

Stroke in Minnesota Fact Sheet

Stroke is the third leading cause of death and a leading cause of disability in the United States. This fact sheet describes the burden of stroke in Minnesota.

Scope of the Problem

It is estimated that 71,000 people in Minnesota are living with the aftermath of a stroke.¹

In 2005, 11,235 stroke patients were discharged from hospitals in Minnesota, of which 50.9% were released home.²

In 2005, an estimated 41.9 per 100,000 people died of stroke in Minnesota, which is 2,372 deaths.³

In Minnesota, the age-adjusted stroke mortality for white women was 40.6 per 100,000 compared to 41.0 per 100,000 for white men in 2005.^{3, 4}

Stroke Risk Factors⁵

High Blood Pressure

In 2005, 21.9 percent of adults surveyed in Minnesota said they have hypertension.

Diabetes

In 2006, 5.7 percent of adults surveyed in Minnesota were told by a doctor they have diabetes.

High Blood Cholesterol

In 2005, 32.4 percent of adults surveyed in Minnesota reported they have high cholesterol.

Obesity

In 2006, 24.0 percent of adults surveyed in Minnesota were obese (BMI of 30 or greater).

Cigarette Smoking

In 2006, 18.3 percent of adults surveyed in Minnesota were current smokers.

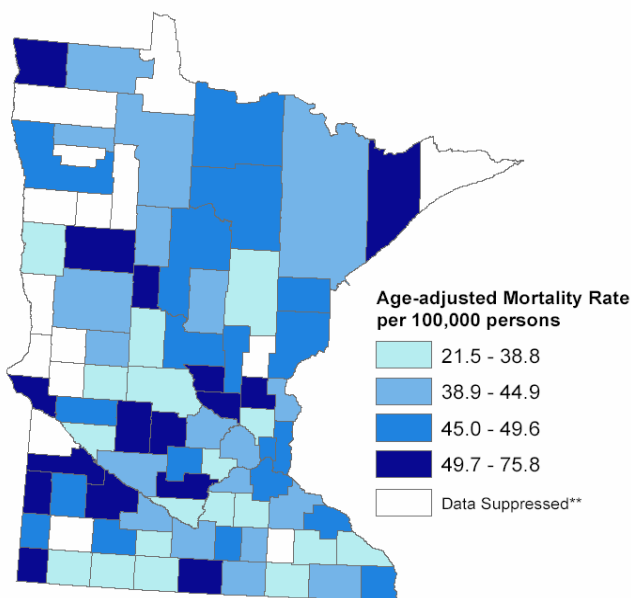
Physical Inactivity

In 2006, 14.2 percent of adults surveyed in Minnesota reported that they are not physically active (do not get any exercise).

Poor Nutrition

In 2005, 75.2 percent of adults surveyed in Minnesota reported eating less than five fruits and vegetables per day.

Age-adjusted Three Year Mortality Rates* for Stroke by County Minnesota, 2003-2005



*Age-adjusted to the 2000 U.S. standard population
**Data suppressed for counties with fewer than 20 deaths
ICD-10 codes: I60 - I69

Source: MDH Center for Health Statistics

Notes and References

1. Behavioral Risk Factor Surveillance System, 2006.
2. Minnesota State Hospital Discharge Data, 2005.
3. Minnesota Department of Health, Vital Statistics, 2005.
4. Due to small numbers, in Minnesota, the age-adjusted stroke mortality rates for African American, and other/non-White (Caucasian) men and women cannot be computed.
5. Behavioral Risk Factor Surveillance System, 2005 and 2006.

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