



Chronic Conditions Among Arizona Adults

HIGHLIGHTS FROM THE AHS 2008



Background

Americans are living longer, but we're also experiencing increasing rates of chronic physical and psychological conditions:

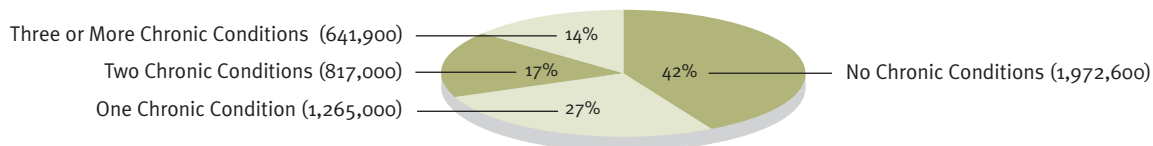
- Chronic conditions are major contributors to increasing rates of disability and death.
- Chronic conditions account for approximately 75% of our \$2 trillion healthcare industry.
- Our healthcare system is based on a model of episodic, acute care. Relative to other industrialized nations, U.S. residents with chronic conditions are at greater risk of poor outcomes because of cost, medical errors and inefficient, poorly organized care.
- Chronic conditions are often preventable – and certainly manageable. We don't do either very well.

Where do we stand with chronic health conditions in Arizona? In the 2008 AHS, we asked adults (18+) if they had been diagnosed with the chronic physical conditions of asthma, diabetes, heart disease, high blood pressure and arthritis/other auto-immune disorders. We also asked about diagnoses of anxiety disorder, depression or bi-polar (manic-depressive) disorder. We then correlated their responses with answers to other questions to map out the prevalence, antecedents and consequences of chronic conditions among Arizona adults. Here are some highlights.*

Prevalence

- Over half of all adults (58%) have been diagnosed with one or more chronic conditions, and 14% have been diagnosed with three or more conditions. Chronic conditions affect over 2.7 million Arizona adults.

FIGURE 1 Percent of Arizona Adults Diagnosed with Chronic Conditions, 2008

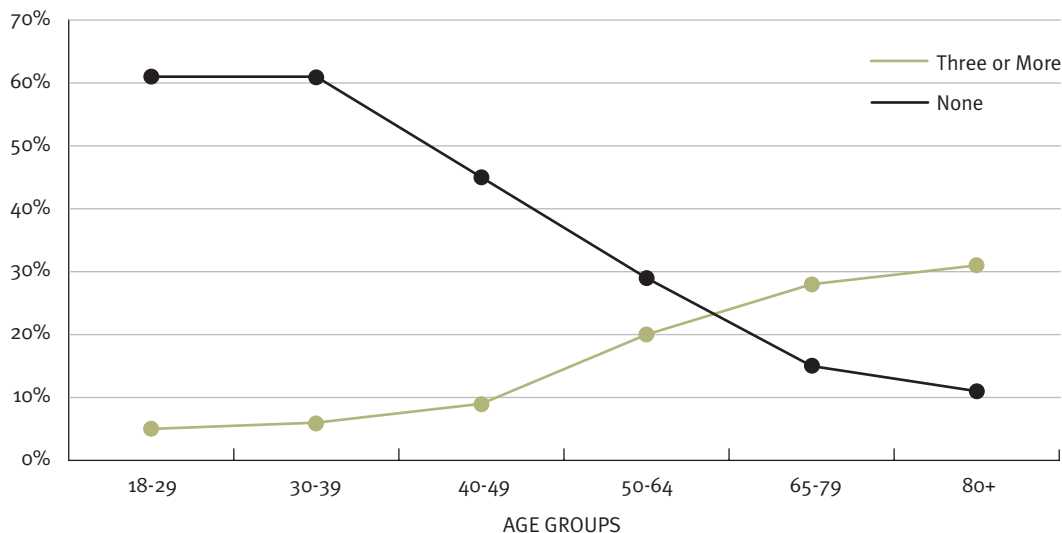


Chronic Conditions Increase with Age

- Nine out of ten (89%) of Arizonans over the age of 80 have at least one chronic condition, and almost one third (31%) have three or more conditions.
- Among Arizona adults between age 50 and 64, the prevalence of chronic disease increases to 71%, and the percentage of adults with three or more conditions doubles (20%) relative to adults in their forties.
- Within the 65-79 age group, 85% of the population has at least one chronic disease, and 28% have been diagnosed with three or more conditions.
- Fully 72% of Arizonans with chronic conditions – almost 2 million people – are working-age adults. Over half (55%) of people in their forties report having been diagnosed with at least one chronic condition, and 9% report three or more conditions.

* For a more complete report on chronic conditions, visit www.arizonahealthfutures.org.

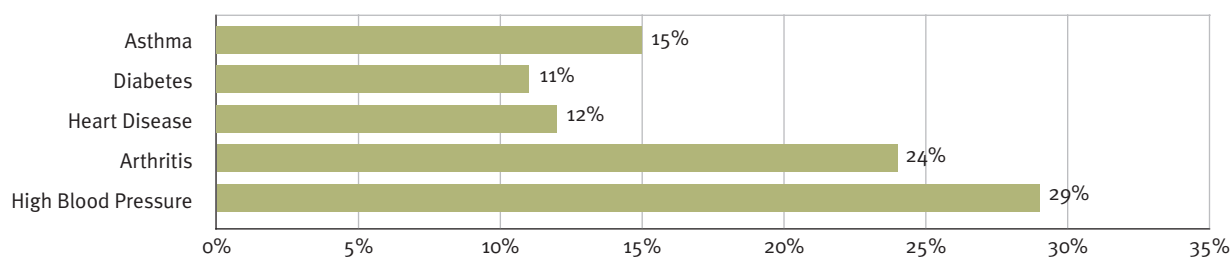
FIGURE 2 Prevalence of Chronic Conditions by Age Group, 2008



Distribution Patterns

- High blood pressure is the most prevalent chronic condition, affecting 29% of Arizona adults, or an estimated 1,338,000 people. Arthritis and other auto-immune disorders affect almost a quarter (24%) of the adult population. Almost half a million, or one in ten, Arizona adults have been diagnosed with diabetes (10.6%), and one out of six has been diagnosed with asthma (14.8%).

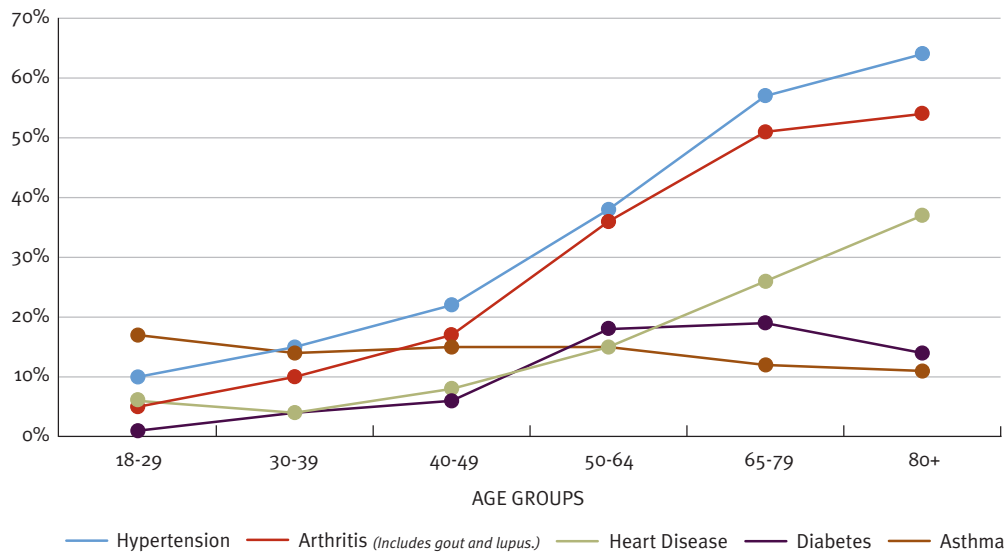
FIGURE 3 Prevalence of Chronic Conditions among Arizona Adults, 2008



Patterns Vary with Age

- With the exception of asthma, the prevalence of each condition nearly doubles between the 40-49 year-old cohort and the 50-59 year-old cohort.
- Diabetes (11%) and asthma (15%) are relatively constant in the 20, 30, and 40 year-old age groups, then increase significantly among 50 year olds, leveling off in older age groups.
- Rates of heart disease, hypertension and arthritis are relatively lower in younger age groups, and display the same dramatic increase among middle-aged adults.
- While rates of asthma and diabetes level-off among older Arizonans, heart disease, hypertension and arthritis continue to increase substantially. These conditions have been linked to diet and obesity, as well as to rising rates of disability.

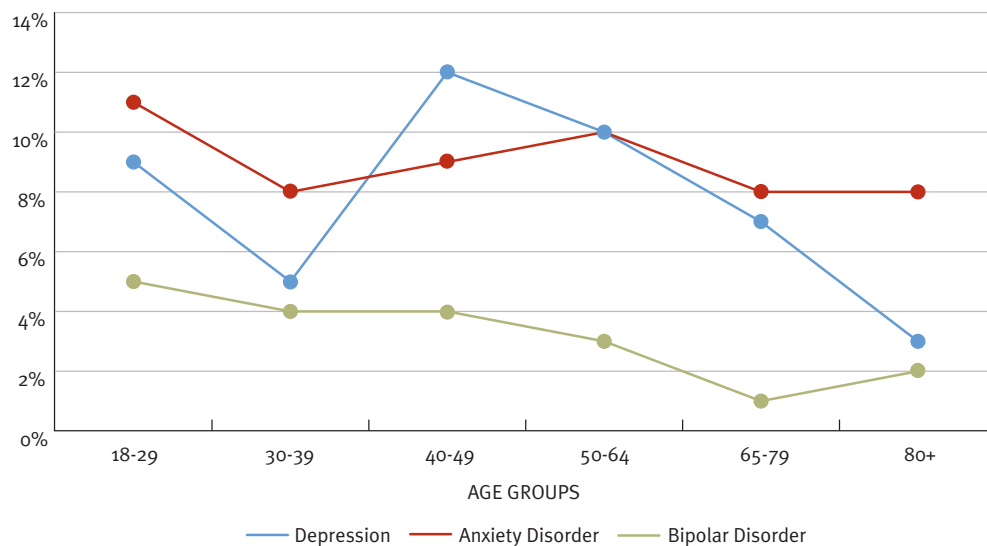
FIGURE 4 Prevalence of Chronic Physical Conditions by Age, Arizona 2008



Affective Disorders

- Relative to physical conditions, the pattern of the cited affective conditions is relatively higher among young adults, peaking in middle-age and then decreasing in older cohorts.
- Almost one in ten adults has been diagnosed with an anxiety disorder, although it is more prevalent among younger persons (under age 30) and those over 80 years of age relative to other psychological conditions.
- Arizonans in the 40-49 age group are more likely than their younger or older peers to have been diagnosed with depression.

FIGURE 5 Prevalence of Psychological Disorders by Age Group, Arizona 2008



Chronic Conditions and Access to Care

- Adults with asthma reported an average of 1.5 medical visits in previous 12 months, much fewer than the 3.9 average for persons with diabetes, and significantly less than the 5.5 average annual visits for persons with bipolar disorder.

FIGURE 6 Annual Medical Visits for Adults with Chronic Conditions, 2008

CONDITION	ESTIMATED NUMBER OF PERSONS	AVERAGE ANNUAL MEDICAL VISITS	TOTAL ESTIMATED NUMBER OF VISITS
Heart Disease	576,800	2.5	1,426,900
High Blood Pressure	1,338,300	2.3	3,024,100
Diabetes	441,500	3.9	1,714,400
Asthma	693,300	1.5	1,065,200
Arthritis	1,115,000	2.7	3,021,800
Depression	394,900	4.9	1,923,800
Anxiety Disorder	433,000	3.5	1,515,200
Bipolar Disorder	175,100	5.5	961,900

- Similar differences are found for prescription medications used to manage chronic diseases. Among Arizona adults, 31% of those diagnosed with arthritis and 36% of those with asthma take prescription medications. For persons with heart disease and high blood pressure, the percentages increase to 53% and 74% respectively. Diabetics are most likely to be using prescription medications; with 24% reporting the use of insulin and 69% taking oral hypoglycemics.
- In contrast to the variation in average annual medical visits for persons with affective disorders, the use of prescription medications is relatively constant, ranging from 53% for management of anxiety disorders to 57% for bipolar disorder and 58% for depression.

Implications for Policy

- Medical treatment alone is insufficient to address the upstream factors that underlie many chronic diseases. Public policy must encourage health promotion and disease prevention by focusing on the social and environmental factors (e.g., poor nutrition, lack of exercise, poor air quality, high levels of stress) that contribute to chronic conditions in the first place.
- Successfully managing chronic conditions requires attention to ongoing communication, coordination and monitoring between the patient and a provider team. Public policy should encourage experimentation with new forms of medical payment that cover these team-based services, and are not limited to fee-for-service medical interventions alone.
- Many affective chronic conditions are diagnosed and treated in a primary care setting. Public policy should encourage the integration of physical and behavioral health in training programs and practice settings.
- Many chronic conditions have a physiological and genetic basis, but they are also exacerbated by poor lifestyle choices. Public policy should promote public education and advocacy to provide people with the knowledge, tools and incentives to keep themselves as healthy as possible.