Health Trends

February 2026

DBHDS
Virginia Department of Behavioral Health and Developmental Services

Heart Disease Awareness Month

Heart disease is the leading cause of death in the U.S. general population and worldwide. Nearly 650,000 Americans die from heart diseases each year, that's about 1 in every 9 adults (4).

"Heart disease" is the general term for a variety of conditions that affect the heart's structure and function (4). The heart (cardio), and blood vessels (vascular) make up the body's cardiovascular system.

Some types of heart disease can go undetected in an individual for years, mimicking other illnesses or presenting with vague symptoms such as fatigue, breathlessness, crackling breath sounds, jaw pain, a persistent cough, and repetitive infections (e.g., pneumonia), making it difficult to detect until a major event occurs (1).

Types of Heart Disease

- Congenital heart defects, which are heart conditions a person is born with.
- Coronary artery disease (CAD), sometimes referred to as coronary heart disease (CHD), is the narrowing of the blood vessels caused by plaque buildup.
- Hypertension (high blood pressure) and Hyperlipidemia (high cholesterol) damage arteries and the heart over time, often with no noticeable signs until significant harm occurs.
- Arrhythmias (e.g., Atrial fibrillation or AFib), which means an irregular heartbeat, pulse, or heart rhythm.
- Cardiomyopathy, which is a thickening and weakening of the heart muscle itself.
- Congestive heart failure, a condition that occurs when the heart becomes too weakened to pump blood efficiently, causing fluid buildup in the lungs (pulmonary edema) and swelling throughout the body (edema).
- Heart valve disease, which disrupts the flow of blood when one or more of the heart's four valves don't work properly (3).

Heart Disease and Individuals with Intellectual and Developmental Disabilities (IDD)

Individuals with IDD have a much higher risk of heart disease than the general population due in part to:

- Genetic syndromes.
- Metabolic syndrome.
- Frequent use of prescription psychotropic drugs.
- Higher occurrences of secondary chronic conditions such as diabetes, kidney disease, and mental health issues.
- A sedentary lifestyle (2).

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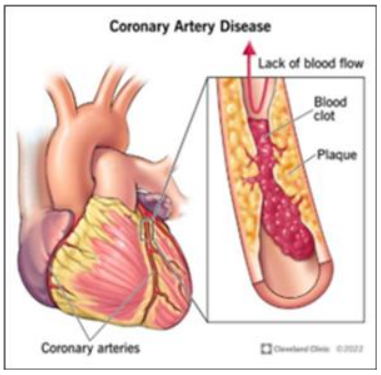
Coronary Artery Disease (CAD)

Coronary artery disease (CAD) is the most common type of heart disease (4).



Coronary artery disease occurs when plaque, which is a combination of fat, cholesterol, calcium, and other substances found in the blood, builds up in the arteries. Clogged arteries are known as atherosclerosis.

Plaque build-up in the arteries reduces the amount of oxygen-rich blood getting to the heart, which can cause chest pain (angina). When plaque ruptures in the arteries it leads to blood clots which can block blood flow and is the most common cause of a heart attack, known as myocardial infraction (MI) (4).

Risk Factors of Coronary Artery Disease

CAD risk factors can be divided into two groups, modifiable and non-modifiable (24).

Non-modifiable risk factors include:

- Gender - Men are more predisposed to CAD than women.
- Age - Being older than 45 years if male, and 55 years if female.
- Family history/Genetics - Having a biological family member with heart disease, especially a father or brother with a diagnosis of CAD before age 55 or mother or sister before age 65 (24).

Modifiable risk factors include:

- High blood pressure (hypertension).
- Smoking.
- Obesity, a body mass index (BMI) greater than 25.
- High lipid levels & triglycerides.
- A sedentary lifestyle.
- Chronic healthcare conditions.
- Sleep disorders like sleep apnea, and snoring.
- Dental health (24).

App of the Month

Access guidelines on your mobile device anytime, anywhere! Download the American Heart Association mobile app today and enjoy the benefits of staying up-to-date no matter where you are. Effective integration of complex clinical treatment guidelines, tagged and mapped for effective search with cross-linking, resources and more. (App of the Month is not endorsed by DBHDS Office of Integrated Health-Health Supports Network. User accepts full responsibility for utilization of app).

References

1. Centers for Disease Control and Prevention (CDC). (2024, May). About heart disease. *National Center for Chronic Disease Prevention and Health Promotion*. [Internet].
2. De Leeuw, M.J., Hilgenkamp, T.I.M., Maes-Festen, D.A.M., Bindels, P.J.E., Elbers, R.G., & Oppewal, A. (2025, May). Prevalence and incidence of cardiovascular disease in adults with intellectual disabilities: A systematic review. *Journal of Intellectual Disability Research*, 69:1337–1369.
3. Mayo Clinic. (2024, August). Heart disease overview. [Internet]
4. National Heart, Lung and Blood Institute (NHLBI). (2024, December). Coronary heart disease: What is coronary heart disease? *National Institute of Health*. [Internet].
5. Shahjehan, R.D., Sharma, S., & Bhutta, B.S. (2024, October). Coronary artery disease. *StatPearls Publishing* [Internet].

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ABA Snippets …

A Lifesaving Difference of Using Behavioral Skills Training to Teach CPR

American Heart Month raises awareness about heart disease, risk factors, prevention, self-care, and community action. Focusing on the latter, only 10-30% of the 350,000 people with out-of-hospital cardiac arrests will receive CPR from a bystander, of which 90% are fatal (2). There are a variety of reasons for this, including fear of performing CPR incorrectly, fear of causing harm, improper training, and lack of training.

To bridge the gap of performing CPR with proficiency, practitioners have studied the use of using Behavioral Skills Training (BST), a structured teaching approach that breaks down learning into four steps: instruction, modeling, rehearsal, and feedback (3). The study by Aciu and colleagues (2021) investigated the use of BST with the QCPR Learner App to teach hands-on CPR focusing on form and chest compressions. BST consisted of providing the trainee with the CPR manual and verbal instructions, modeling chest compressions (e.g. form, rate, and depth), and rehearsal with positive and corrective feedback. Visual feedback was also given through the QCPR app which recorded compression depth, rate, and chest release. Prior to the implementation of the intervention, successful performance as defined by the American Heart Association (AHA) were low. Once implemented, results showed that all trainees demonstrated chest compressions as defined by the AHA above 90% mastery criteria (1).

To extend the previous research, Aciu et al. (2025) investigated the use of BST with the QCPR app to equip caregivers to perform infant CPR. Additionally, the study also measured the rate, quality, and inter-compression time of rescue breaths. Post intervention, all trainees met mastery criteria for the CPR training (2).

Just as the Bee Gees' "Stayin' Alive" is used in CPR classes for its tempo, using BST to teach CPR just may keep us, "Ah, ah, ah, ah, stay-in' alive, stay-in' alive."

You may contact DBHDS about these efforts via the following: John.Tolson@dbhds.virginia.gov

References
1. Aciu, J. L. A., Vladescu, J. C., Day-Watkins, J., & Schnell-Peskin, L. K. (2021). A potential life-saving skill: Teaching caregivers to perform infant cardiopulmonary resuscitation. *Behavioral Interventions, 40*(4), 1-8.
2. Aciu, J. L. A., Vladescu, J. C., Maranzo-Frezza, K. E., Reeve, K. F., & Gravina, N. (2025). Teaching hands-only CPR using behavioral skills training. *Behavioral Interventions, 36*(4), 832-846.
3. Parsons, M.B., Rollyson, J.H., & Reid, D.H. (2012). Evidence-based staff training: A guide for practitioners. *Behavior Analysis in Practice, 5*(2), 2-11.



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- Legal Services
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- Transportation

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