable adoption of greatly improved, quantifiable objectives for Healthy People 2020. Additionally, setting improved objectives for Healthy People 2020 will support development of required advances in surveillance. Therefore, the National Forum has made leadership for the development of such a system a top priority and recommends that a national surveillance unit be established as the first step toward the development of a coordinated, comprehensive national surveillance system that will facilitate the reporting and tracking of key indicators of progress in the prevention and management of heart disease and stroke.

## **ABOUT THE NATIONAL FORUM**

The National Forum for Heart Disease and Stroke Prevention (National Forum) is made up of more than 80 organizations committed to building a heart-healthy and stroke-free society. The National Forum provides leadership in implementing the recommendations contained in *A Public Health Action Plan to Prevent Heart Disease and Stroke*.