



## Cardiovascular disease occur more often in children than is usually appreciated by health care professionals or the overall public

James Anderson \*

### Introduction

During the past half century there has been major progress within the scientific understanding of cardiovascular conditions in children and youth, and this progress has led to improved prevention and treatment of congenital and acquired heart disease. Following this period of advancement, the current status of our understanding should be reviewed to create a foundation for future scientific efforts. Cardiovascular disease occur more often in children than is usually appreciated by health care professionals or the overall public. More than 600,000 children in the US have an abnormality of the cardiovascular system; approximately 440,000 have a cardiac malformation, an estimated 160 000 have a disturbance of heart rhythm or conduction, and 40,000 have an acquired disease like cardiomyopathy, rheumatic heart condition or Kawasaki disease. Furthermore, if the current rate of development of atherosclerosis continues, nearly half of the approximately 80 million American children under age 21 will ultimately die of complications of atherosclerosis such as coronary artery disease and stroke. With this overall perspective, each of the main conditions is discussed below. 18.1% of scholars reported current cigarette use, 13.1% of scholars reported current cigar use, and 7.7% of scholars reported current smokeless tobacco use. Overall, 23.4% of students reported any current tobacco use. Male students were more likely than female students to report current cigarette use (19.9% compared with 16.1%).

The Male students were also more likely than female students to report current cigar use (17.8% compared with 8.0%) and current smokeless tobacco use (12.8% compared with 2.2%). Non-Hispanic white students were more likely than Hispanic or non-Hispanic black students to report any current tobacco use, which includes cigarettes, cigars, or smokeless tobacco (26.5% compared with 20.5% for Hispanic students and 15.4% for non-Hispanic black

students). 49.9% of students who currently smoked cigarettes had tried to quit smoking cigarettes during the previous 12 months. The Smokers (53.9%) than among male student smokers (47.0%) and among white females (54.0%) and Hispanic females (55.9%) than among white males (46.3%) and Hispanic males (44.7%). 18.1% of scholars reported current cigarette use, 13.1% of scholars reported current cigar use, and 7.7% of scholars reported current smokeless tobacco use. Overall, 23.4% of students reported any current tobacco use. Male students were more likely than female students to report current cigarette use (19.9% compared with 16.1%). Male students were also more likely than female students to report current cigar use (17.8% compared with 8.0%) and current smokeless tobacco use (12.8% compared with 2.2%). Non-Hispanic white students were more likely than Hispanic or non-Hispanic black students to report any current tobacco use, which includes cigarettes, cigars, or smokeless tobacco (26.5% compared with 20.5% for Hispanic students and 15.4% for non-Hispanic black students). □ 49.9% of students who currently smoked cigarettes had tried to quit smoking cigarettes during the previous 12 months. The prevalence of this behavior was higher among female student smokers (53.9%) than among male student smokers (47.0%) and among white females (54.0%) and Hispanic females (55.9%) than among white males (46.3%) and Hispanic males (44.7%). Among children 4 to 11 years of age, the mean total blood cholesterol level is 161.9 mg/dL. For boys, it is 162.3 mg/dL; for women, it is 161.5 mg/dL. Among adolescents 12 to 19 years aged, the mean total blood cholesterol level is 158.2 mg/dL. For boys, it is 156.1 mg/dL; for women, it is 160.3 mg/dL.

Approximately 7.8% of adolescents 12 to 19 years of age have total cholesterol levels  $\geq 200$  mg/dL. Despite the recent decline in mortality from Coronary Heart Condition (CHD), this disease remains the leading killer folk's adults of all ages. CHD in young adults isn't also characterized as CHD in older individuals because it occurs less frequently, but this disease can have devastating consequences for young patients and their families. As in older adults, the bulk of coronary events in young adults are associated with atherosclerosis and one or more of the normal CHD risk factors are usually present. Young patients, however, are more likely than older patients to be smokers, male, obese, and to possess a positive case history. Less than 1% of adolescents are potentially eligible for pharmacological treatment on the basis of guidelines from the American Academy of Pediatrics. These unique characteristics of the fetal circulation allow for tolerance of complex heart disease like hypo plastic left heart syndrome in utero with minimal hemodynamic consequences.

**Citation:** Anderson , Cardiovascular disease occur more often in children than is usually appreciated by health care professionals or the overall public. (2021) Int J Cardiovasc Res 10: 5.

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**Received date:** May 03, 2021; **Accepted date:** May 18, 2021;

**Published date:** May 25, 2021

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