



Colorado Department  
of Public Health  
and Environment

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## Perinatal and Infant Health

## Child Health

## Adolescent Health

## Adult Health

Health Care Coverage  
Preventive Health  
Practices  
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Obesity  
Cigarette Smoking  
Binge Drinking  
Morbidity  
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Mortality  
Occupational Injuries  
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## Summary

## Adult Health



Certain risk behaviors initiated during childhood and adolescence and continued into adulthood contribute to the development of chronic disease conditions in adulthood. Heart disease and cancer, the leading causes of death in Colorado adults ages 45 and older, are related to lifetime patterns of poor nutrition, physical inactivity, smoking, and heavy alcohol consumption. Behaviors such as binge drinking contribute to unintentional injuries, the leading cause of death for adults ages 20-44 and third leading cause of death for adults ages 45-54. Access to health care and appropriate use of health screening can help to identify conditions early and provide opportunities for education and referral.

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## Adult Health

### Indicator 1: Health Care Coverage

**Healthy People 2010 Objective:** 100 percent health care coverage.

**Significance of indicator:** According to Healthy People 2010, “Access to health services—including preventive care, primary care, and tertiary care—often depends on whether a person has health insurance. Uninsured people are less than half as likely as people with health insurance to have a primary care provider; to have received appropriate preventive care, such as recent mammograms or Pap tests; or to have had any recent medical visits. Lack of insurance also affects access to care for relatively serious medical conditions. Evidence suggests that lack of insurance over an extended period significantly increases the risk of premature death and that death rates among hospitalized patients without health insurance are significantly higher than among patients with insurance.” (Objective 1-1, Clinical Preventive Care).

**Colorado measure:** Eighty-four percent of Colorado adults were covered by some form of health insurance in 2005. Whereas 89.3 percent of White and 79.8 percent of Black Coloradans have health care coverage, only 59.8 percent of Hispanics reported being covered by health insurance. The Healthy People 2010 objective is for 100 percent coverage of the population.

Having a specific source of ongoing care is also an important factor in health care access. In 2005, 79 percent of Coloradans had a specific source of primary care, falling short of the Healthy People 2010 objective of 98 percent.

**Colorado data source:** Behavioral Risk Factor Surveillance System, Health Statistics Section, CDPHE.

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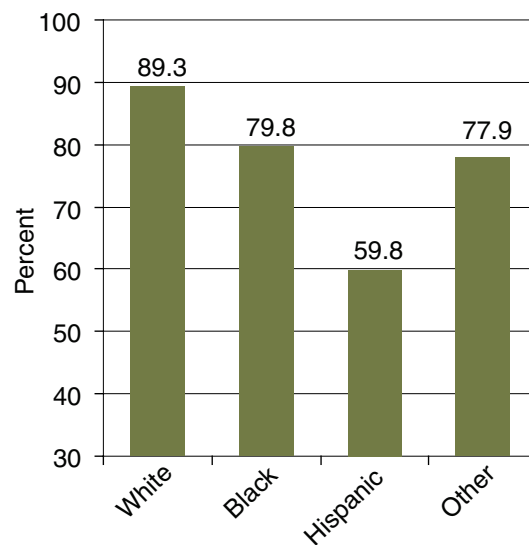


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### Indicator 1: Health Care Coverage

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Health care coverage by race and ethnicity, Colorado adults, 2005



Source: Behavioral Risk Factor Surveillance System, Health Statistics Section, Colorado Department of Public Health and Environment



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### Indicator 2: Preventive Health Practices

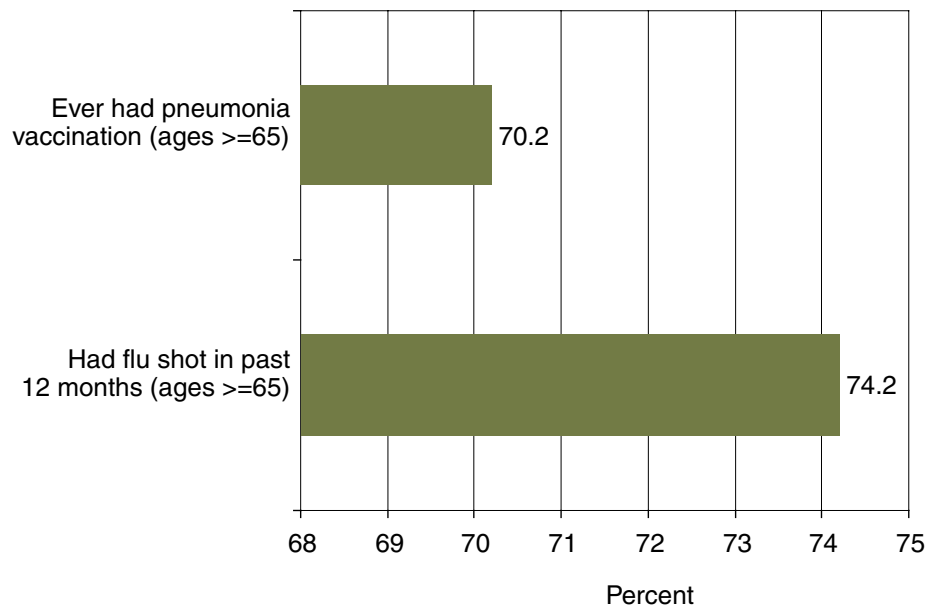
**Healthy People 2010 Objectives:** 90 percent of adults > 65 have ever had pneumonia vaccine; 90 percent had flu shot in past 12 months.

**Significance of indicator:** Preventive health measures such as immunizations against influenza and pneumonia can be important factors in preventing illness.

**Colorado measure:** The Healthy People 2010 objectives are for 90 percent of adults ages 65 and over to have ever had a pneumonia vaccine and to have had a flu shot within the past 12 months. In Colorado, only 70.2 percent had ever had a pneumonia vaccine and 74.2 percent had a flu shot in 2005.

**Colorado data source:** Behavioral Risk Factor Surveillance System, Health Statistics Section, CDPHE.

Preventive health care practices of Colorado adults, 2005



Source: Behavioral Risk Factor Surveillance System, Health Statistics Section, CDPHE.



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### Indicator 3: Physical Activity

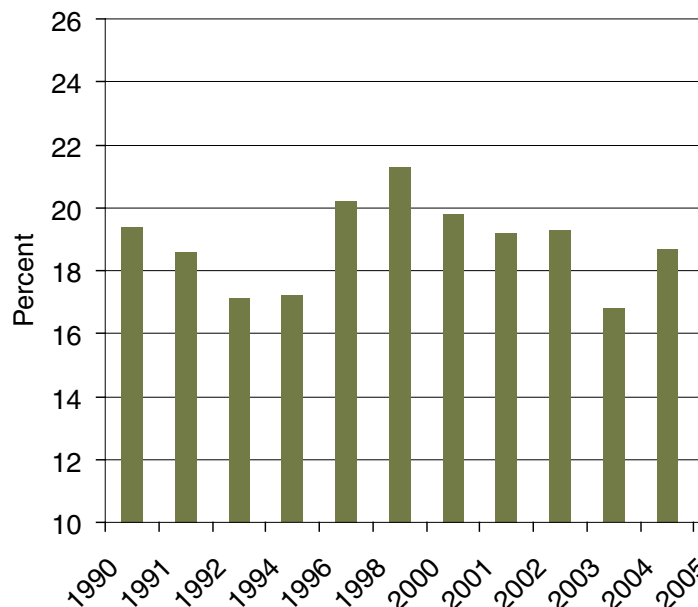
**Healthy People 2010 Objective:** No more than 20% of adults are physically inactive.

**Significance of indicator:** Healthy People 2010 provides a summary of the research into the benefits of physical activity and shows that virtually all individuals will benefit from regular physical activity. Heart disease is the leading cause of death in Colorado and the United States. Physically inactive people are almost twice as likely to develop heart disease as persons who engage in regular physical activity. Lack of physical activity also puts people at higher risk for diabetes and some types of cancer. Those adults who report that they engage in no leisure time activity are considered physically inactive.

**Colorado measure:** In Colorado, between 16 and 21 percent of adults have reported being physically inactive in almost every year since 1990. At this level, Colorado typically meets the Healthy People 2010 objective of no more than 20 percent of adults being physically inactive.

**Colorado data source:** Behavioral Risk Factor Surveillance System, Health Statistics Section, CDPHE.

Percent of physically inactive Colorado adults, 1990-2005



Source: Behavioral Risk Factor Surveillance System, Health Statistics Section, CDPHE.



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### Indicator 4: Obesity

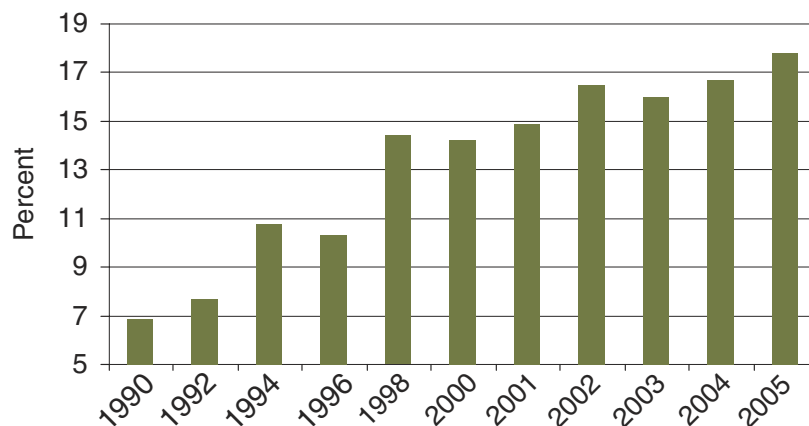
**Healthy People 2010 Objective:** No more than 15% of adults are obese.

**Significance of indicator:** Persons who are overweight or obese are at increased risk for high blood pressure, type 2 diabetes, heart disease, stroke, gallbladder disease, osteoarthritis, sleep apnea, respiratory problems, and some types of cancer. The health outcomes related to these diseases, however, often can be improved through weight loss or, at a minimum, no further weight gain (Healthy People 2010). Adults with a body mass index (weight in kilograms/height in meters squared) above 30 are considered obese.

**Colorado measure:** In Colorado, as in the rest of the US, the proportion of adults who are obese is increasing dramatically. As shown in the graph, obesity has more than doubled in Colorado between 1990 and 2005. In 2005, 17.8 percent of Colorado adults were obese. The Healthy People 2010 objective is for no more than 15 percent of adults to be obese.

**Colorado data source:** Behavioral Risk Factor Surveillance System, Health Statistics Section, CDPHE.

Percent of Colorado adults who are obese, 1990-2005



Source: Behavioral Risk Factor Surveillance System, Health Statistics Section, CDPHE.



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### Indicator 5: Cigarette Smoking

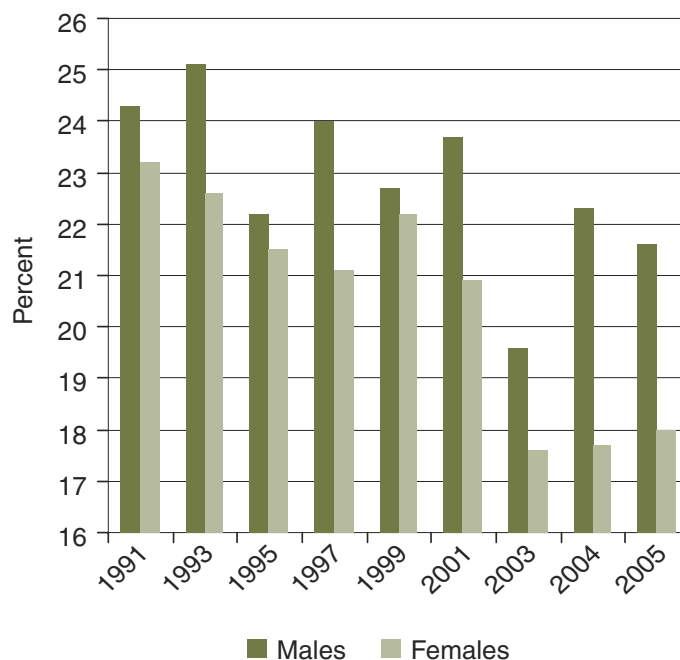
**Healthy People 2010 Objective:** No more than 12% of adults smoke cigarettes.

**Significance of indicator:** Cigarette smoking is the leading cause of preventable death in the United States. Cigarette smoking causes heart disease, several kinds of cancer (lung, larynx, esophagus, pharynx, mouth, and bladder), and chronic lung disease. Smoking during pregnancy contributes to spontaneous abortions, low birth weight, and Sudden Infant Death Syndrome.

**Colorado measure:** There is clear evidence of a decline in smoking by both Colorado males and females; however, at an overall rate of 20 percent, Colorado falls far short of the Healthy People 2010 objective of no more than 12 percent.

**Colorado data source:** Behavioral Risk Factor Surveillance System, Health Statistics Section, CDPHE.

Percent of Colorado adults who smoke cigarettes by gender, 1991-2005



Source: Behavioral Risk Factor Surveillance System, Health Statistics Section, CDPHE.



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### Indicator 6: Binge Drinking

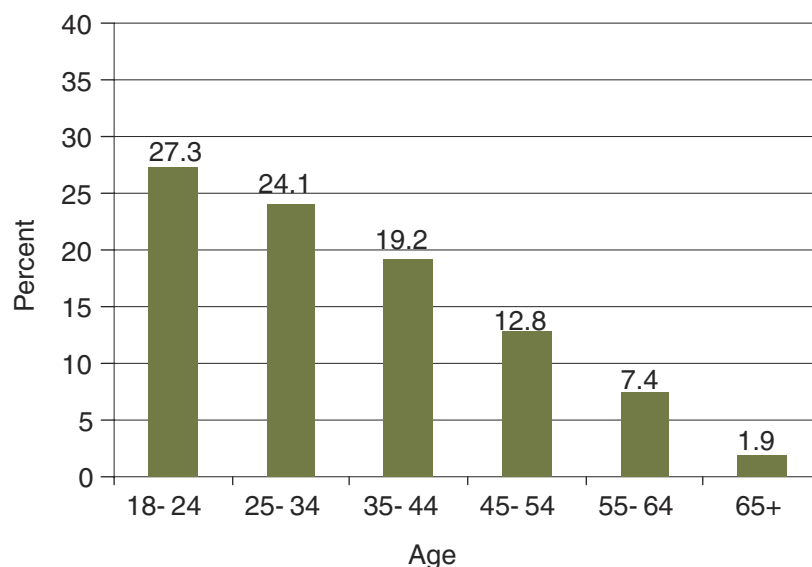
**Healthy People 2010 Objective:** No more than 6% of adults engage in binge drinking.

**Significance of indicator:** Research summarized in Healthy People 2010 shows that alcohol use has been linked with a substantial proportion of injuries and deaths from motor vehicle crashes, falls, fires, and drownings, and is a factor in homicide, suicide, domestic violence, child abuse, and high-risk sexual behavior. Binge drinking is defined as having five or more drinks on one occasion during the past 30 days.

**Colorado measure:** A little more than one-quarter of Coloradans ages 18-24 reported binge drinking in 2005. Overall, 16.2 percent of Colorado adults reported binge drinking within the past 30 days. The Healthy People 2010 objective is for 6 percent or fewer adults to engage in binge drinking.

**Colorado data source:** Behavioral Risk Factor Surveillance System, Health Statistics Section, CDPHE.

Binge drinking among Colorado adults by age group, 2005



Source: Behavioral Risk Factor Surveillance System, Health Statistics Section, Colorado Department of Public Health and Environment





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### Indicator 7: Morbidity

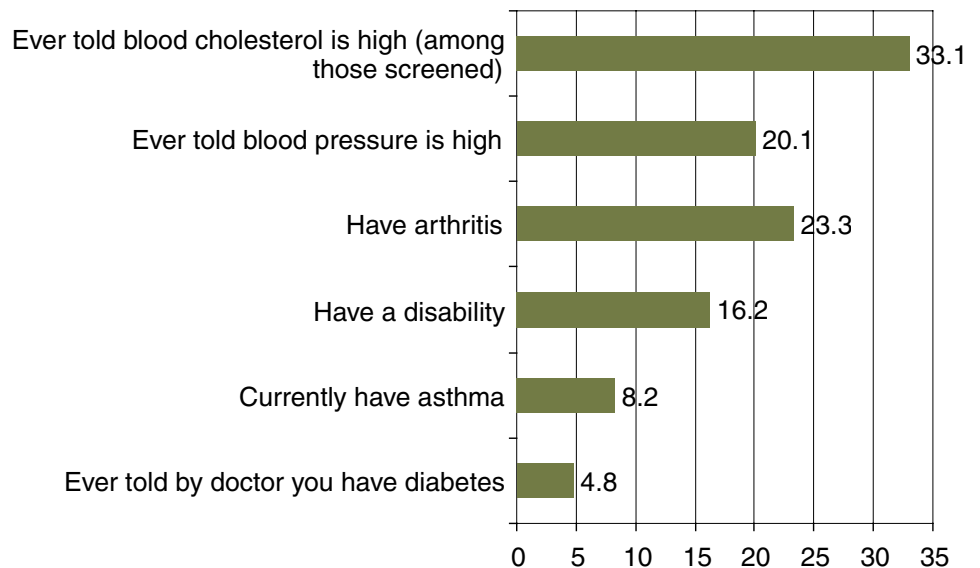
**Healthy People 2010 Objective:** No more than 2.5% of adults have diabetes.

**Significance of indicator:** Several conditions can lead to premature death or can decrease quality of life. In 2005, 33 percent of Colorado adults had elevated blood cholesterol levels and 20 percent suffered from high blood pressure, two major risk factors for cardiovascular disease, a leading cause of death.

**Colorado measure:** Nearly one in four Coloradans reported that they have arthritis, which can limit daily activities and affect one's ability to work. In 2005, 16.2 percent of Colorado adults reported that they have a disabling condition which limits their activities. Nearly nine percent suffered from asthma, and 4.8 percent had clinically diagnosed diabetes. Diabetes is a major risk factor for heart attack and stroke. The Healthy People 2010 objective is for fewer than 2.5 percent of people to have diabetes.

**Colorado data source:** Behavioral Risk Factor Surveillance System, Health Statistics Section, CDPHE.

Morbidity among Colorado adults, 2005



Source: Behavioral Risk Factor Surveillance System, Health Statistics Section, CDPHE.



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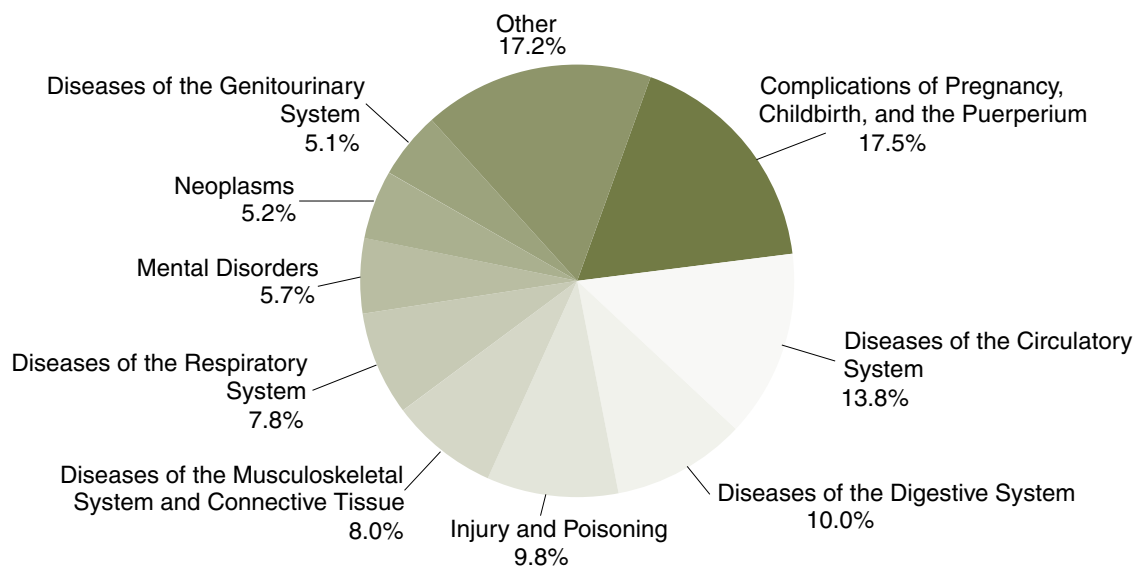
### Indicator 8: Hospitalization

**Colorado measure:** For adults ages 20 or older, there were more than 368,000 hospital discharges in Colorado in 2005 and almost \$10 billion in total charges. Almost 18 percent of these discharges were related to pregnancy and childbirth, although diagnoses in this group accounted for just 6 percent of the total charges. Pregnancy and childbirth, diseases of the circulatory system, diseases of the digestive system, and injury and poisoning accounted for more than half of all hospital discharges.

Together, diseases of the circulatory system and injury and poisoning accounted for more than one-third of all charges for hospital discharges in Colorado in 2005, although those were the diagnoses for less than one-quarter of all discharges.

**Colorado data source:** Hospital discharge records, Colorado Health and Hospital Association

Percent of hospital discharges by principal diagnosis type: Colorado occurrences for ages 20+, 2005



Source: Hospital Discharge records, Colorado Health and Hospital Association.



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### Indicator 9: Mortality

**Colorado measure:** Colorado residents had a lower overall age-adjusted death rate than the U.S. in 2004 with 747.0 deaths per 100,000 population compared to 801.1 for the U.S., and Colorado also had lower rates for the two leading causes of death: heart disease and cancer.

However, Colorado had higher death rates for some underlying causes of death, such as chronic lower respiratory diseases, unintentional injuries, Alzheimer's disease, suicide, and atherosclerosis.

Age-adjusted death rates in Colorado in 2005 varied by race/ethnicity. For chronic lower respiratory diseases, suicide, and Alzheimer's disease, the highest rates were among White non-Hispanics. White Hispanics had the highest rates for unintentional injuries and diabetes mellitus. The rates for heart disease and cancer (malignant neoplasms) were highest among Blacks.

Mortality patterns differ by age group but have remained somewhat stable over time. Unintentional injuries were the leading cause of death for the age group 1-44 years, with suicide being the second leading cause for those ages 15-44. For ages 15-34, the three leading causes of death were injury-related: unintentional injuries, suicide, and homicide, and for ages 0-54, at least one of the three leading causes was injury-related. Chronic diseases accounted for more deaths in the older age groups. Cancer was the leading cause for ages 45-84, and heart disease was second. These were reversed after age 85. It is important to understand these patterns in order to develop appropriate strategies to prevent deaths from different causes in different age groups.

Injuries can be classified as unintentional or intentional and can be broken down within those groups by cause of death. They account for a large proportion of deaths in the younger age groups and are usually considered to be preventable. In addition to varying by age group, deaths from injuries are distributed differently among gender and racial/ethnic groups. Colorado is among a group of western states that have the highest suicide rates in the U.S. In Colorado in 2005, suicide was the leading cause of injury deaths for males and for White non-Hispanics. It was also the third leading cause of injury death for females and White Hispanics, with motor vehicle-related deaths being first for those two groups. Motor vehicle-related deaths were the second leading cause for males and White non-Hispanics. Homicide remained the first leading cause of injury death for Blacks.

**Colorado data source:** Death records, Health Statistics Section, CDPHE.

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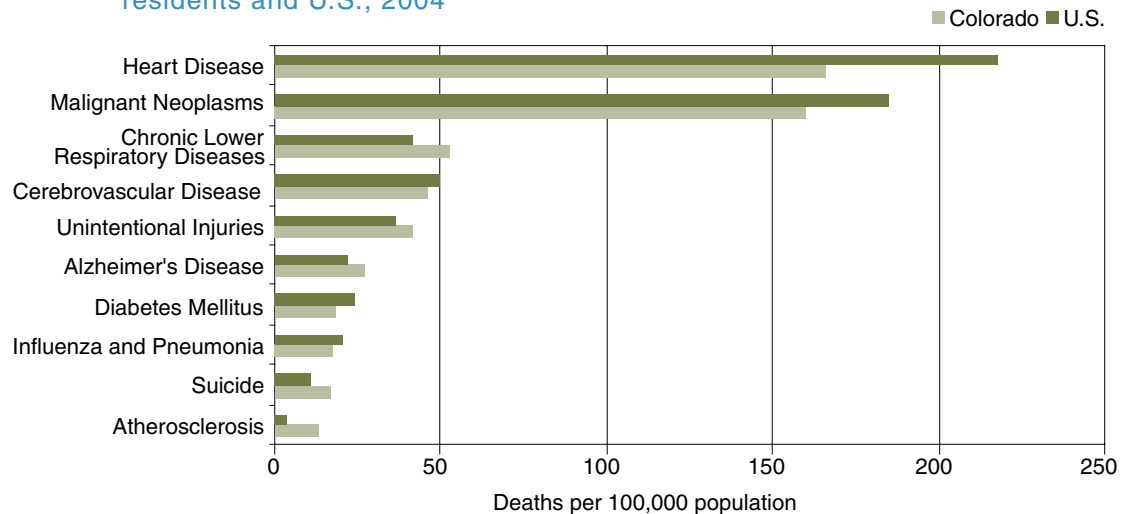
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### Indicator 9: Mortality

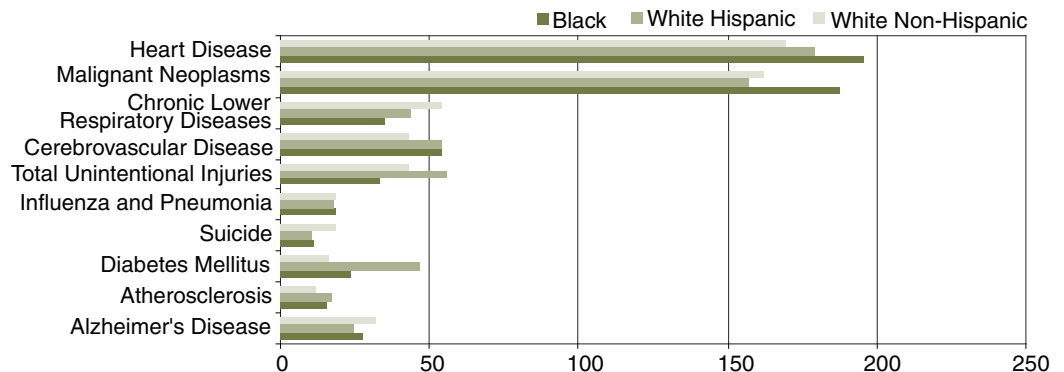
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Age-adjusted\* death rates for selected leading causes of death: Colorado residents and U.S., 2004\*\*



\*Rates are age-adjusted to the 2000 U.S. standard population using the direct method applied to 10-year age groups.  
\*\* Colorado data are final for 2004; U.S. data are preliminary for 2004.  
Source: Death records, Health Statistics Section, Colorado Department of Public Health and Environment.

Age-adjusted\* death rates by selected race/ethnicity: Colorado residents, 2005



\*Rates are age-adjusted to the 2000 U.S. standard population using the direct method applied to 10-year age groups.  
Source: Death records, Health Statistics Section, Colorado Department of Public Health and Environment.

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### Indicator 9: Mortality

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#### Three leading causes of death by age group: Colorado residents, 2005

Age Group	First Cause	Second Cause	Third Cause
<1	Perinatal Period Conditions (243)	Congenital Anomalies (100)	Unintentional Injuries (14)
1-9	Unintentional Injuries (31)	Malignant Neoplasms (20)	Congenital Anomalies (18)
10-14	Unintentional Injuries (21)	Malignant Neoplasms (9)	Suicide (7)
15-19	Unintentional Injuries (84)	Suicide (51)	Homicide (16)
20-24	Unintentional Injuries (157)	Suicide (83)	Homicide (32)
25-34	Unintentional Injuries (217)	Suicide (113)	Homicide (46)
35-44	Unintentional Injuries (276)	Suicide (164)	Malignant Neoplasms (161)
45-54	Malignant Neoplasms (650)	Heart Disease (397)	Unintentional Injuries (354)
55-64	Malignant Neoplasms (1,122)	Heart Disease (614)	Unintentional Injuries (185)
65-74	Malignant Neoplasms (1,510)	Heart Disease (916)	Chronic Lower Respiratory Diseases (459)
75-84	Malignant Neoplasms (1,869)	Heart Disease (1,818)	Chronic Lower Respiratory Diseases (720)
85+	Heart Disease (2,355)	Malignant Neoplasms (955)	Cerebrovascular Disease (684)

Source: Death records, Health Statistics Section, Colorado Department of Public Health and Environment.

#### Three leading types of injury death by gender and race/ethnicity: Colorado occurrences, 2005

	First Cause	Second Cause	Third Cause
<b>Female</b>	Motor Vehicle (200)	Falls (197)	Suicide (166)
<b>Male</b>	Suicide (629)	Motor Vehicle (462)	Poisoning (300)
<b>White Non-Hispanic</b>	Suicide (678)	Motor Vehicle (476)	Falls (345)
<b>White Hispanic</b>	Motor Vehicle (138)	Poisoning (87)	Suicide (83)
<b>Black</b>	Homicide (40)	Motor Vehicle/Poisoning (23)	Suicide (22)

Source: Death records, Health Statistics Section, Colorado Department of Public Health and Environment.



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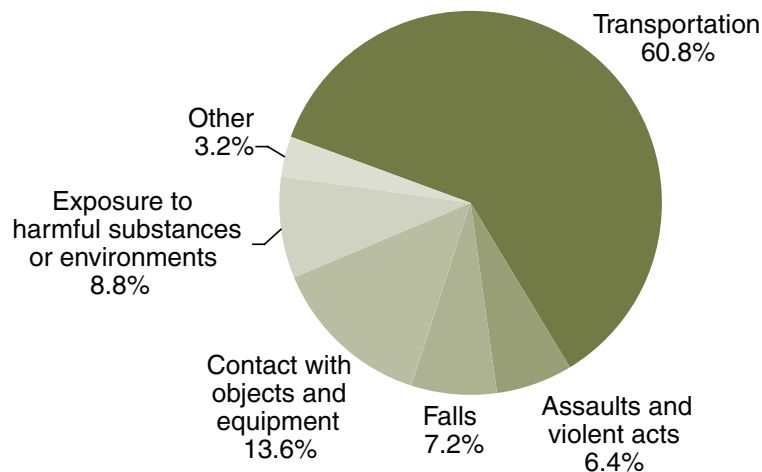
### Indicator 10: Occupational Injuries

**Significance of indicator:** Measuring the number and types of workplace injuries, especially those that are fatal, allow employers, workers, trade associations, and employee organizations to understand life-threatening hazards associated with various jobs, and to promote safe work practices through enhanced job safety training, development of new safety equipment, and improving work place safety standards overall.

**Colorado measure:** According to the Census of Fatal Occupational Injuries, there were 125 work-related fatalities in Colorado in 2005, for a rate of 5.2 fatalities per 100,000 employed civilians in the state. Transportation-related events were the cause of 60.8 percent of these deaths, followed by contact with objects and equipment at 13.6 percent and exposures to harmful substances or environments at 8.8 percent.

**Colorado data source:** Census of Fatal Occupational Injuries, Health Statistics Section, CDPHE.

Work-related fatalities by type of event: Colorado occurrences, 2005



Source: Census of Fatal Occupational Injuries, Health Statistics Section, CDPHE.



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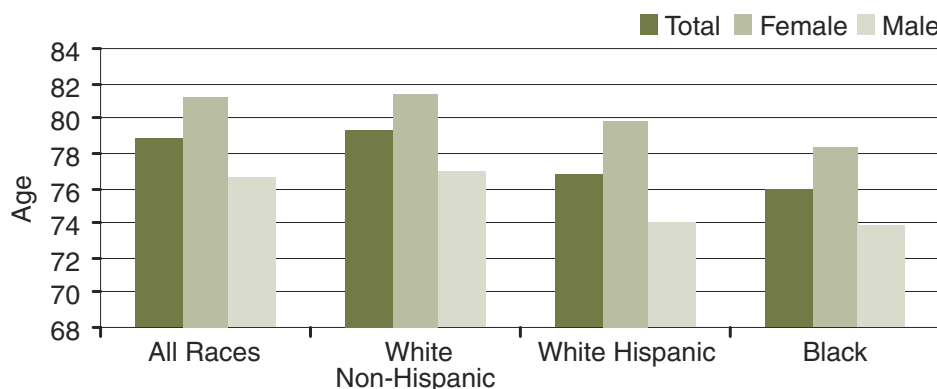
### Indicator 11: Life Expectancy

**Significance of indicator:** Life expectancy at birth is the average number of years that newborns would live if they were to experience the same age-specific death rates throughout their lives that occurred in 2005.

**Colorado measure:** In 1991, life expectancy at birth for Colorado residents was 76.9, and in 2005 it was 78.9 for an increase of 2 years of expected life or more than 2.5 percent. U.S. data are not available for 2005, but life expectancy at birth in 2004 was 77.9, a record high. Life expectancy in Colorado is 4.6 years higher for females than for males overall and is higher for females than for males among all racial/ethnic groups. White non-Hispanic females have the longest life expectancy at 81.5 years and Black males the shortest at 73.8 years.

**Colorado data source:** Death records, Health Statistics Section, CDPHE.

Life expectancy at birth by gender and race/ethnicity: Colorado residents, 2005



Source: Death records, Health Statistics Section, CDPHE.



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## Adult Health

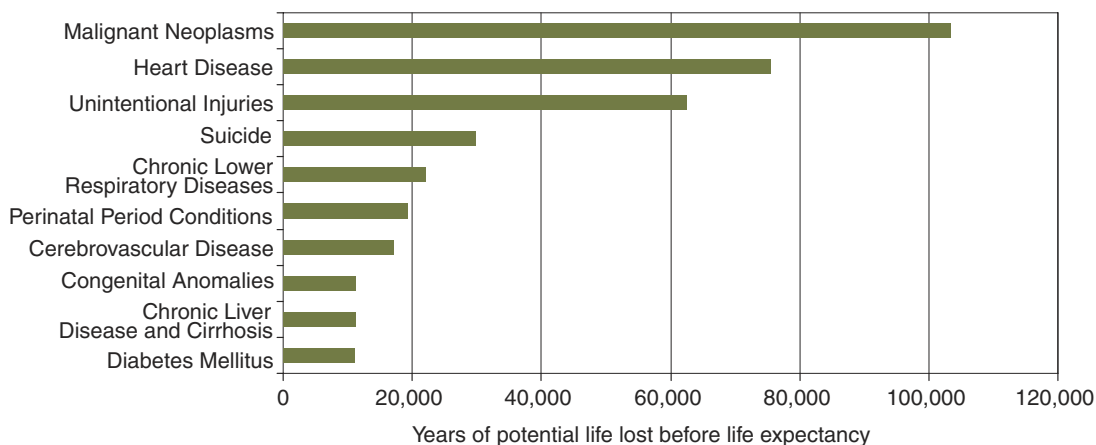
### Indicator 12: Potential Life Lost

**Significance of indicator:** Years of potential life lost (YPLL) is a statistic that measures the relative effect of causes of death on premature mortality. It can be calculated as the potential number of years lost before life expectancy or before some other defined time, as age 65.

**Colorado measure:** Deaths due to malignant neoplasms (21.1%), heart disease (15.4%), and unintentional injuries (12.7%) combined to account for nearly half of all years of potential life lost before life expectancy in 2005. Additionally, deaths due to the 10 leading causes presented below accounted for almost 75 percent of all years of potential life lost before life expectancy.

**Colorado data source:** Death records, Health Statistics Section, CDPHE.

Years of potential life lost before life expectancy for selected leading causes of death: Colorado residents, 2005



Source: Death records, Health Statistics Section, CDPHE.