

The impact of social polarization

## Study shows higher cardiac death rates in major US cities, rural South

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A new study by the Centers for Disease Control in Atlanta, Georgia has found death rates from heart disease for US women to be highest in four major cities as well as in the rural South.

One of the reasons for this detailed study covering every part of the country—with breakdowns by region, race and ethnic origin—was to counter the popular misconception that heart disease is not a major problem for women. Statistics reveal that 370,000 women died of heart disease in the US as whole in 1997. Annual mortality rates from heart disease for women are 401 per 100,000. Despite the seriousness of such threats as breast and ovarian cancer, deaths from heart disease are greater than for all forms of cancer combined.

The average of 400, however, conceals wide differences between different regions of the country. In parts of the West, for instance, the rate is about 200 per 100,000, while in New York City it is nearly 600.

The higher death rates in rural areas of Appalachia and the South are not unexpected. These are areas of endemic poverty, relatively few doctors, longer distances to hospitals and modern medical centers. Many of the elderly poor live alone in isolated circumstances and are unable to care for themselves. They are also cut off from the opportunity for timely and up-to-date care.

The study also found, however, that the death rates from heart disease were just as high in New York, Chicago, Detroit and New Orleans as they were in such areas as the Mississippi Delta.

Dr. Antonio Gotto of the Weill Cornell Medical College in New York City reported to the press that “life style” might be responsible for much of the heart disease in New York. The *New York Times* reported

Gotto commenting on ethnic, cultural and economic diversity producing great differences in ways of living and patterns of behavior.

“Economic diversity” is a rather awkward euphemism for social polarization. New York is home to people who were born in every part of the world, but it is also home to the wealthiest and some of the poorest residents of the United States.

The high death rates for women as a whole in New York, while masking big differences based on social class, also reflect the deep and growing poverty of millions of people. Mississippi, for instance, had the highest death rate for black women from heart disease, at 686. In New York City the comparable figure was 587.

New York is the most economically polarized and heavily immigrant city in the country, but the high death rates for Detroit, Chicago and New Orleans reflect similar trends. In Detroit and New Orleans the wealthy have fled and the remaining residents have been devastated by unemployment and cutbacks in social services. Chicago shares some of the characteristics of both Detroit and New York; while not enjoying the same kind of boom that Wall Street has brought to New York, it remains a major financial and commercial center in the Midwest.

In New York the poor supposedly have access to some of the leading hospitals and modern technology, but in practice a two-tier health system is in place. Living conditions, poor nutrition and health habits, and stress, including depression, all contribute to heart disease and to poor outcomes for those affected.

For the CDC study, see: [www.cdc.gov](http://www.cdc.gov).



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