## Distribution of disease burden and healthcare resource utilization associated with diabetes and cardiovascular conditions in New Brunswick

## **Figures 37-114:**

Cardiovascular and diabetes indicators by New Brunswick Health Council Community (and for New Brunswick overall) in 2018







Figure 37. Prevalence of acute myocardial infarction by NBHCC, 2018 (cases per 1000 population)

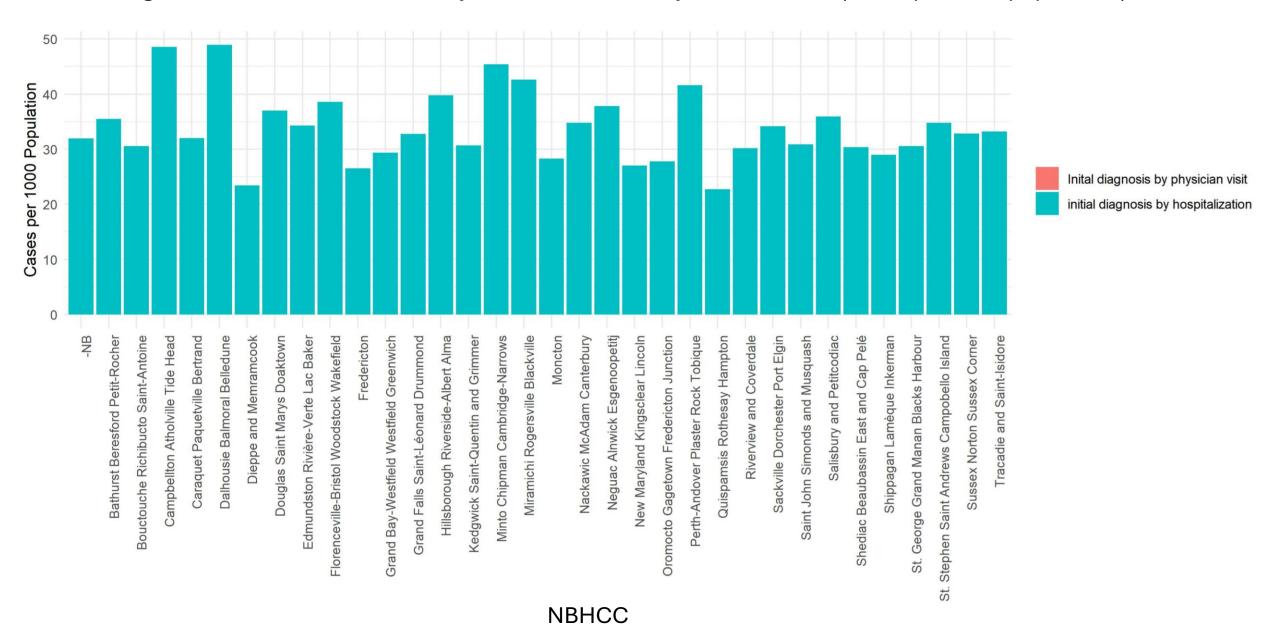


Figure 38. Prevalence of acute myocardial infarction by NBHCC separated by sex, 2018 (cases per 1000 population)

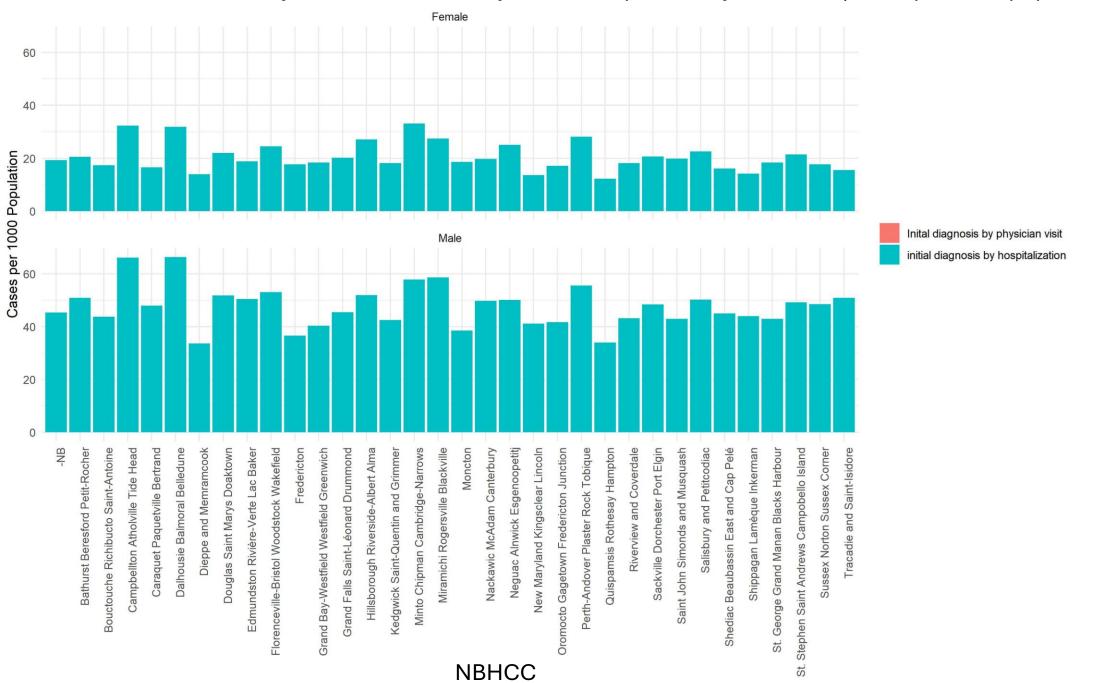


Figure 39. Prevalence of heart failure by NBHCC, 2018 (cases per 1000 population)

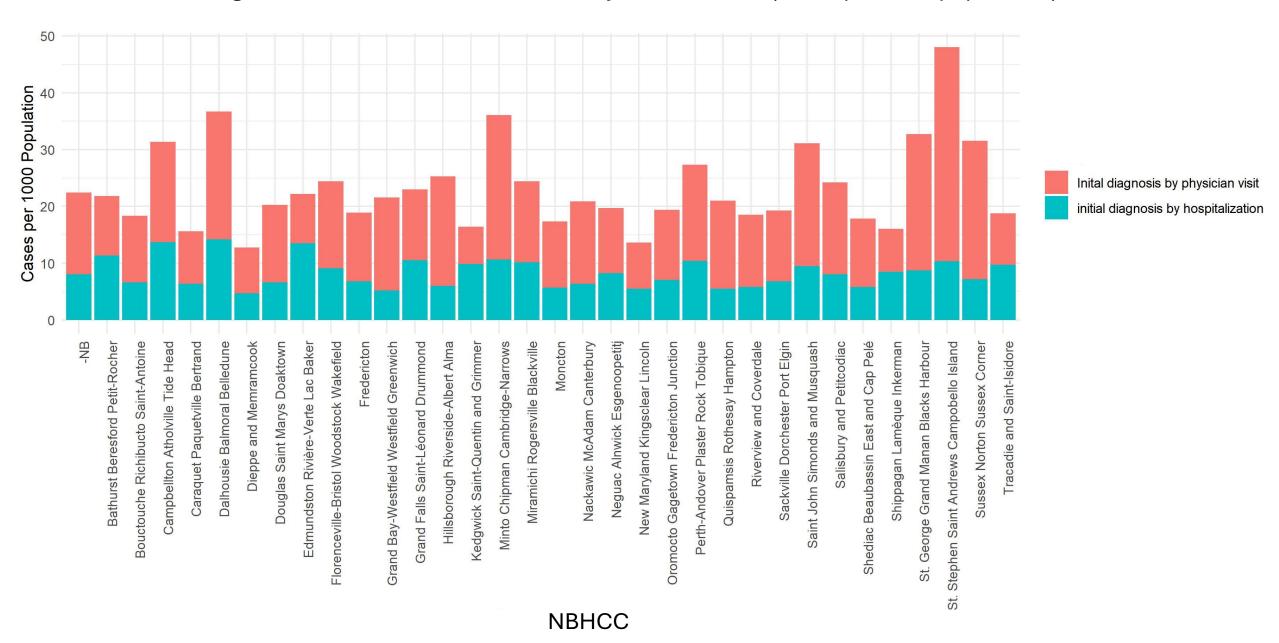


Figure 40. Prevalence of heart failure by NBHCC separated by sex, 2018 (cases per 1000 population)

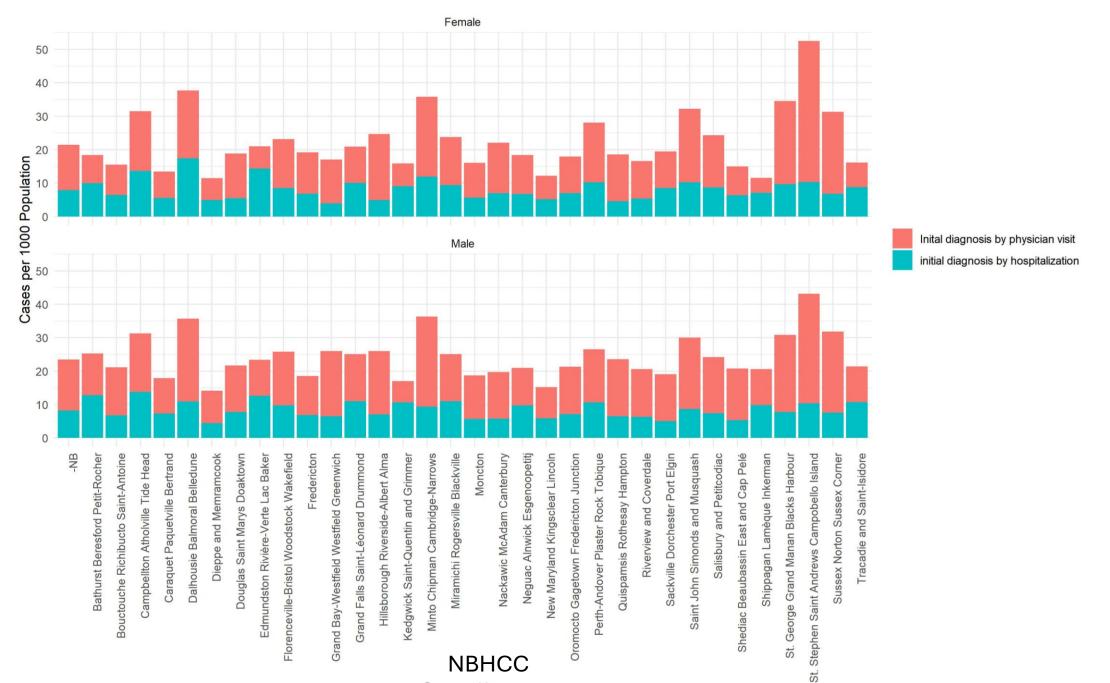


Figure 41. Prevalence of hypertension by NBHCC, 2018 (cases per 1000 population)

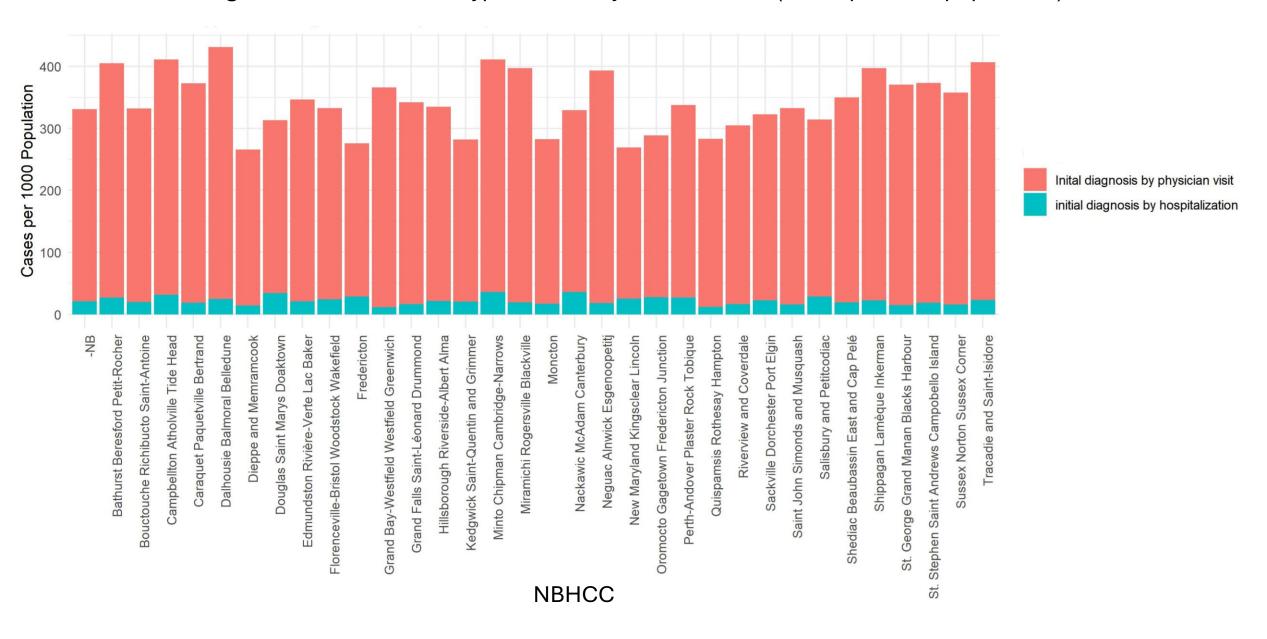


Figure 42. Prevalence of hypertension by NBHCC separated by sex, 2018 (cases per 1000 population)

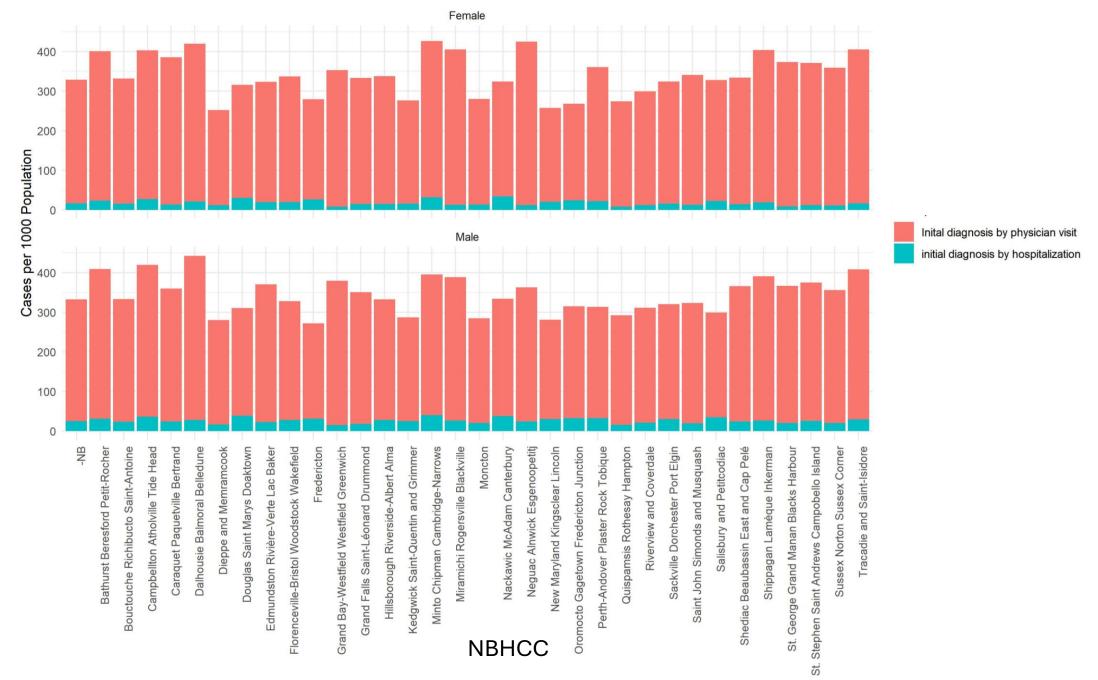


Figure 43. Prevalence of ischemic heart disease by NBHCC, 2018 (cases per 1000 population)

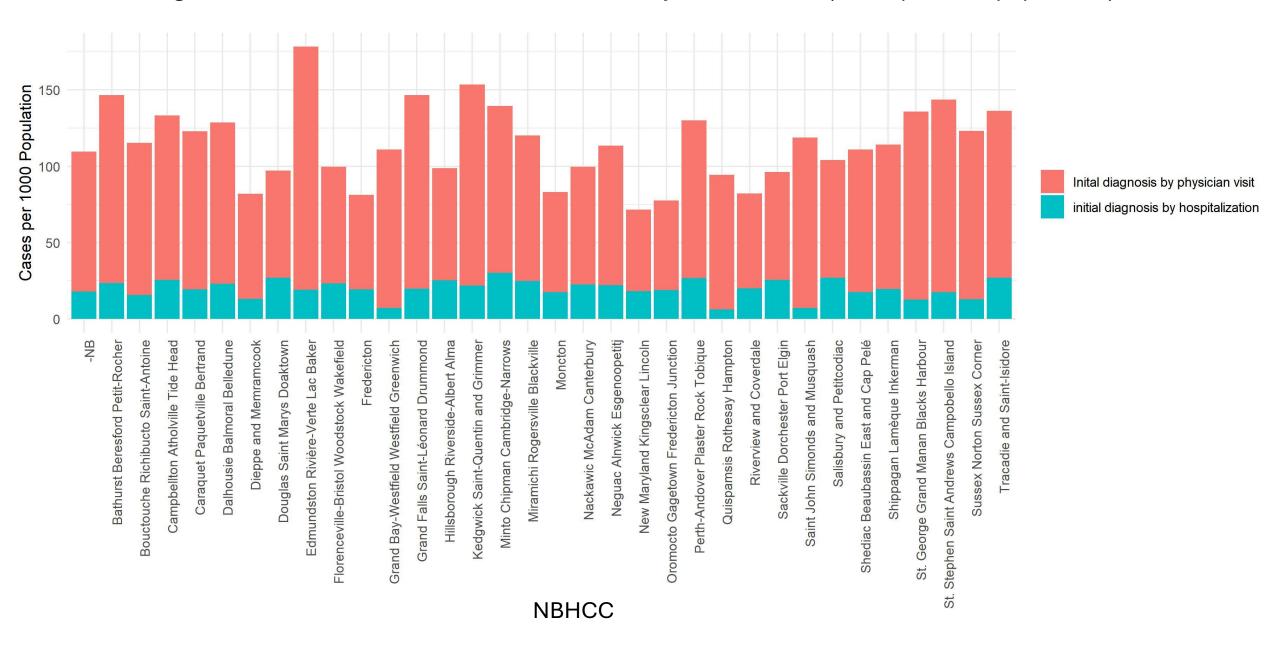


Figure 44. Prevalence of ischemic heart disease by NBHCC separated by sex, 2018 (cases per 1000 population)

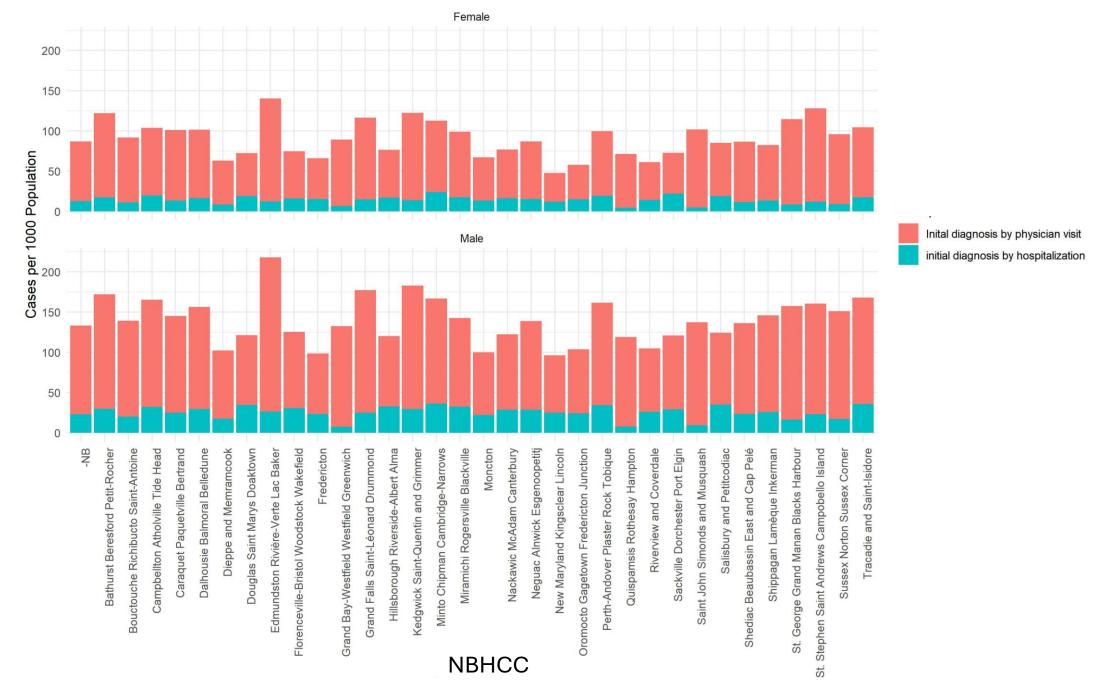


Figure 45. Prevalence of stroke by NBHCC, 2018 (cases per 1000 population)

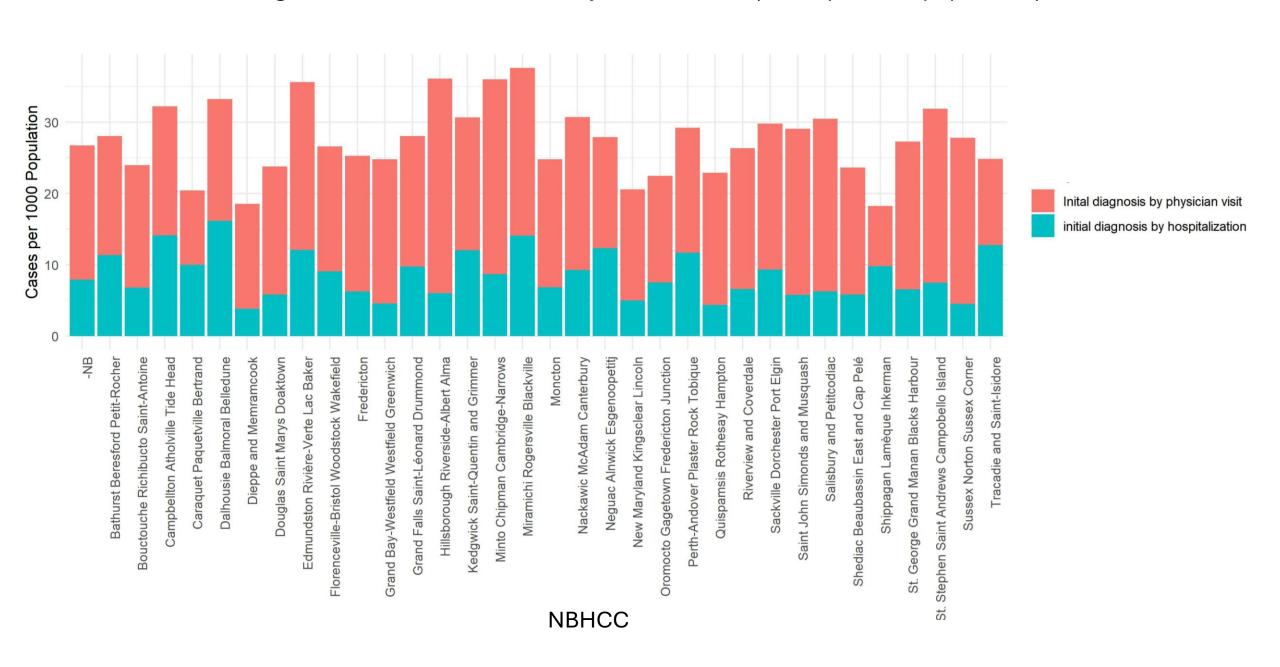


Figure 46. Prevalence of stroke by NBHCC separated by sex, 2018 (cases per 1000 population)

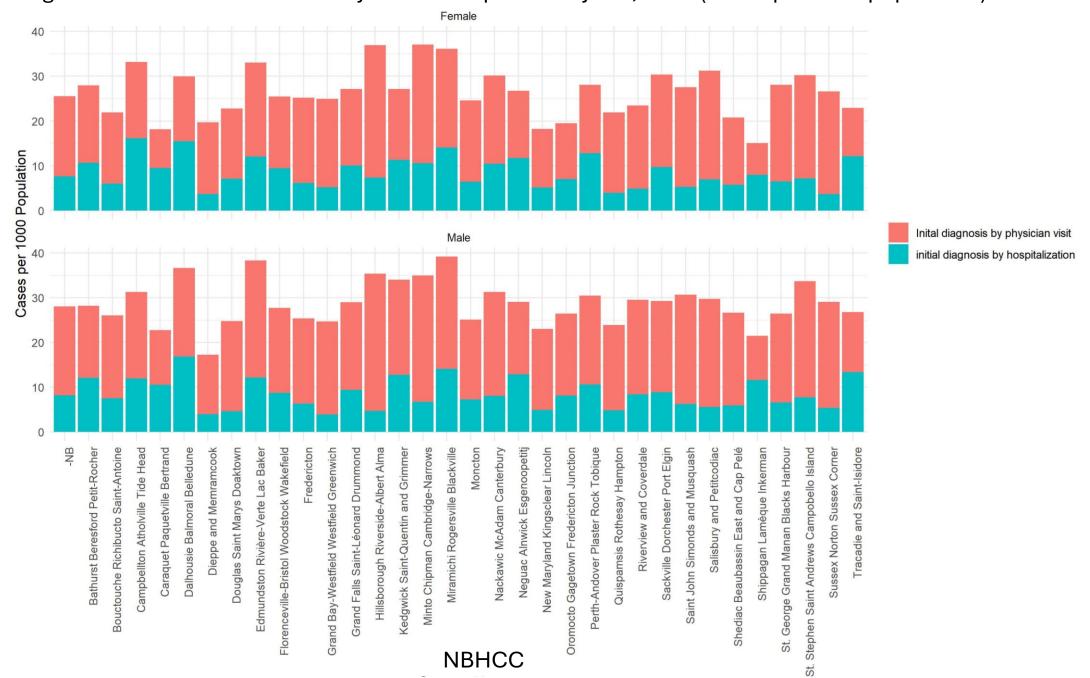


Figure 47. Prevalence of one or more cardiovascular conditions by NBHCC, 2018 (cases per 1000 population) (one or more of acute myocardial infarction, heart failure, hypertension, ischemic heart disease, stroke)

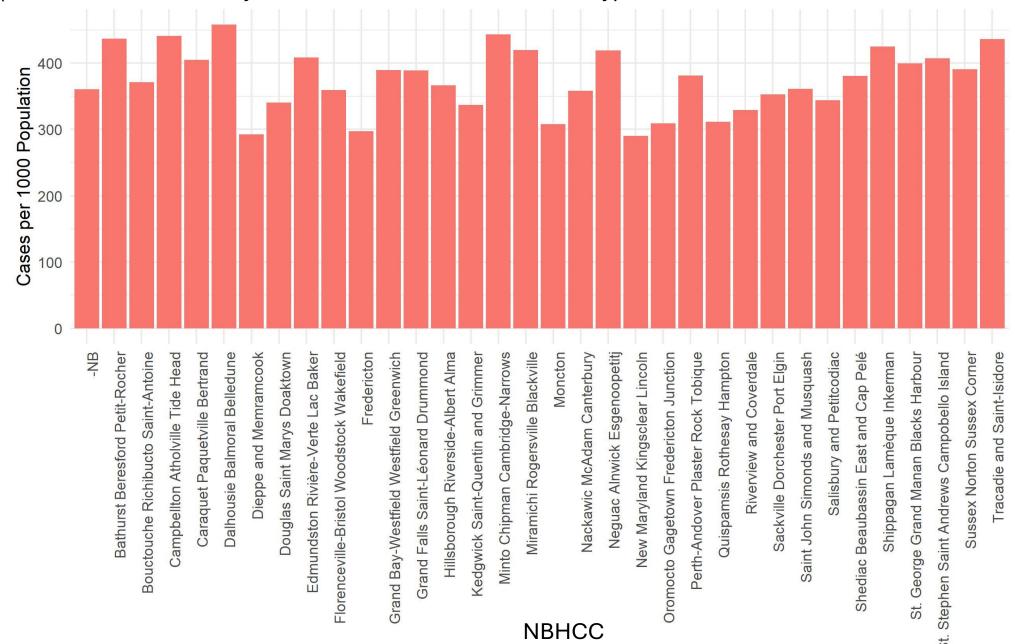


Figure 48. Prevalence of one or more cardiovascular conditions by NBHCC separated by sex, 2018 (cases per 1000 population) (one or more of acute myocardial infarction, heart failure, hypertension, ischemic heart disease, stroke)

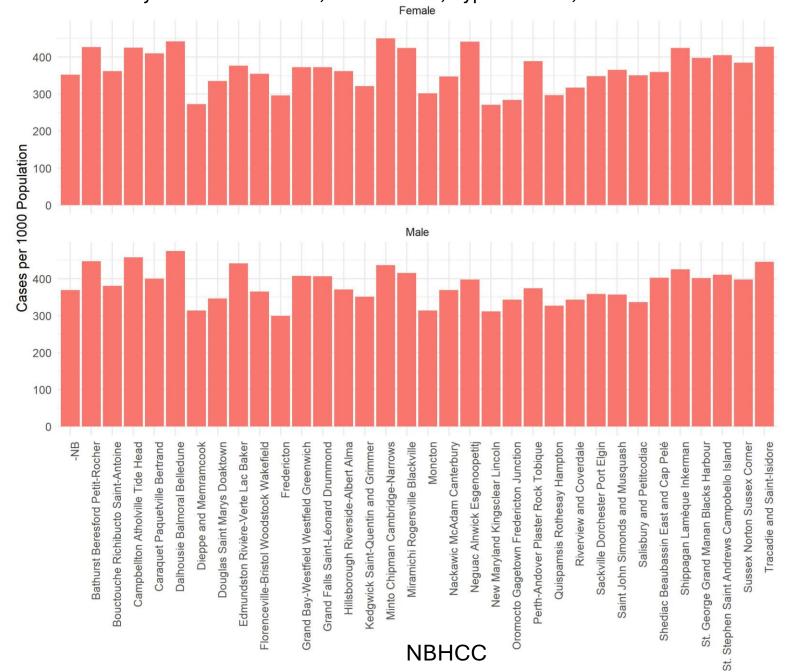


Figure 49. Prevalence of diabetes by NBHCC, 2018 (cases per 1000 population)

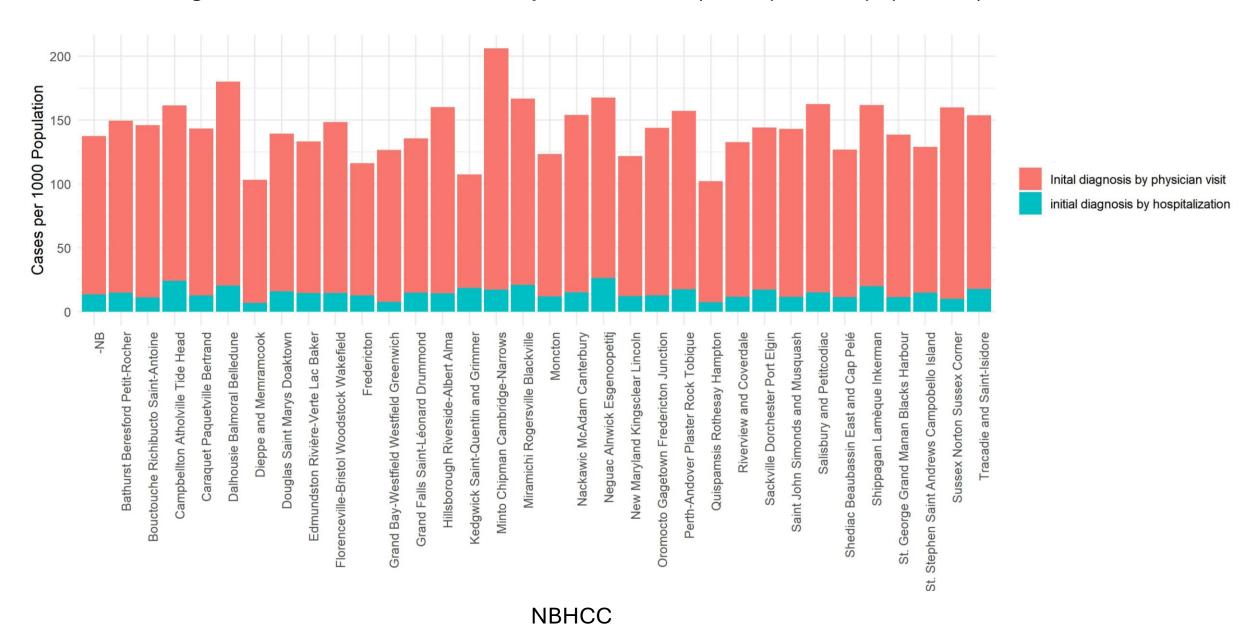


Figure 50. Prevalence of diabetes by NBHCC separated by sex, 2018 (cases per 1000 population)

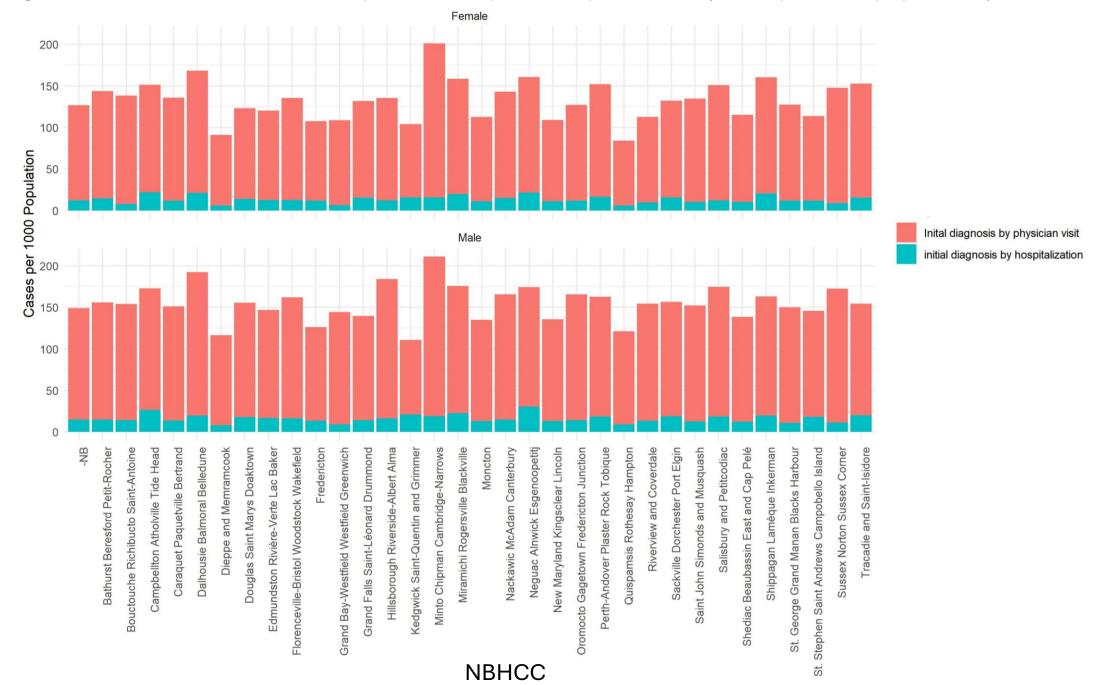


Figure 51. Prevalence of multiple chronic conditions (cardiovascular and/or diabetes) by NBHCC, 2018 (cases per 1000 population) (two or more among acute myocardial infarction, heart failure, hypertension, ischemic heart disease, stroke, diabetes)

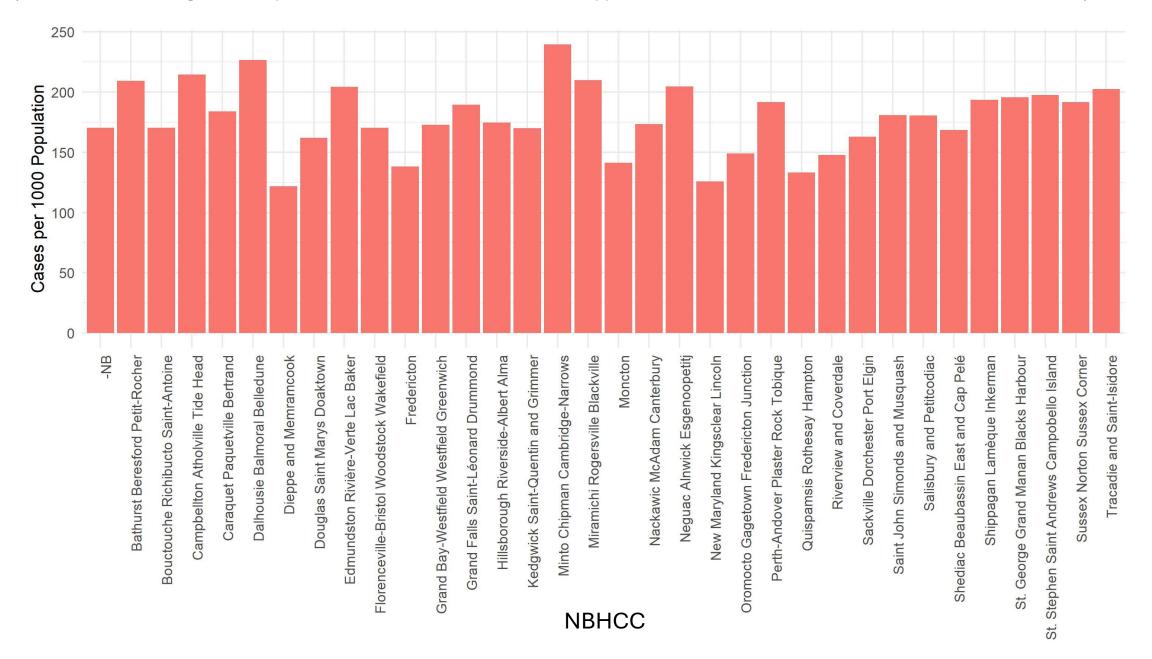


Figure 52. Prevalence of multiple chronic conditions (cardiovascular and/or diabetes) by NBHCC separated by sex, 2018 (cases per 1000 population) (two or more among acute myocardial infarction, heart failure, hypertension, ischemic heart disease, stroke, diabetes)

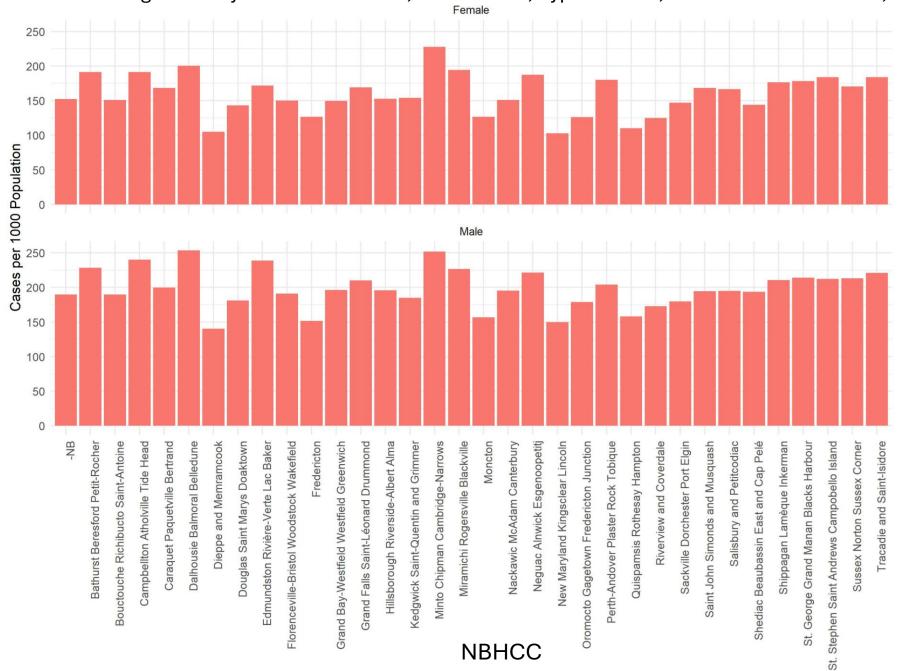


Figure 53. Prevalence of multiple cardiovascular conditions by NBHCC, 2018 (cases per 1000 population) (two or more among acute myocardial infarction, heart failure, hypertension, ischemic heart disease, stroke)

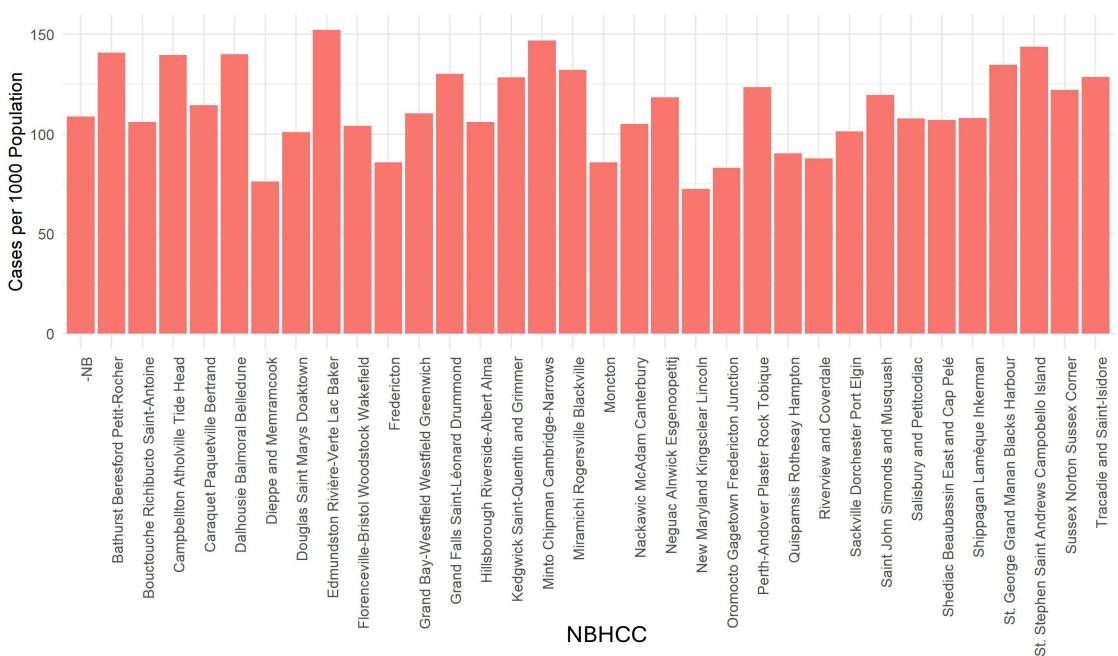


Figure 54. Prevalence of multiple cardiovascular conditions by NBHCC separated by sex, 2018 (cases per 1000 population) (two or more among acute myocardial infarction, heart failure, hypertension, ischemic heart disease, stroke)

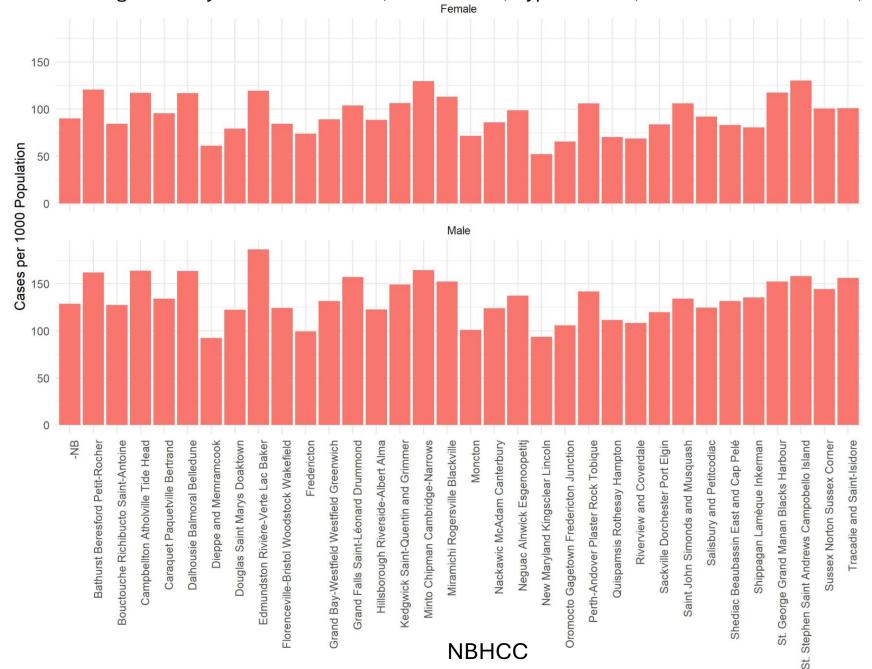


Figure 55. Prevalence of multiple chronic conditions (cardiovascular and diabetes) by NBHCC, 2018 (cases per 1000 population) (diabetes and one or more among acute myocardial infarction, heart failure, hypertension, ischemic heart disease, stroke)

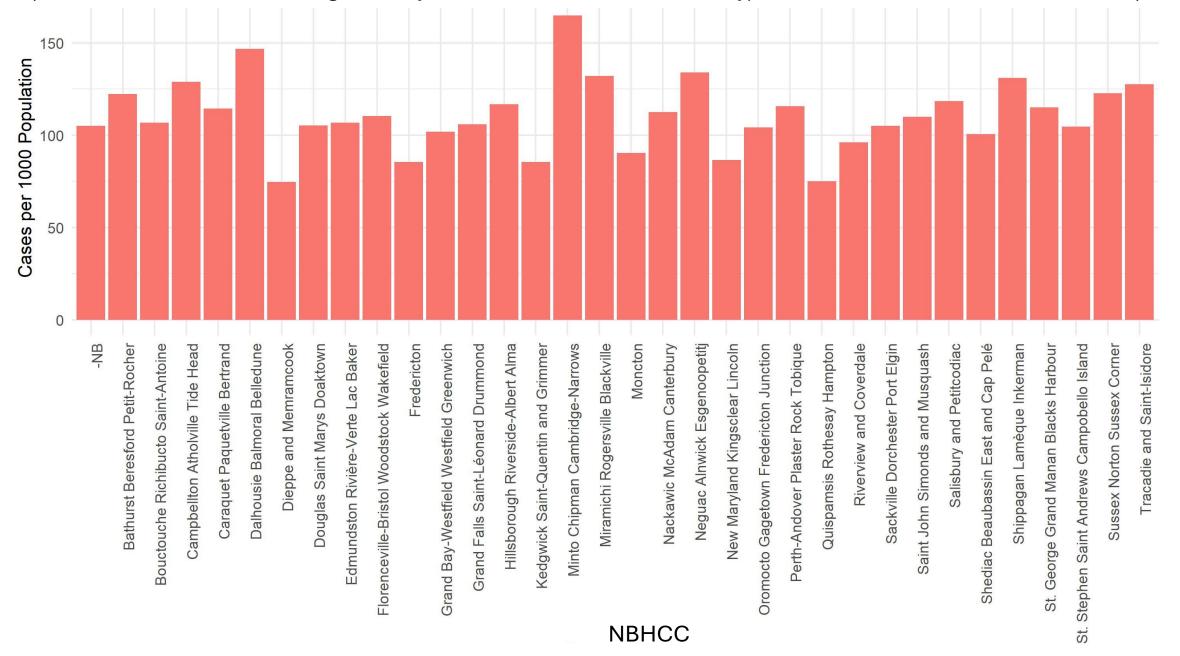


Figure 56. Prevalence of multiple chronic conditions (cardiovascular and diabetes) by NBHCC separated by sex, 2018 (cases per 1000 population) (diabetes and one or more among acute myocardial infarction, heart failure, hypertension, ischemic heart disease, stroke)

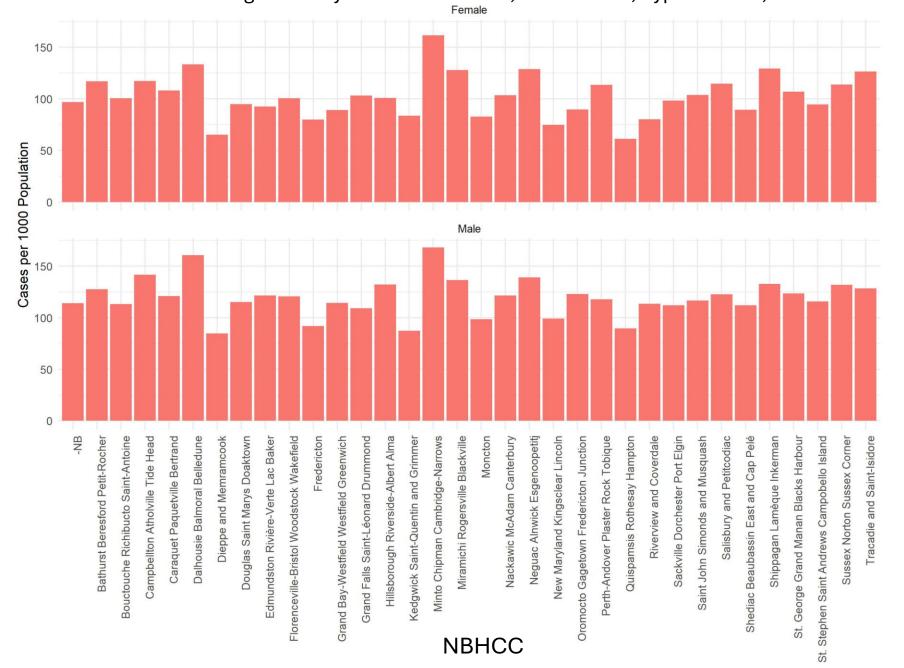


Figure 57. All-cause mortality rate among overall population by NBHCC, 2018 (deaths per 1000 population)

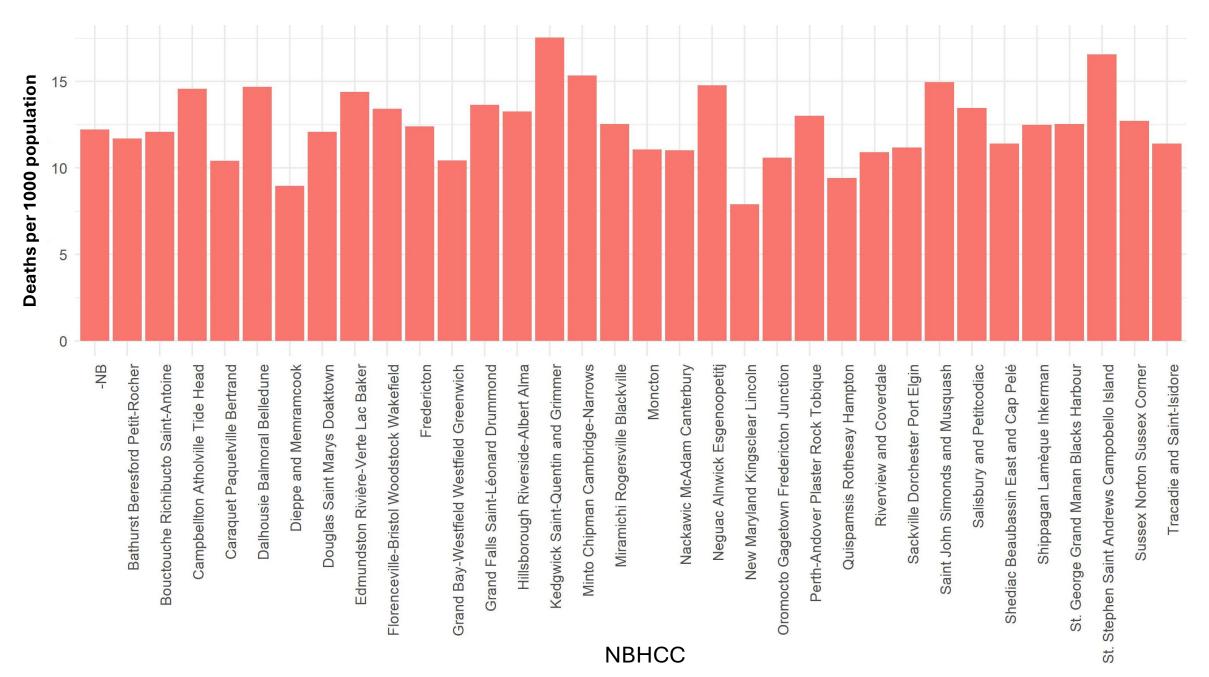


Figure 58. All-cause mortality rate among overall population by NBHCC separated by sex, 2018 (deaths per 1000 population)

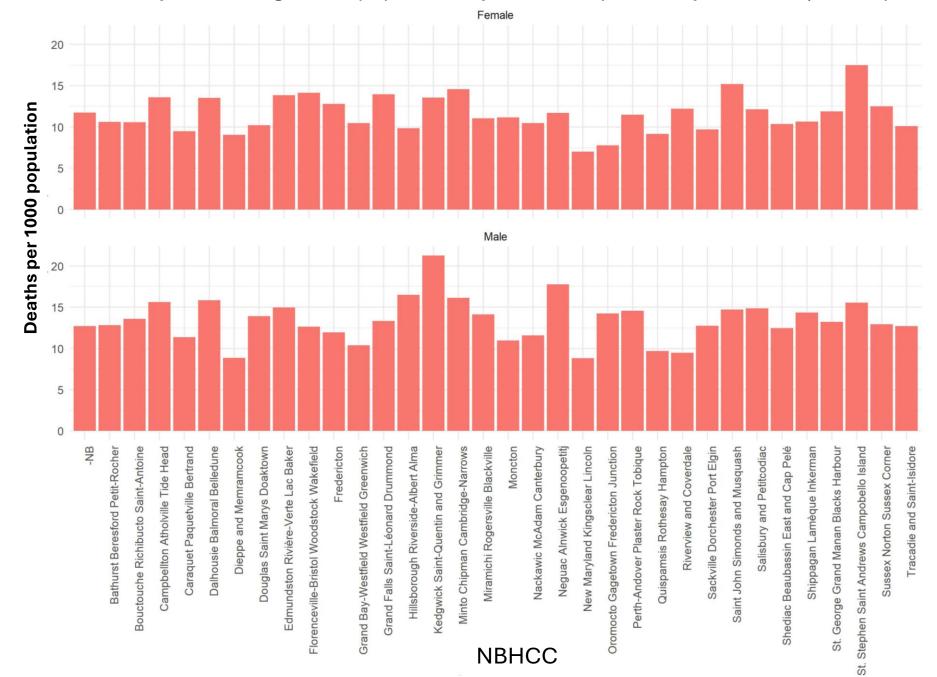


Figure 59. All-cause mortality rate among population with any cardiovascular diagnosis by NBHCC, 2018 (deaths per 1000 population)

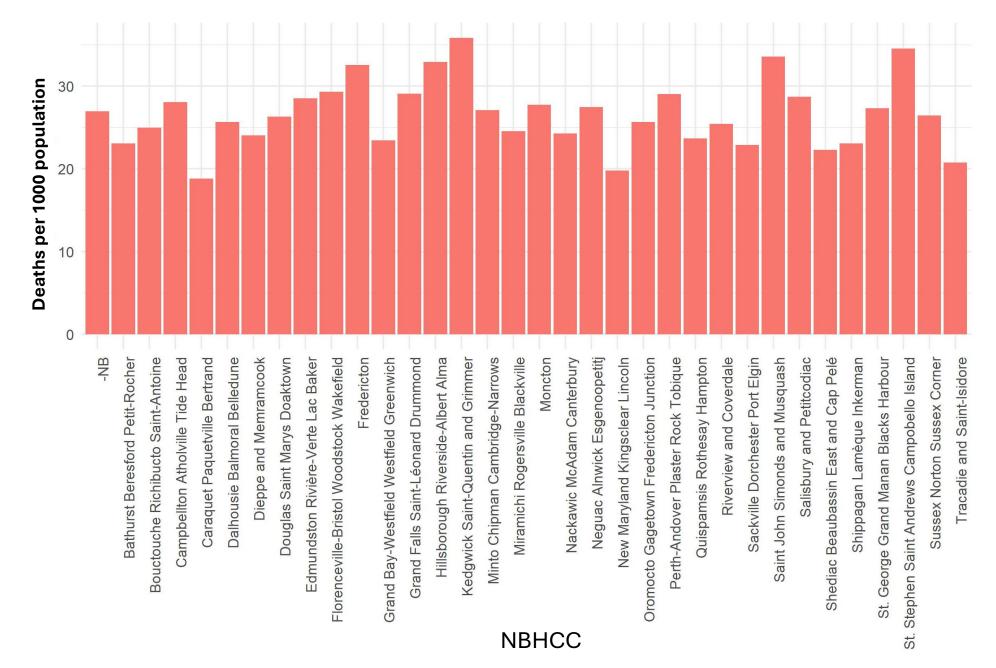


Figure 60. All-cause mortality rate among population with any cardiovascular diagnosis by NBHCC separated by sex, 2018 (deaths per 1000 population)

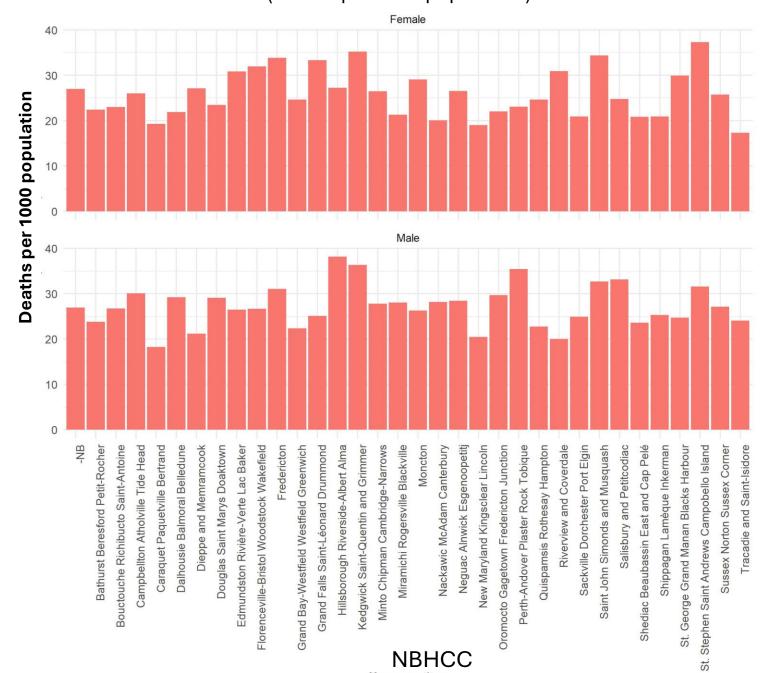


Figure 61. All-cause mortality rate among diabetic population by NBHCC, 2018 (deaths per 1000 population)

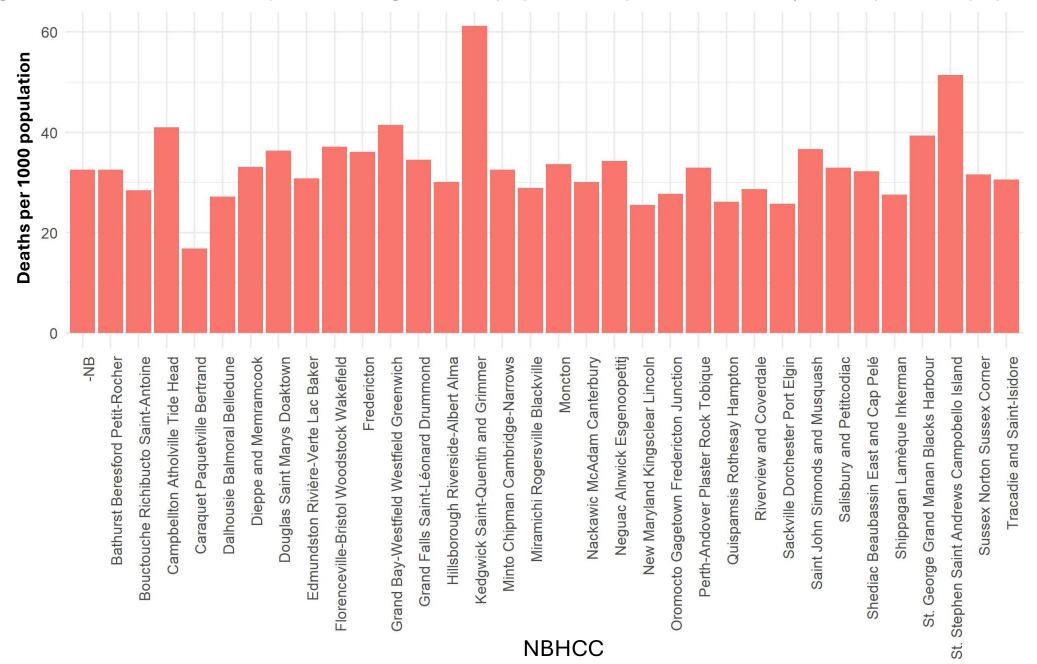


Figure 62. All-cause mortality rate among diabetic population by NBHCC separated by sex, 2018 (deaths per 1000 population)

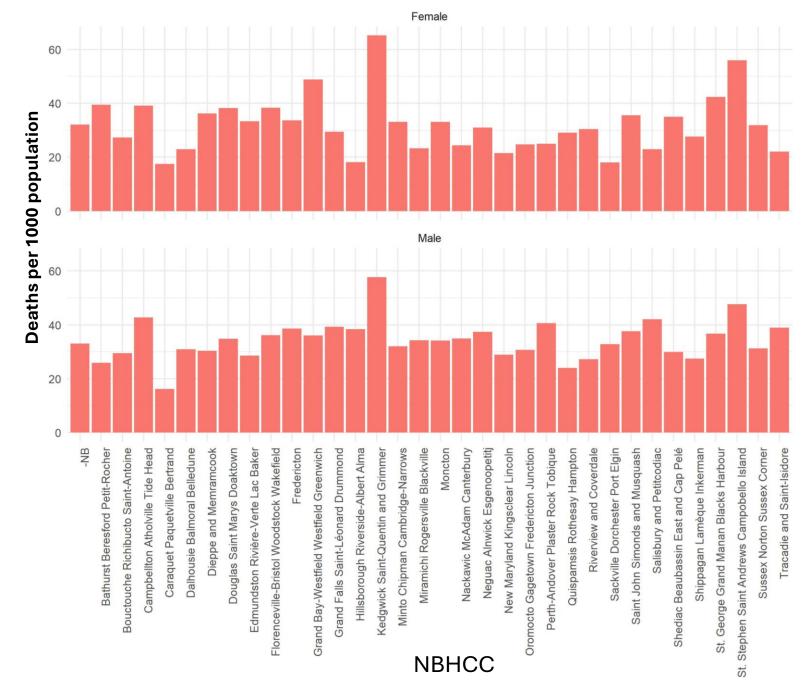


Figure 63. Cardiovascular-related mortality rate among overall population by NBHCC, 2018 (deaths per 1000 population)

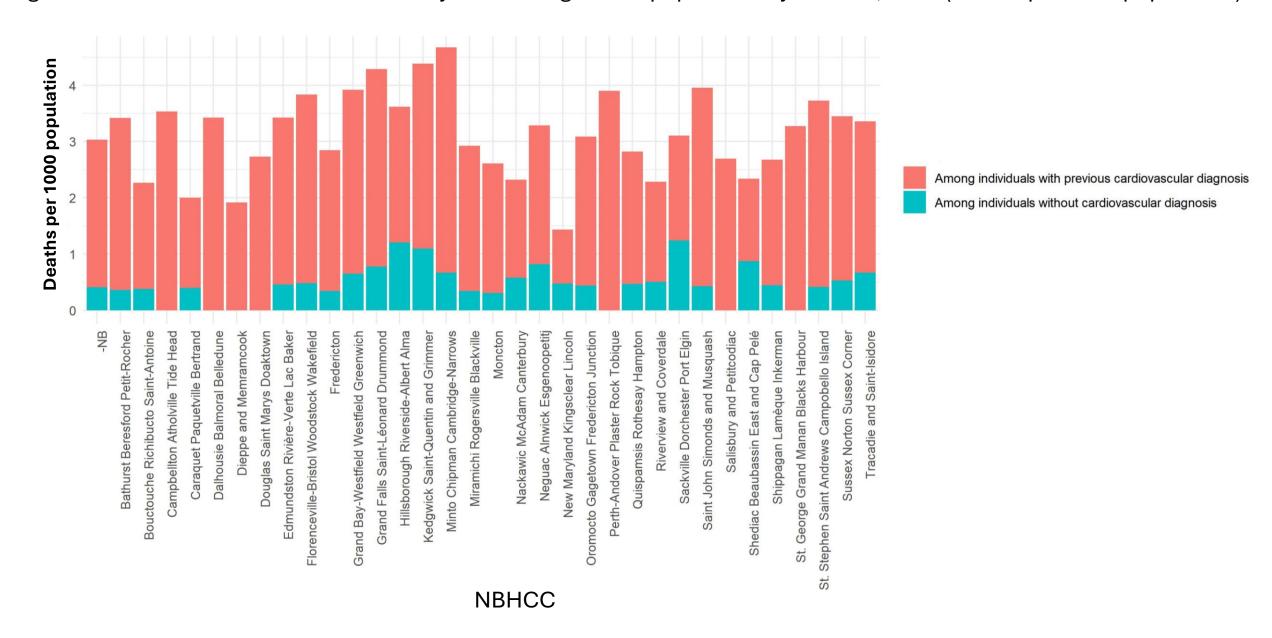


Figure 64. Cardiovascular-related mortality rate among overall population by NBHCC separated by sex, 2018 (deaths per 1000 population)

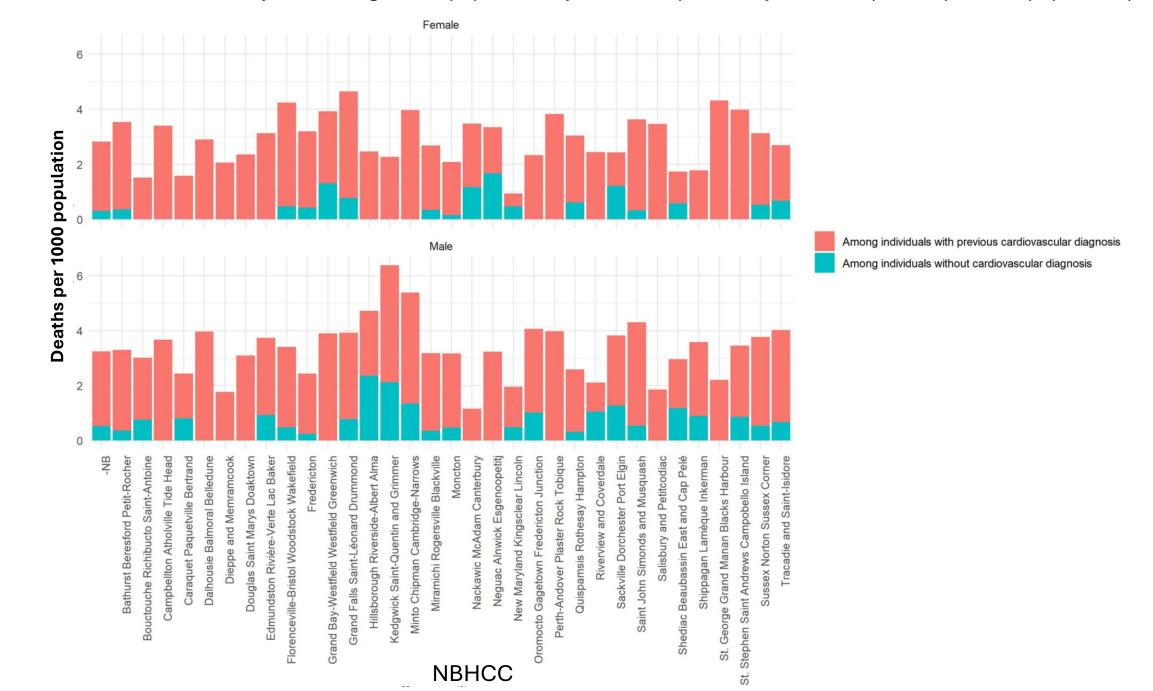


Figure 65. Diabetes-related mortality rate among overall population by NBHCC, 2018 (deaths per 1000 population)

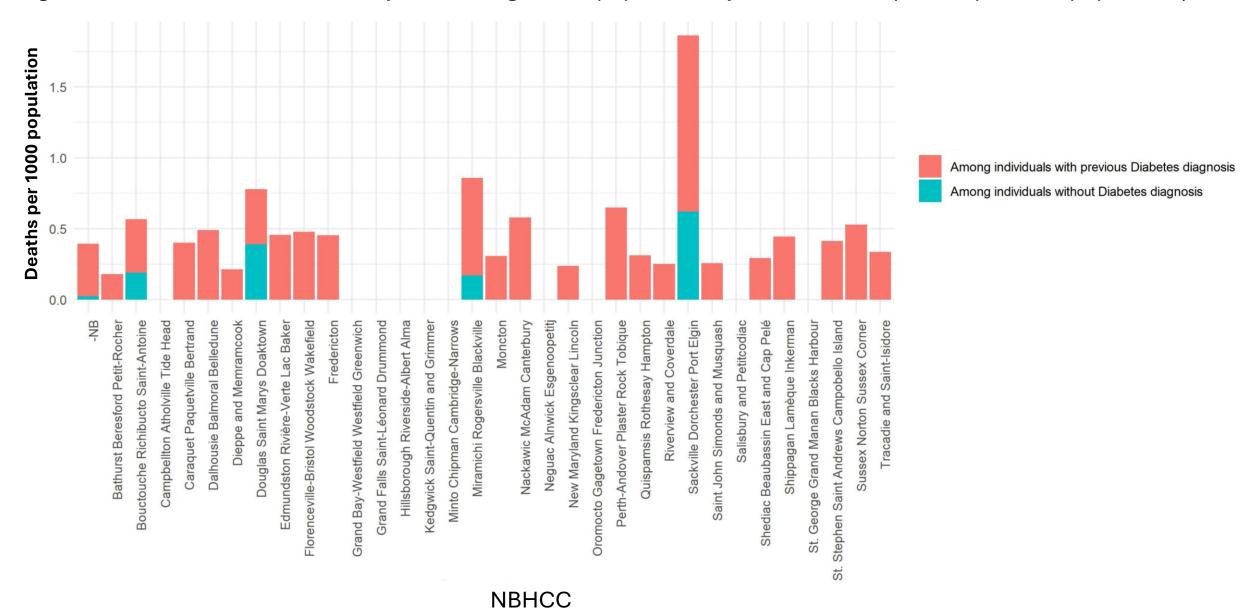


Figure 66. Diabetes-related mortality rate among overall population by NBHCC separated by sex, 2018 (deaths per 1000 population)

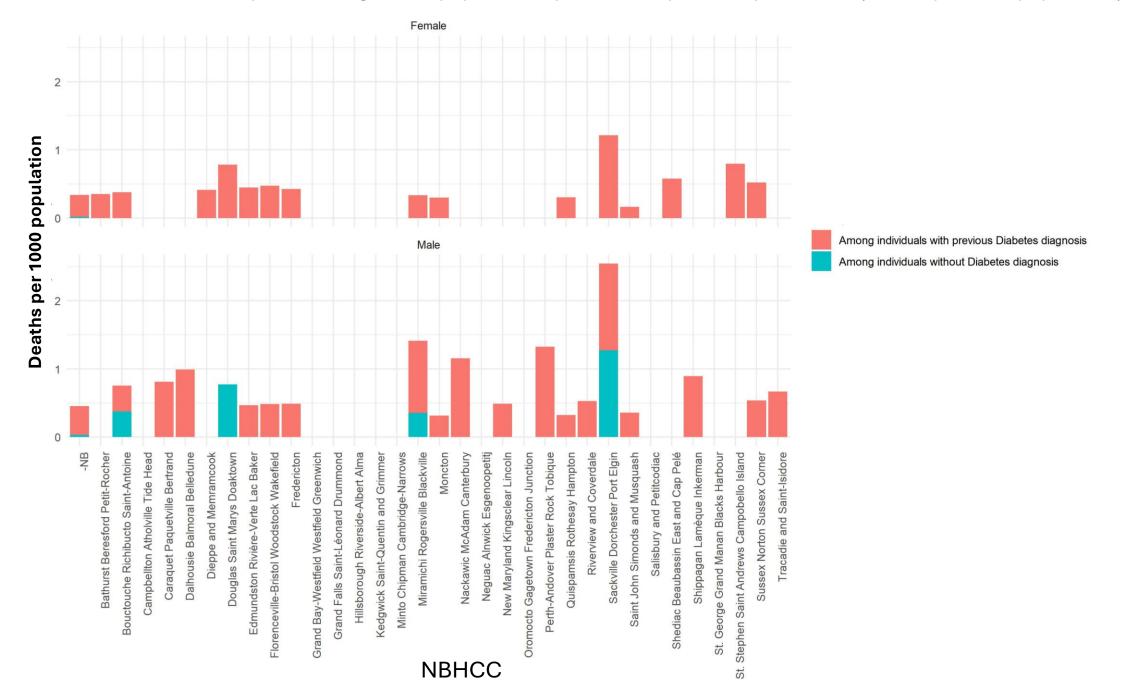


Figure 67. All-cause emergency department visit rate among overall population by NBHCC, 2018 (visits per 1000 population)

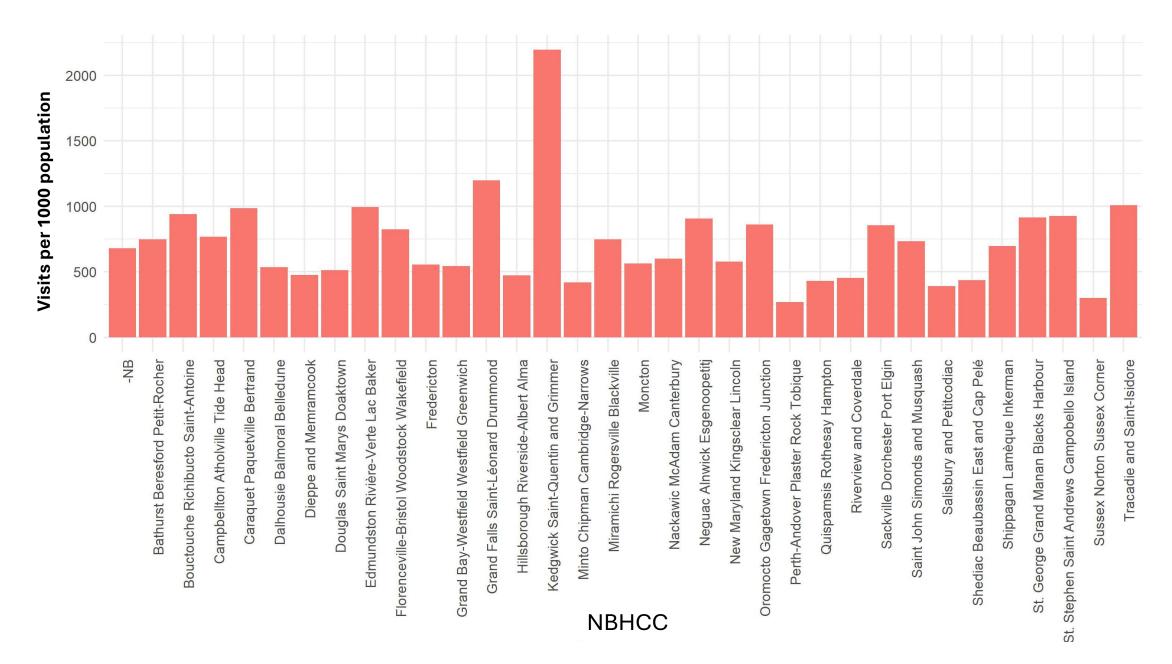


Figure 68. All-cause emergency department visit rate among overall population by NBHCC separated by sex, 2018 (visits per 1000 population)

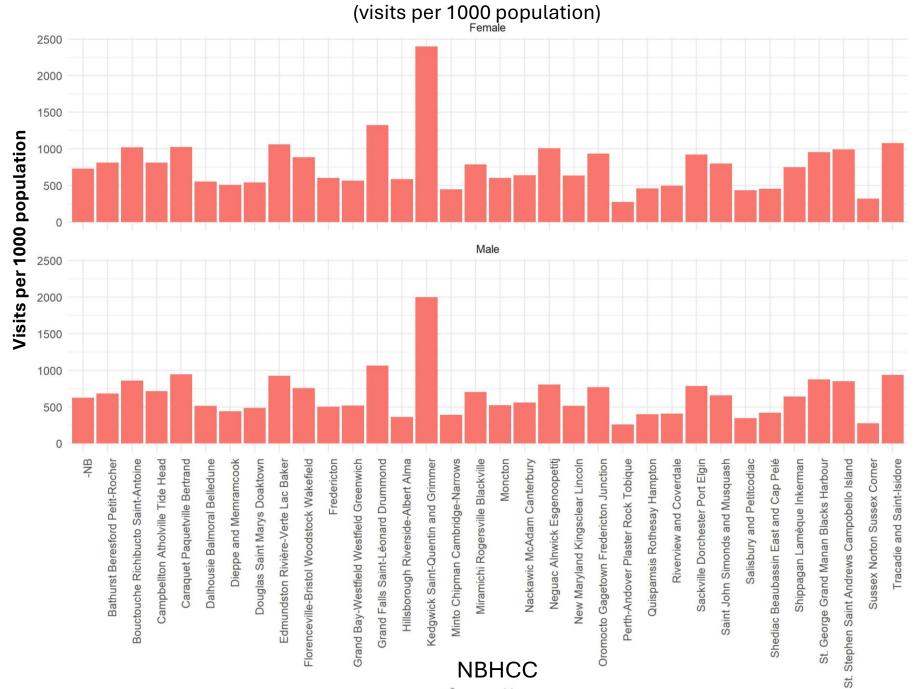


Figure 69. All-cause emergency department visit rate among population with any cardiovascular diagnosis by NBHCC, 2018 (visits per 1000 population)

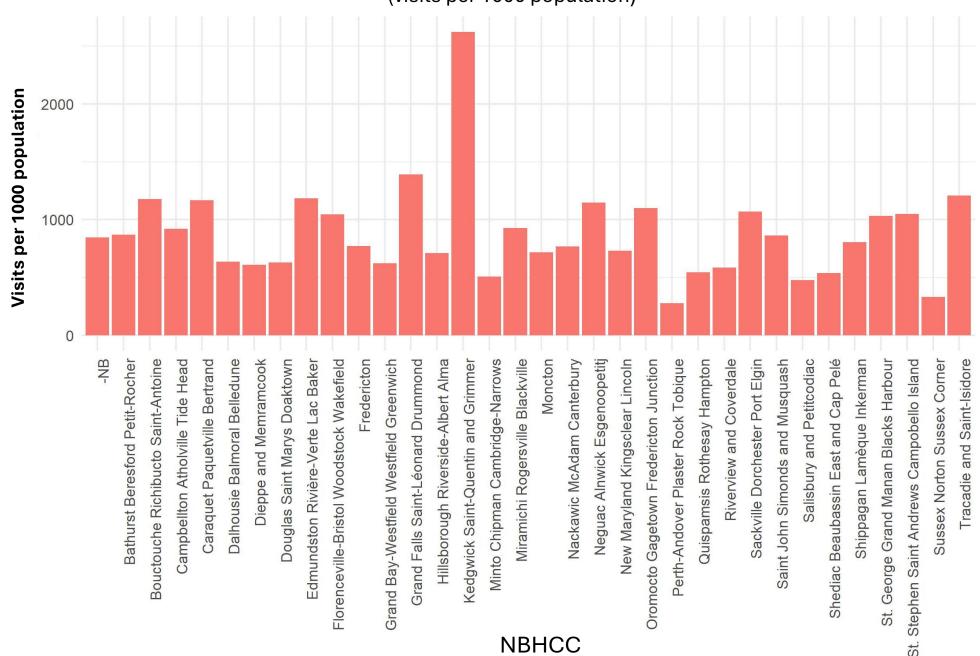


Figure 70. All-cause emergency department visit rate among population with any cardiovascular diagnosis by NBHCC separated by sex, 2018 (visits per 1000 population)

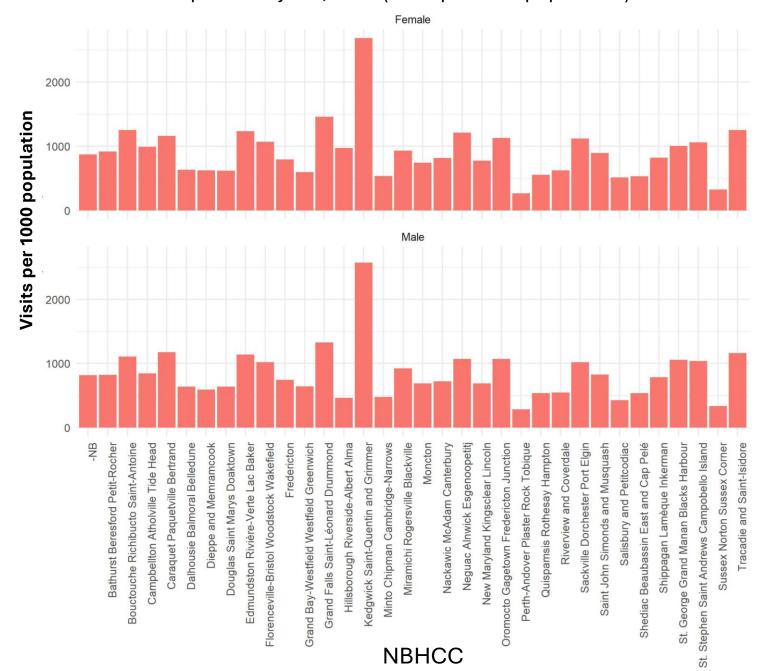


Figure 71. All-cause emergency department visit rate among diabetic population by NBHCC, 2018 (visits per 1000 population)

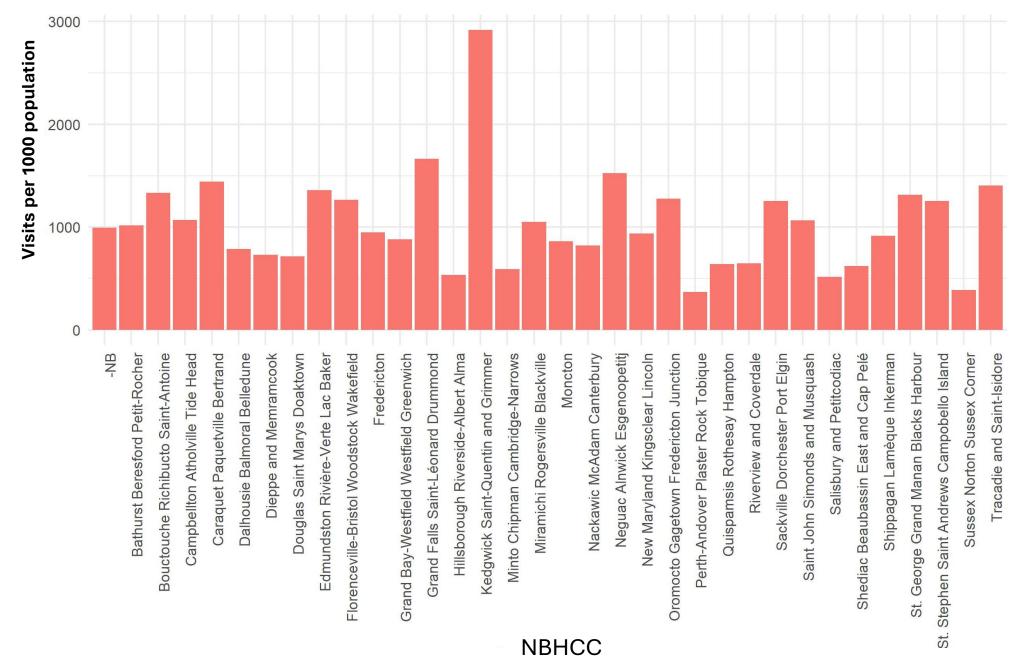


Figure 72. All-cause emergency department visit rate among diabetic population by NBHCC separated by sex, 2018 (visits per 1000 population)

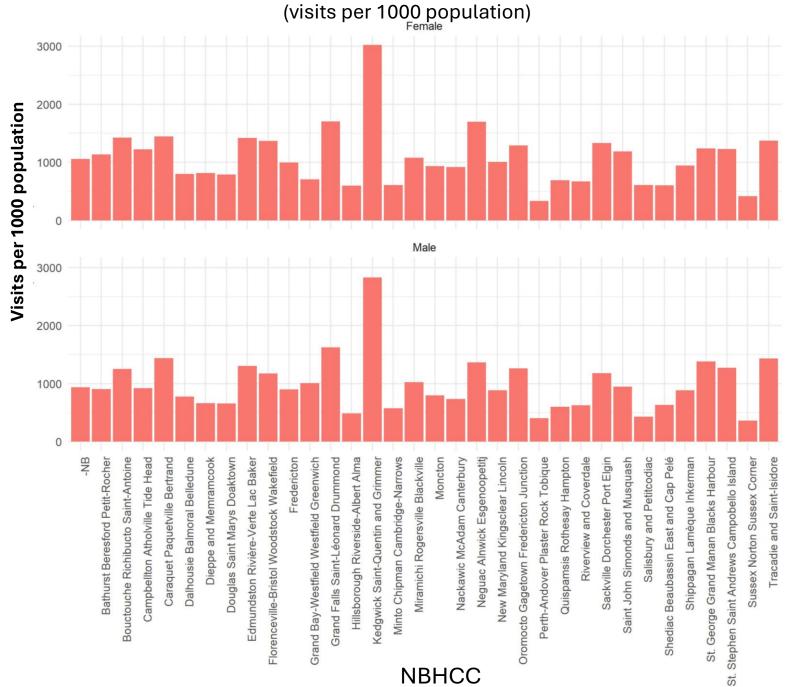
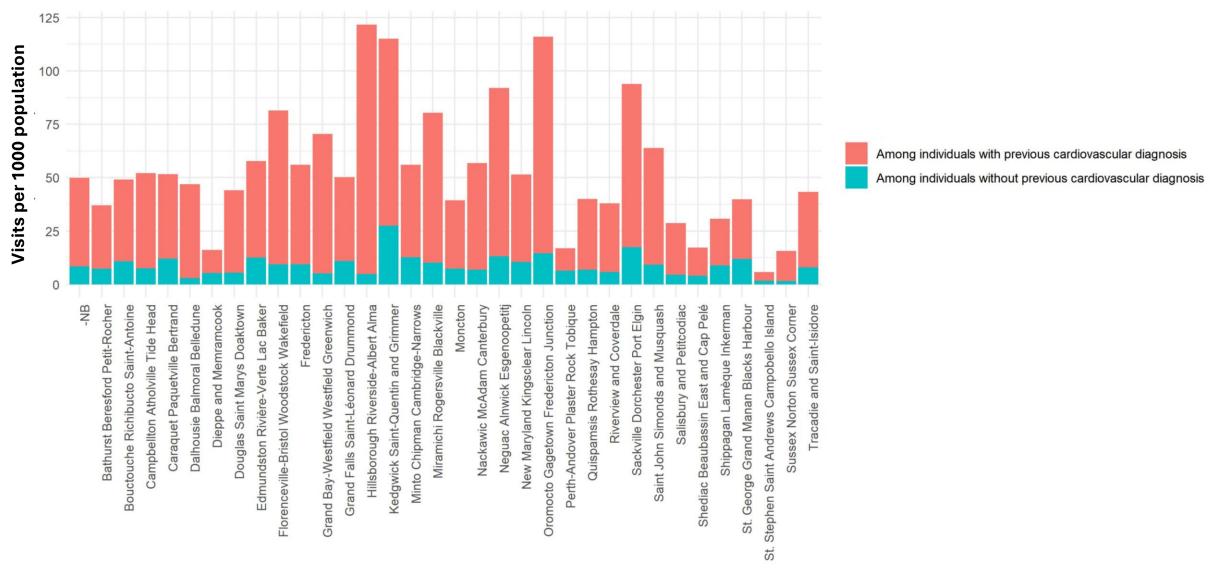


Figure 73. Cardiovascular-related emergency department visit rate among overall population by NBHCC, 2018 (visits per 1000 population)



**NBHCC** 

Figure 74. Cardiovascular-related emergency department visit rate among overall population by NBHCC separated by sex, 2018 (visits per 1000 population)

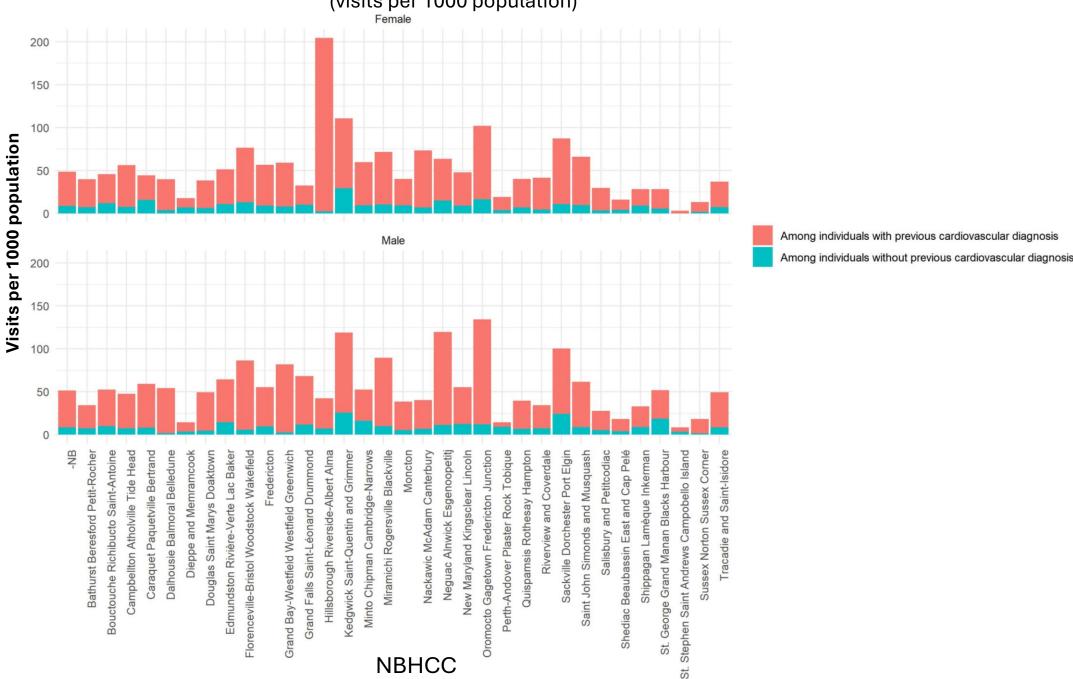


Figure 75. Diabetes-related emergency department visit rate among overall population by NBHCC, 2018 (visits per 1000 population)

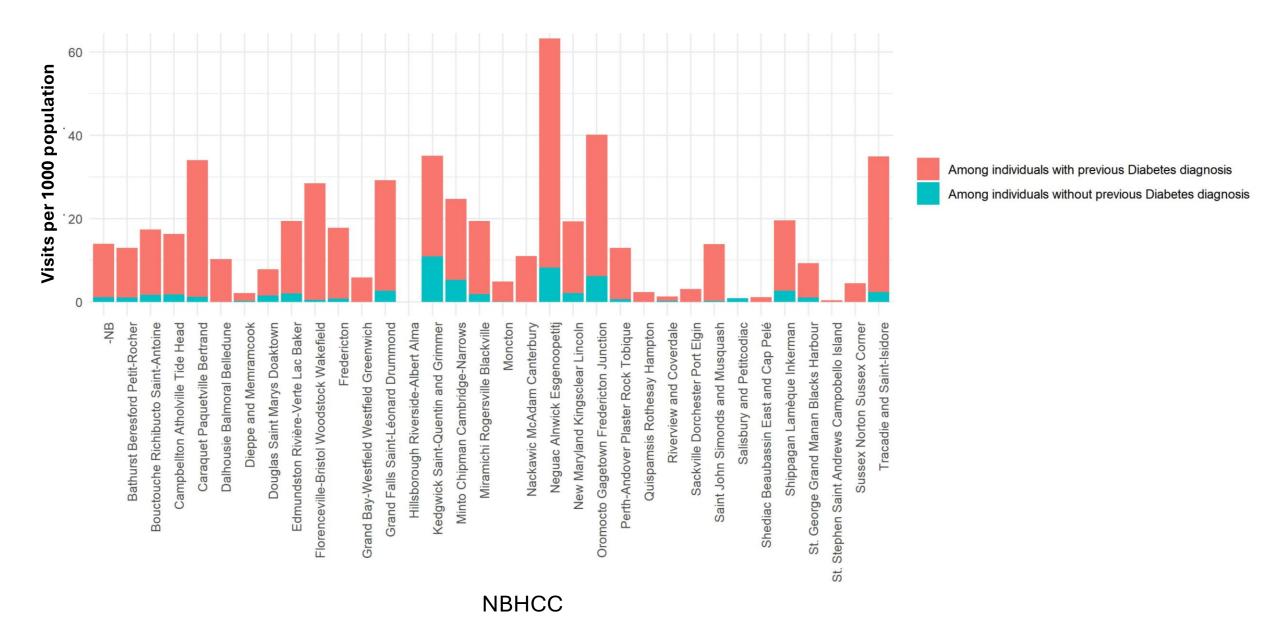


Figure 76. Diabetes-related emergency department visit rate among overall population by NBHCC separated by sex, 2018

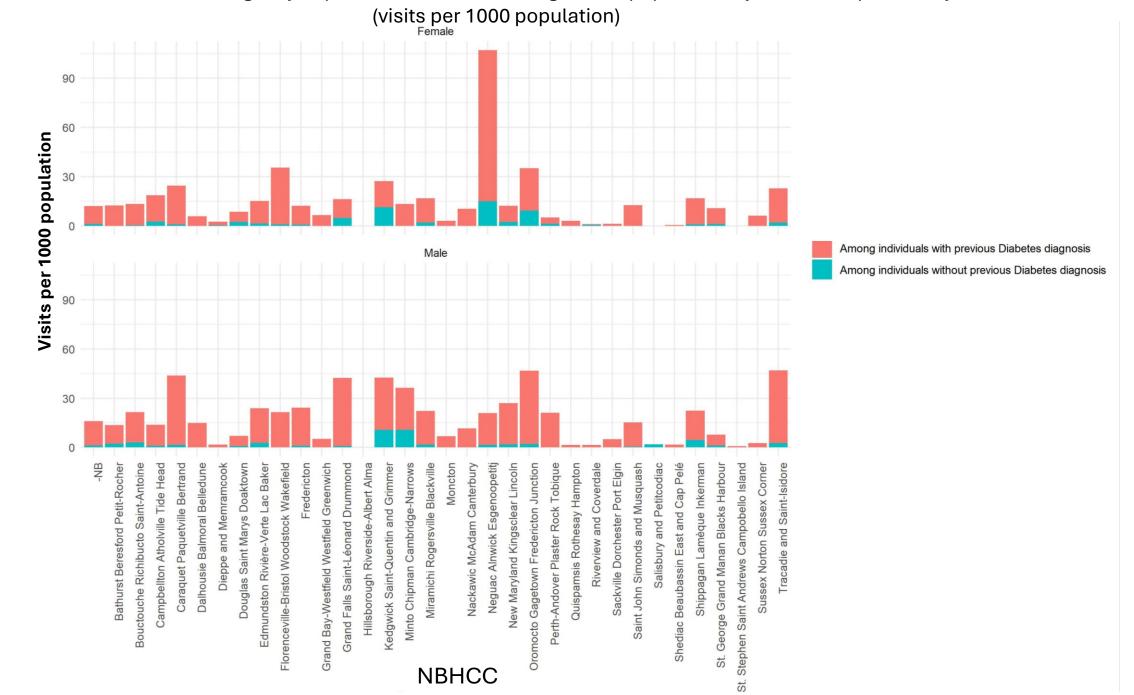


Figure 77. All-cause hospital admission rate among overall population by NBHCC, 2018 (admissions per 1000 population)

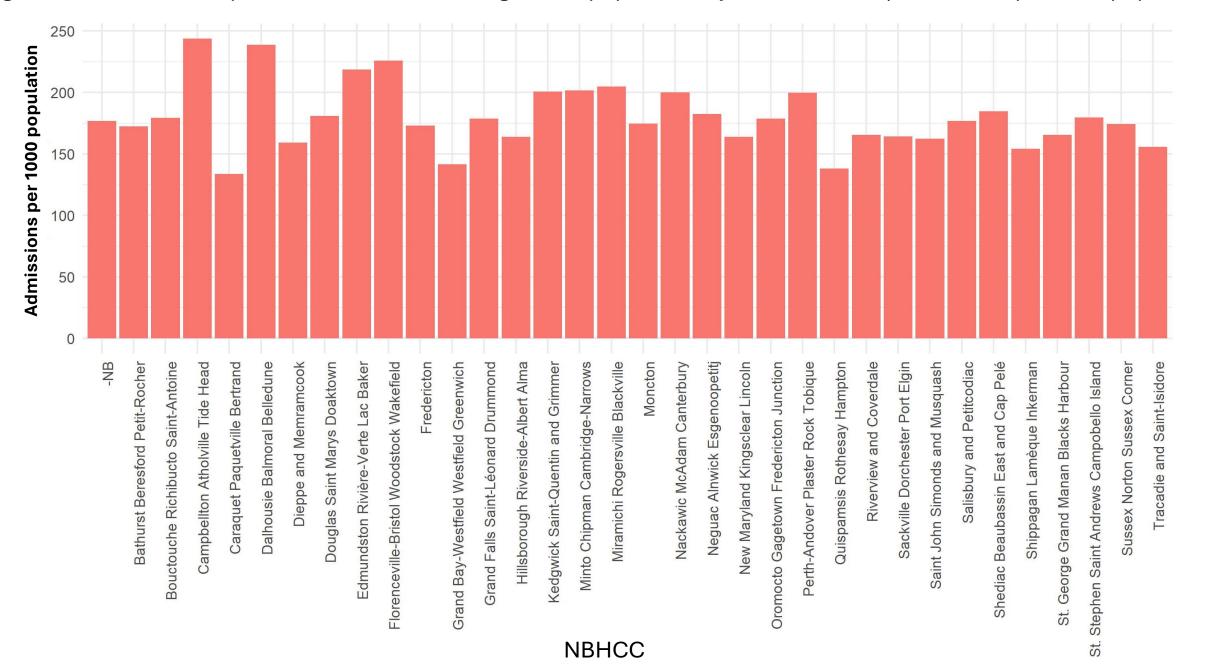


Figure 78. All-cause hospital admission rate among overall population by NBHCC separated by sex, 2018 (admissions per 1000

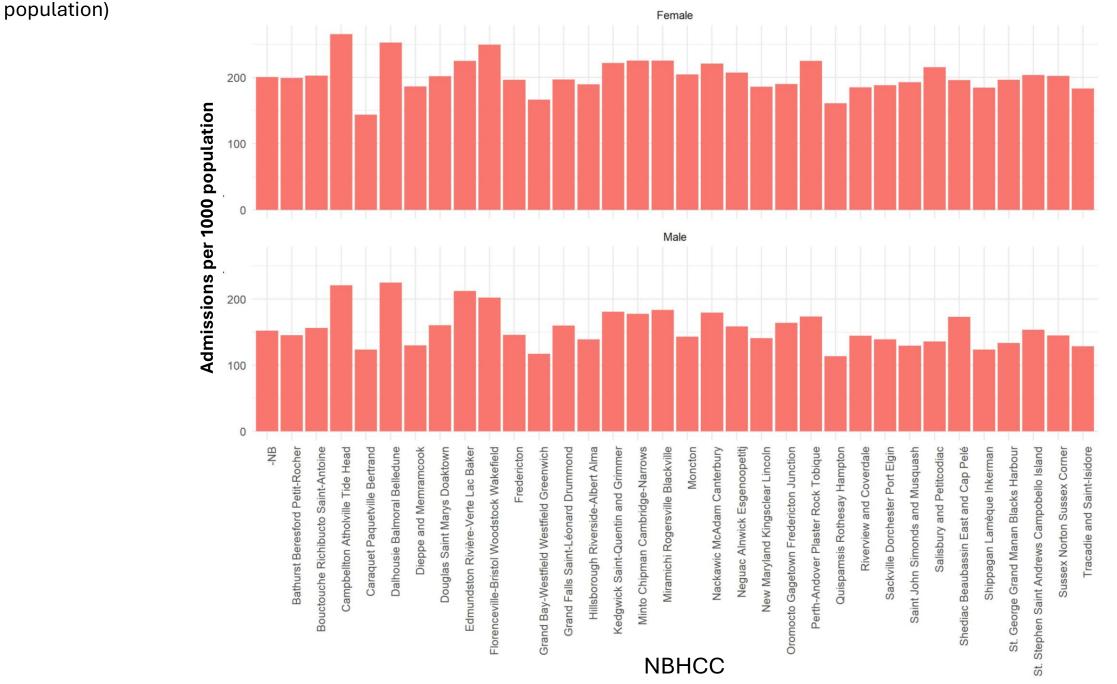


Figure 79. All-cause hospital admission rate among population with any cardiovascular diagnosis by NBHCC, 2018 (admissions per 1000 population)

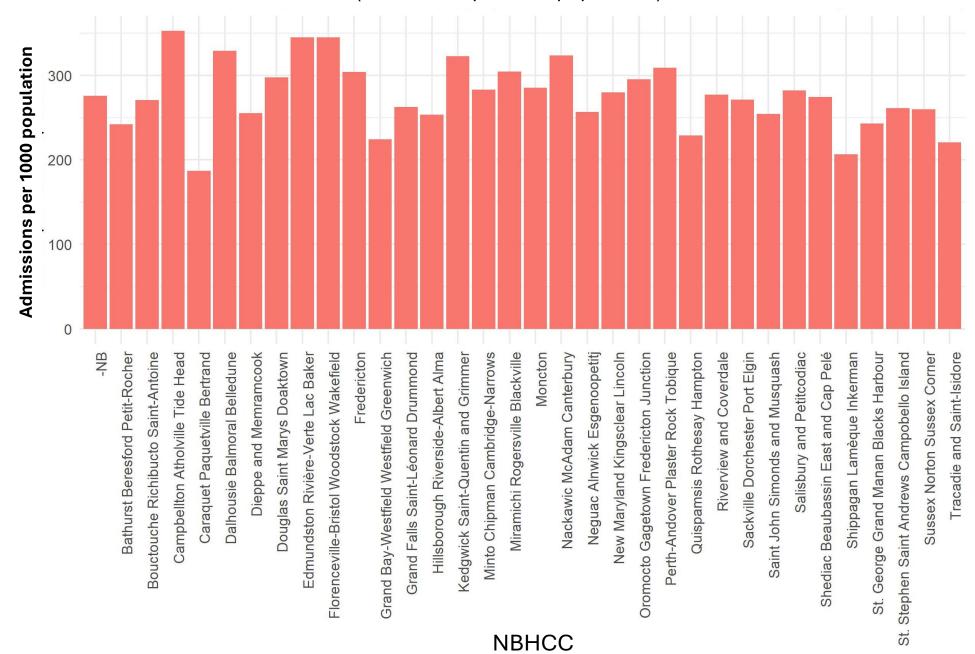


Figure 80. All-cause hospital admission rate among population with any cardiovascular diagnosis by NBHCC separated by sex, 2018 (admissions per 1000 population)

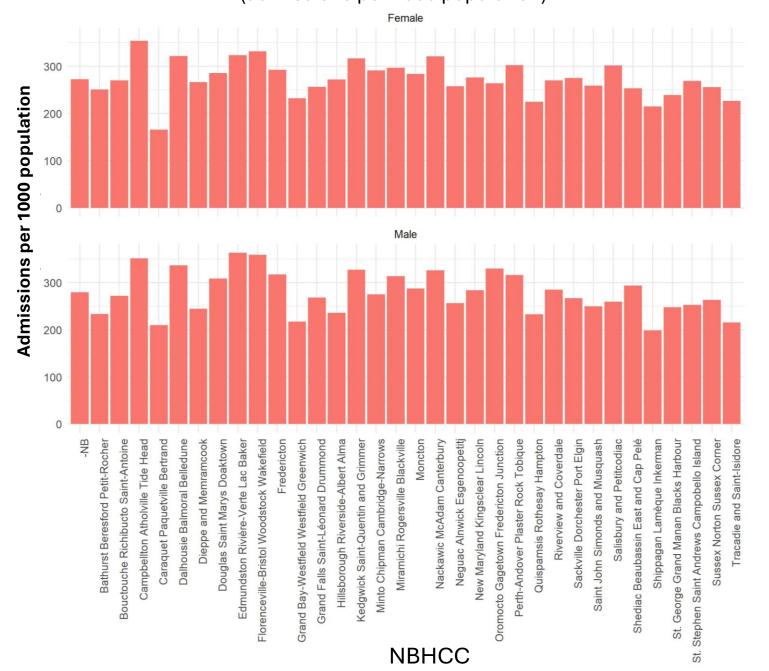


Figure 81. All-cause hospital admission rate among diabetic population by NBHCC, 2018 (admissions per 1000 population)

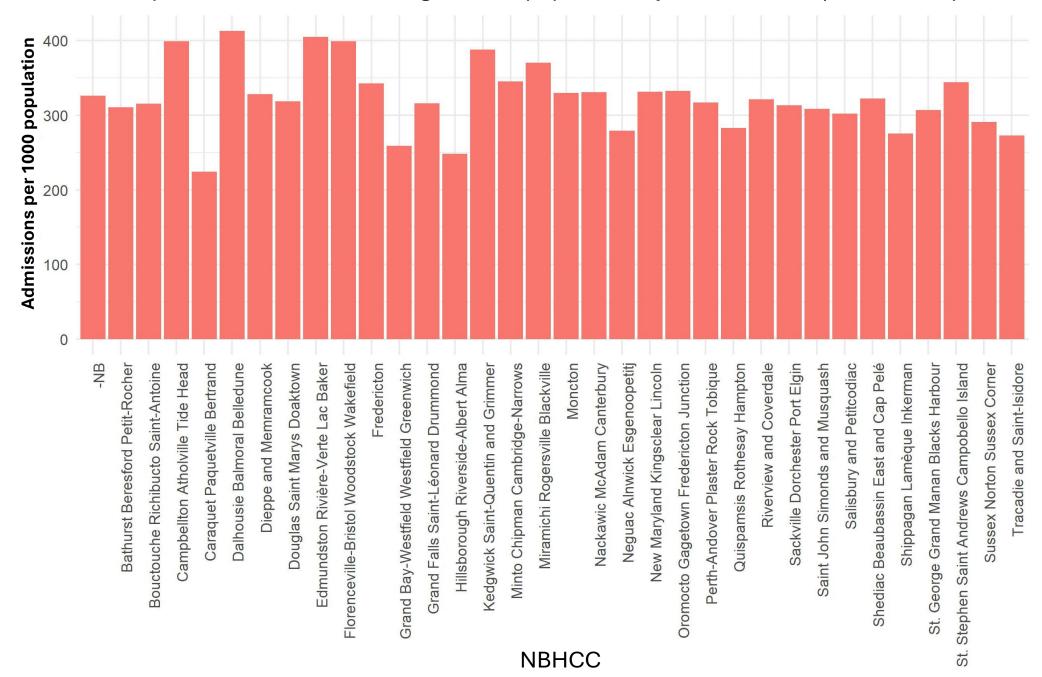


Figure 82. All-cause hospital admission rate among diabetic population by NBHCC separated by sex, 2018 (admissions per 1000 population)

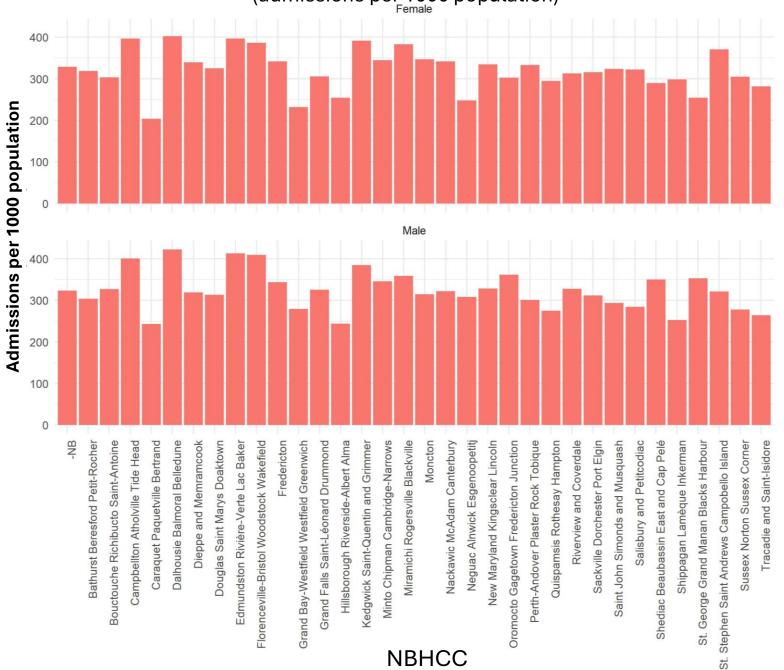


Figure 83. Cardiovascular-related hospital admission rate among overall population by NBHCC, 2018 (admissions per 1000 population)

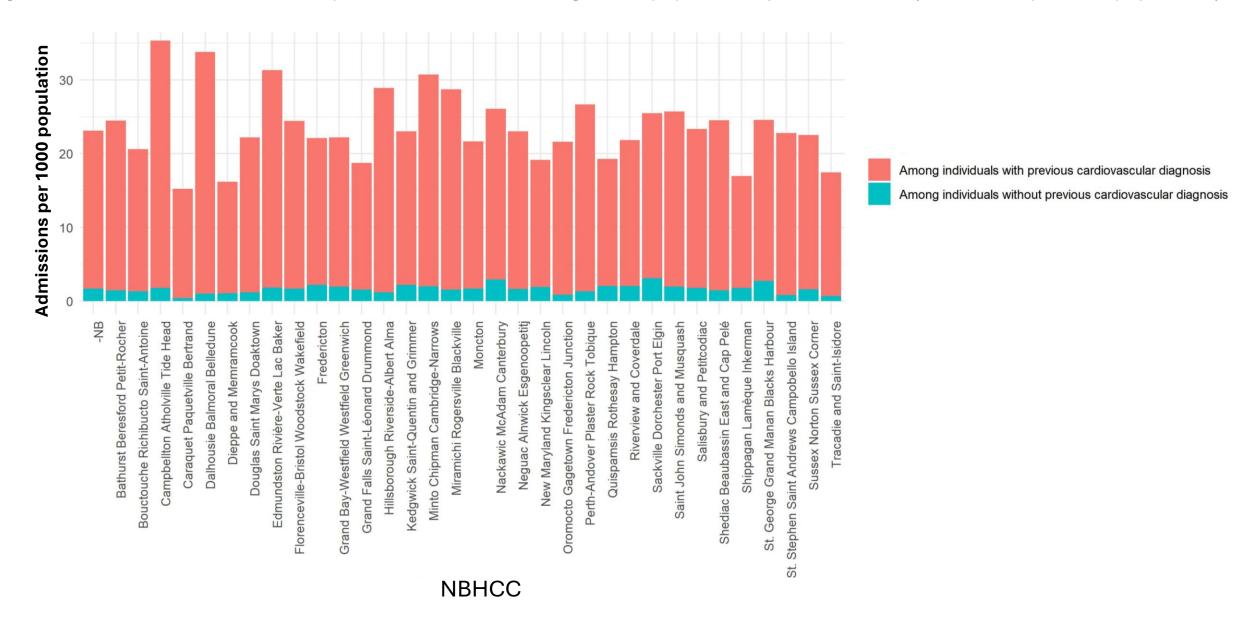


Figure 84. Cardiovascular-related hospital admission rate among overall population by NBHCC separated by sex, 2018 (admissions per 1000 population)

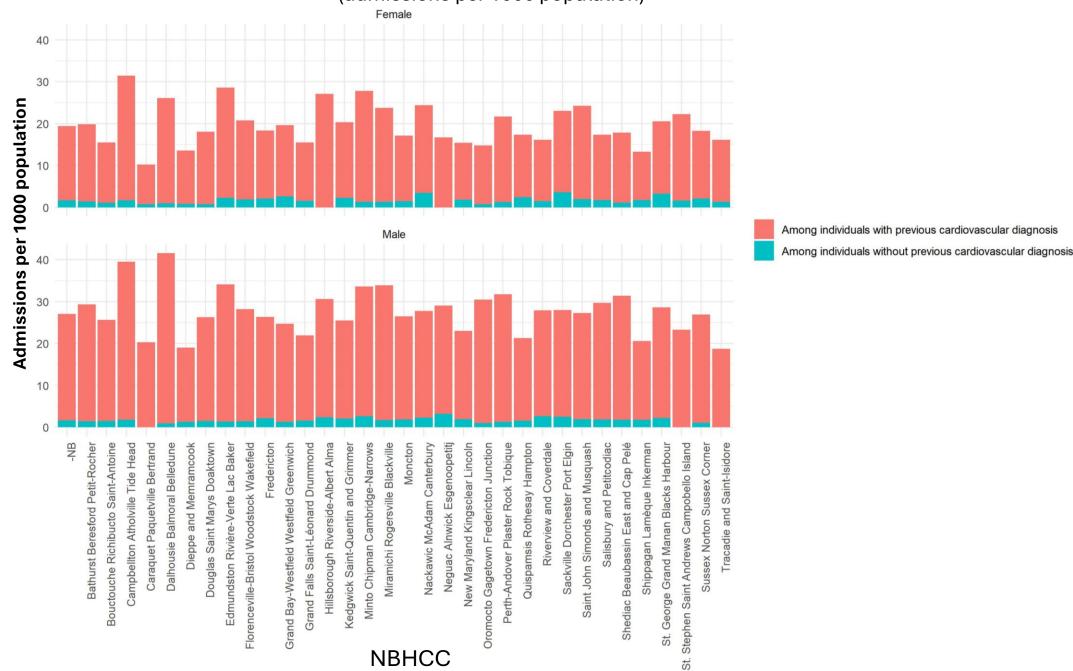


Figure 85. Diabetes-related hospital admission rate among overall population by NBHCC, 2018 (admissions per 1000 population)

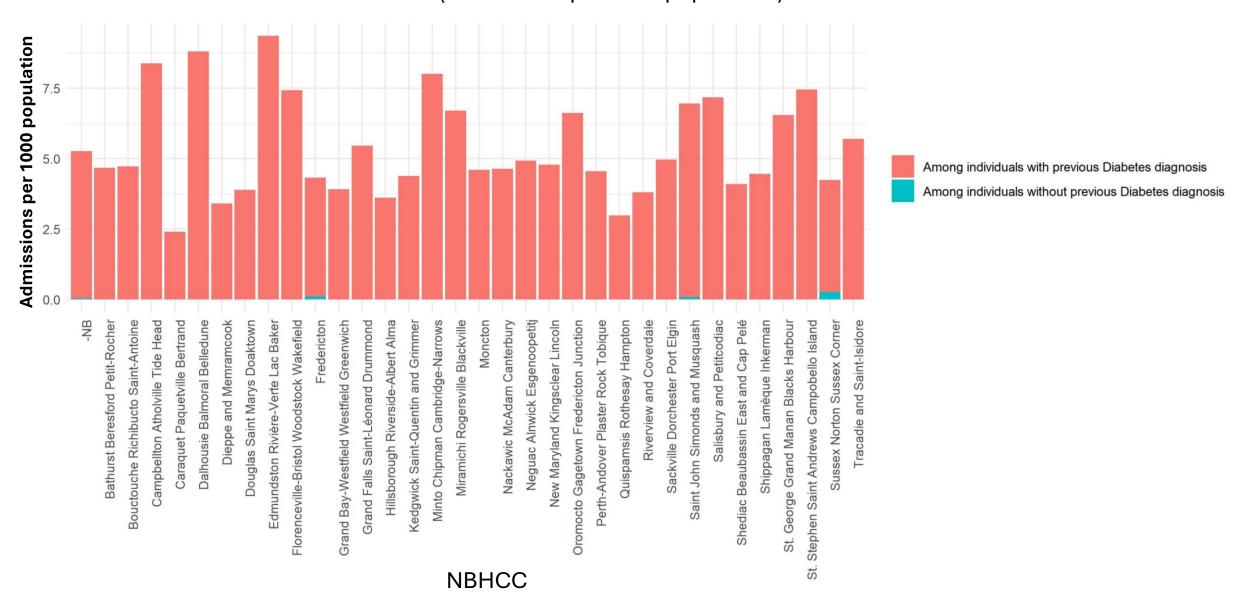


Figure 86. Diabetes-related hospital admission rate among overall population by NBHCC separated by sex, 2018 (admissions per 1000 population)

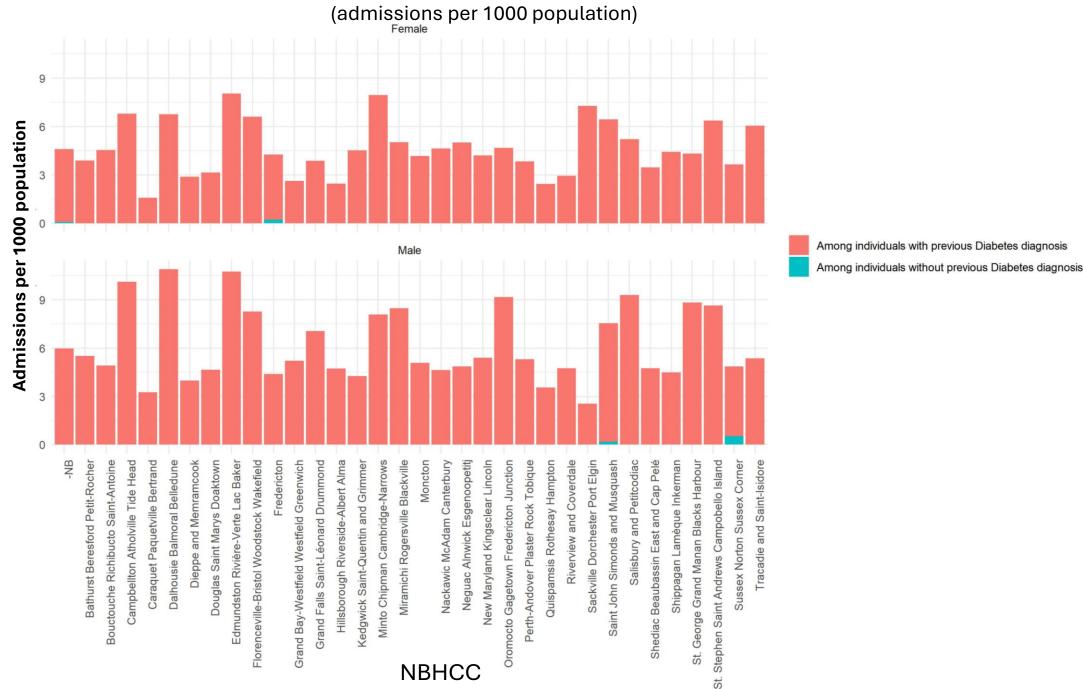


Figure 87. All-cause physician visit rate among overall population by NBHCC, 2018 (visits per 1000 population)

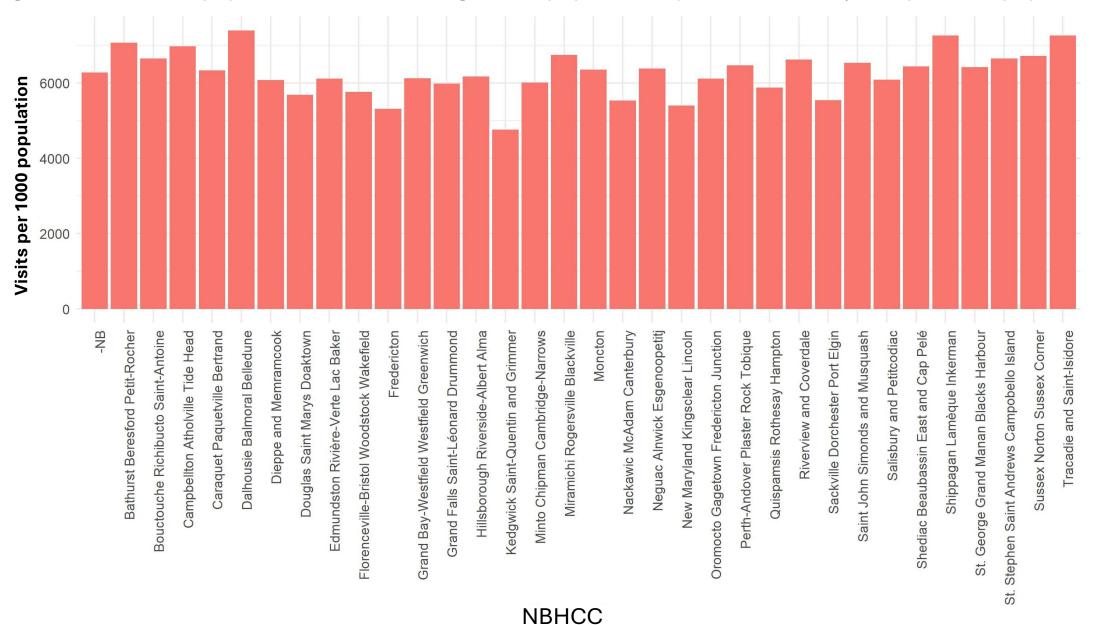


Figure 88. All-cause physician visit rate among overall population by NBHCC separated by sex, 2018 (visits per 1000 population)

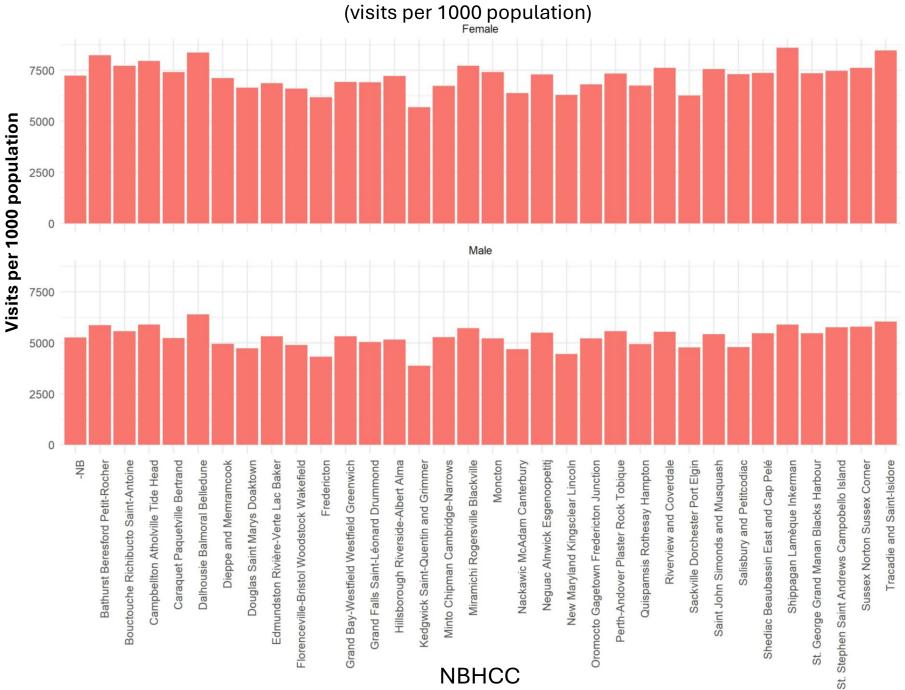


Figure 89. All-cause physician visit rate among population with any cardiovascular diagnosis by NBHCC, 2018

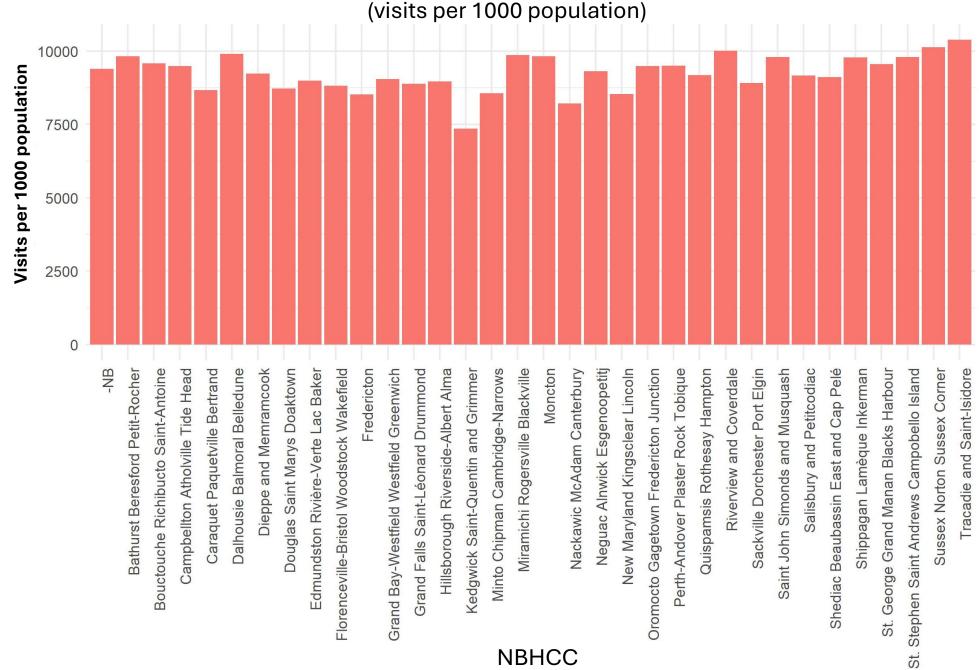


Figure 90. All-cause physician visit rate among population with any cardiovascular diagnosis by NBHCC separated by sex, 2018 (visits per 1000 population)

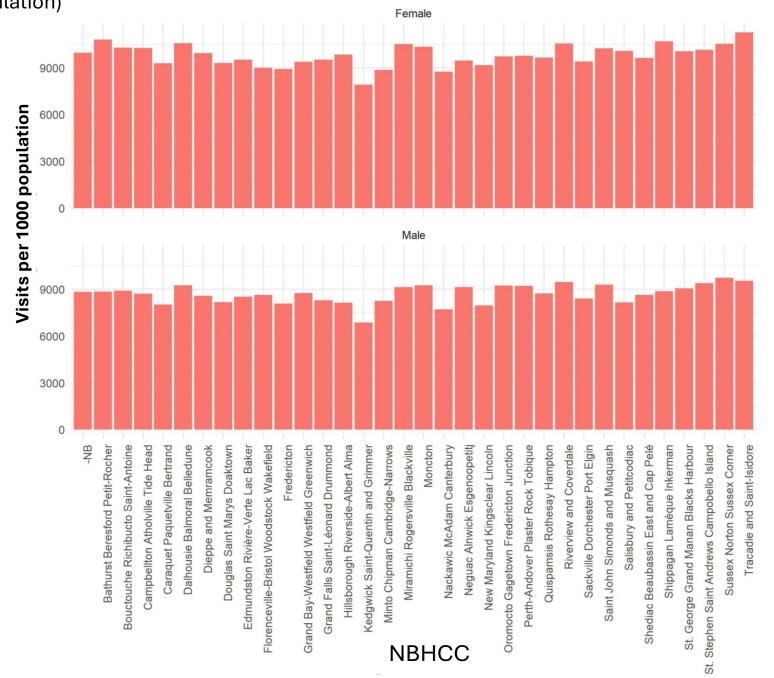


Figure 91. All-cause physician visit rate among diabetic population by NBHCC, 2018 (visits per 1000 population)

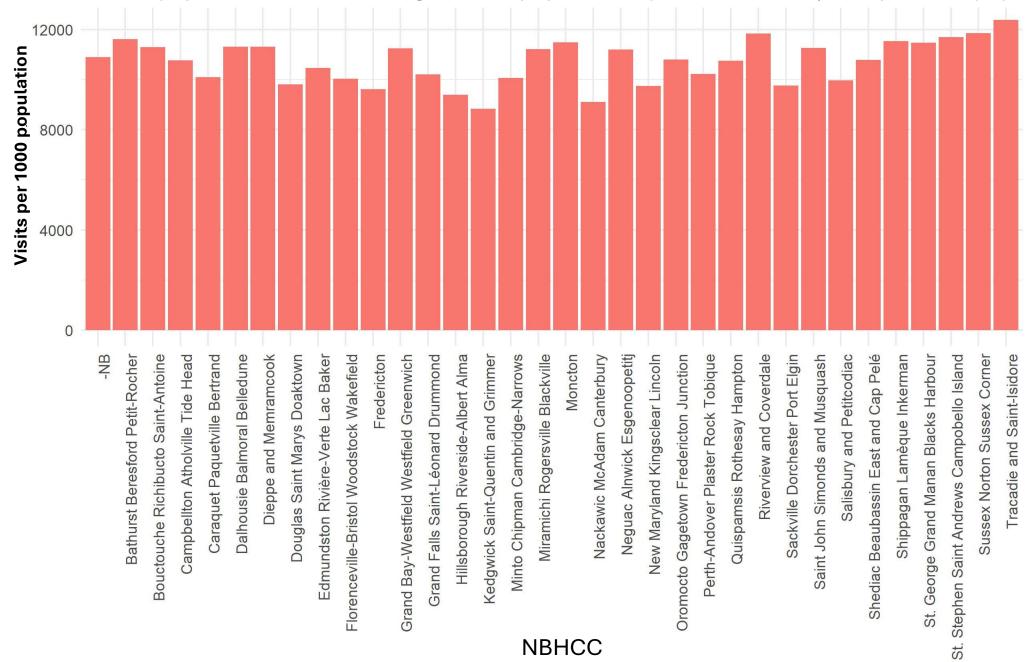


Figure 92. All-cause physician visit rate among diabetic population by NBHCC separated by sex, 2018 (visits per 1000 population)

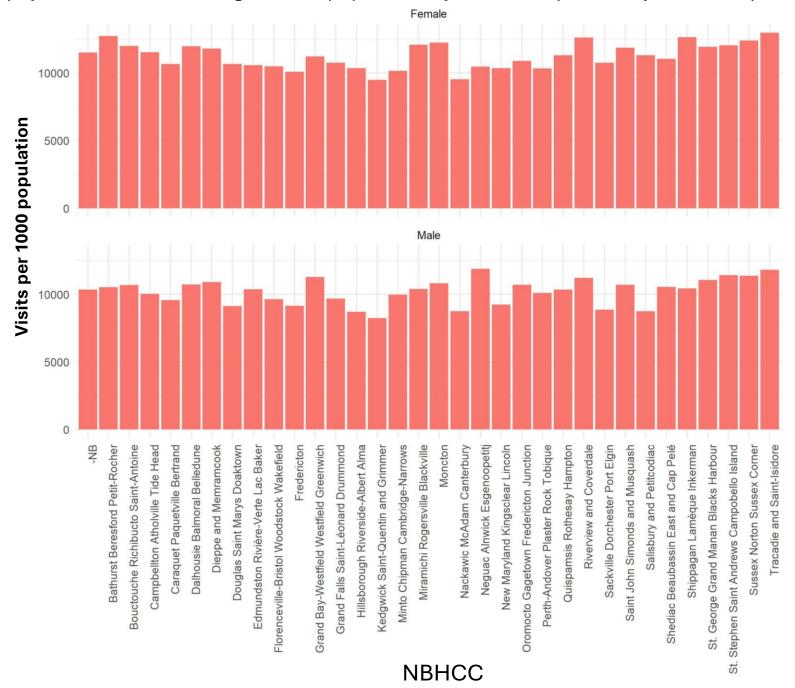


Figure 93. Cardiologist visit rate among overall population by NBHCC, 2018 (visits per 1000 population)

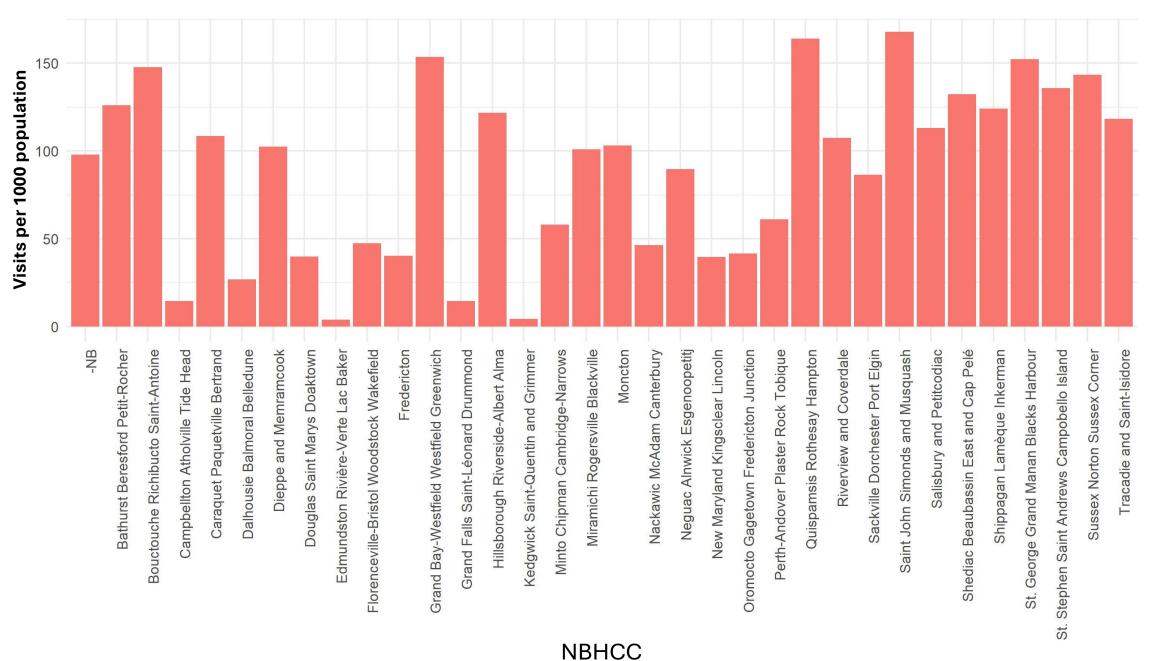


Figure 94. Cardiologist visit rate among overall population by NBHCC separated by sex, 2018 (visits per 1000 population)

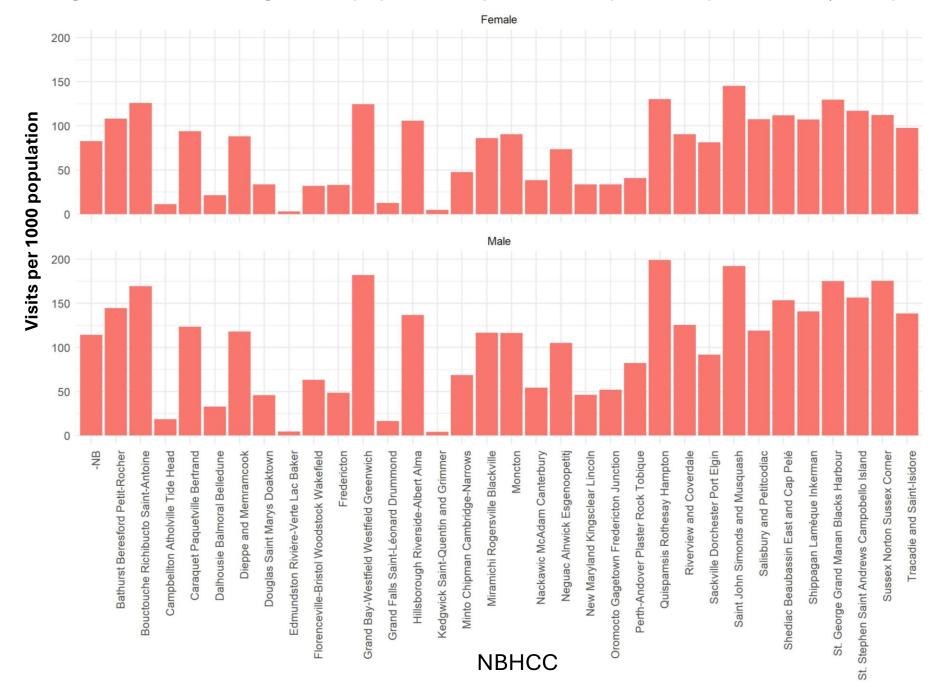


Figure 95. Endocrinologist visit rate among overall population by NBHCC, 2018 (visits per 1000 population) Visits per 1000 population -NB Caraquet Paquetville Bertrand Edmundston Rivière-Verte Lac Baker Hillsborough Riverside-Albert Alma Kedgwick Saint-Quentin and Grimmer Miramichi Rogersville Blackville Sackville Dorchester Port Elgin St. George Grand Manan Blacks Harbour Campbellton Atholville Tide Head Dalhousie Balmoral Belledune Dieppe and Memramcook Douglas Saint Marys Doaktown Florenceville-Bristol Woodstock Wakefield Fredericton Grand Bay-Westfield Westfield Greenwich Grand Falls Saint-Léonard Drummond Minto Chipman Cambridge-Narrows Moncton Neguac Alnwick Esgenoopetitj New Maryland Kingsclear Lincoln Oromocto Gagetown Fredericton Junction Perth-Andover Plaster Rock Tobique Quispamsis Rothesay Hampton Riverview and Coverdale Saint John Simonds and Musquash Salisbury and Petitcodiac Shediac Beaubassin East and Cap Pelé Shippagan Lamèque Inkerman Stephen Saint Andrews Campobello Island Sussex Norton Sussex Corner Tracadie and Saint-Isidore Bathurst Beresford Petit-Rocher Bouctouche Richibucto Saint-Antoine Nackawic McAdam Canterbury

**NBHCC** 

Figure 96. Endocrinologist visit rate among overall population by NBHCC separated by sex, 2018 (visits per 1000 population)

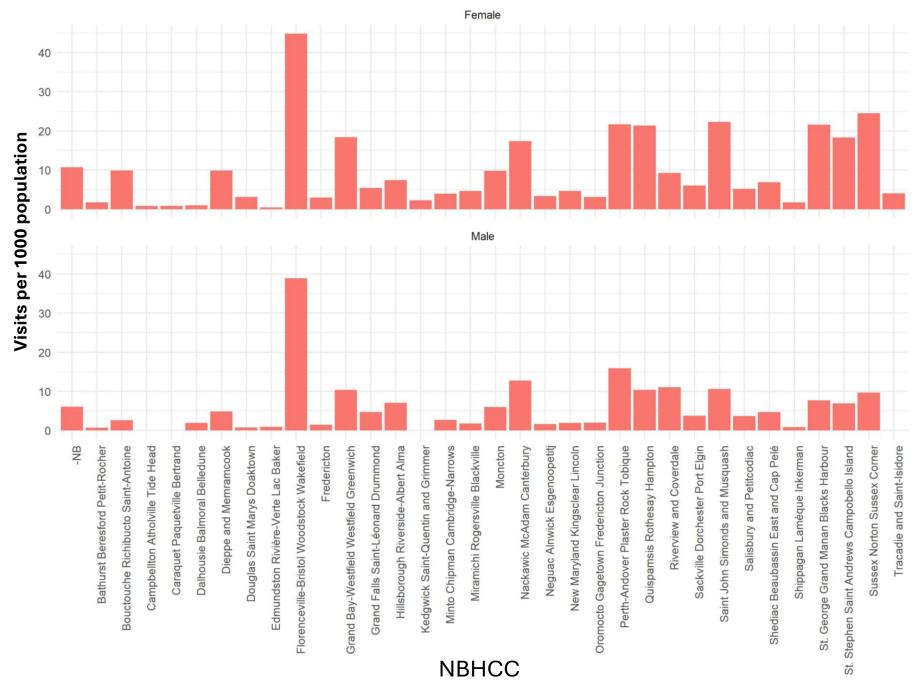


Figure 97. Rate of physician visits for chronic disease management of diabetes among diabetic population by NBHCC, 2018 (visits per 1000 population)

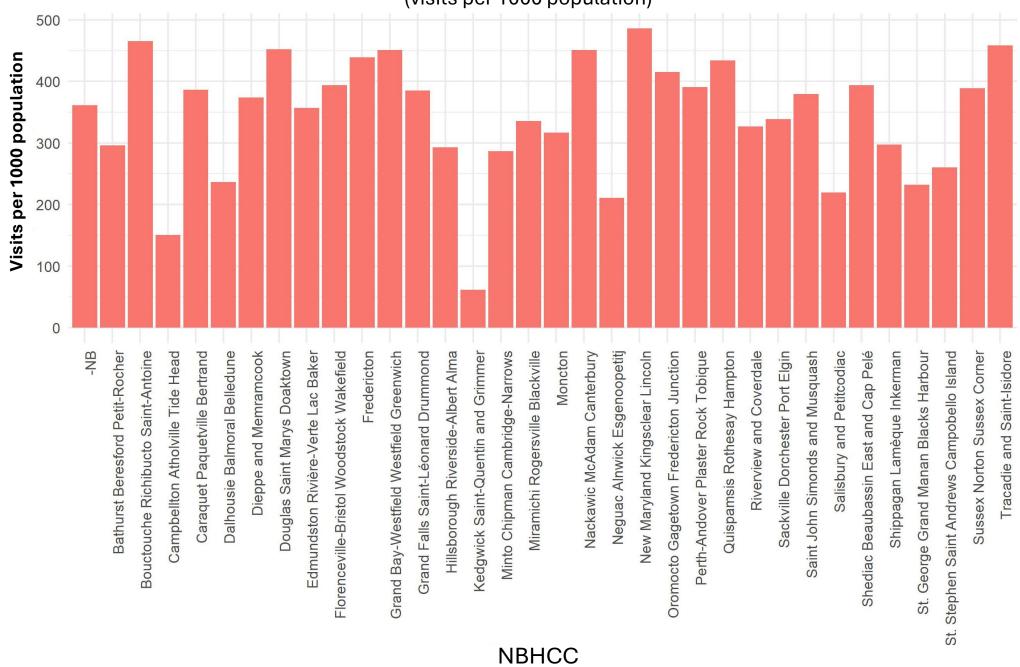


Figure 98. Rate of physician visits for chronic disease management of diabetes among diabetic population by NBHCC separated by sex, 2018 (visits per 1000 population)

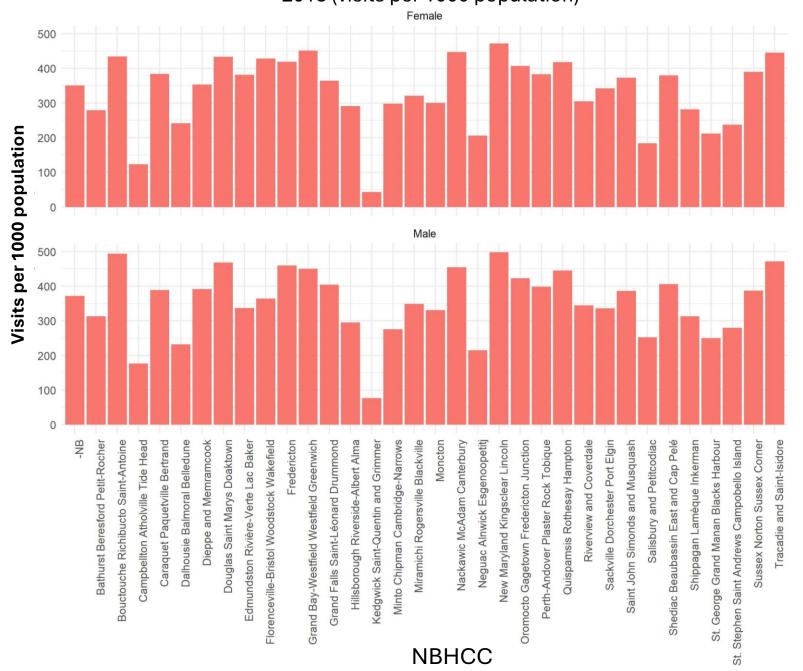


Figure 99. Rate of HbA1c testing among overall population by NBHCC, 2018 (tests per 1000 population) -NB Campbellton Atholville Tide Head Kedgwick Saint-Quentin and Grimmer Minto Chipman Cambridge-Narrows Miramichi Rogersville Blackville Neguac Alnwick Esgenoopetitj Perth-Andover Plaster Rock Tobique **Quispamsis Rothesay Hampton** St. George Grand Manan Blacks Harbour Sussex Norton Sussex Corner Bouctouche Richibucto Saint-Antoine Caraquet Paquetville Bertrand Dalhousie Balmoral Belledune Dieppe and Memramcook Douglas Saint Marys Doaktown Edmundston Rivière-Verte Lac Baker Florenceville-Bristol Woodstock Wakefield Fredericton Grand Bay-Westfield Westfield Greenwich Grand Falls Saint-Léonard Drummond Hillsborough Riverside-Albert Alma Nackawic McAdam Canterbury New Maryland Kingsclear Lincoln Oromocto Gagetown Fredericton Junction Riverview and Coverdale Sackville Dorchester Port Elgin Saint John Simonds and Musquash and Petitcodiac Shediac Beaubassin East and Cap Pelé Shippagan Lamèque Inkerman St. Stephen Saint Andrews Campobello Island Tracadie and Saint-Isidore Bathurst Beresford Petit-Rocher Salisbury

**NBHCC** 

**Tests per 1000 population** 

0

Figure 100. Rate of HbA1c testing among overall population by NBHCC separated by sex, 2018 (tests per 1000 population)

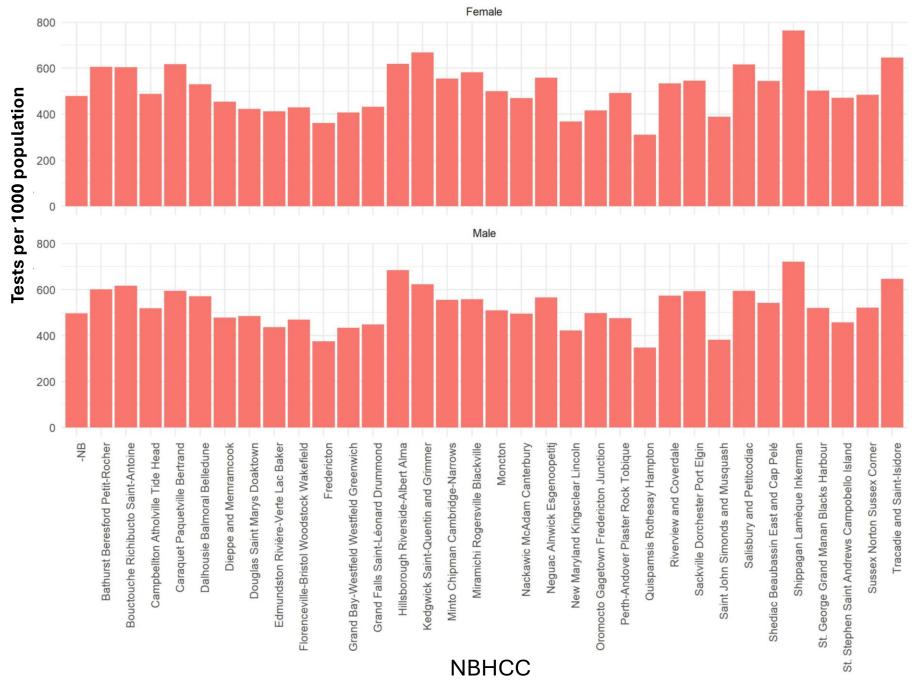


Figure 101. Proportion of HbA1c test results indicating poor glycemic control among overall population by NBHCC, 2018

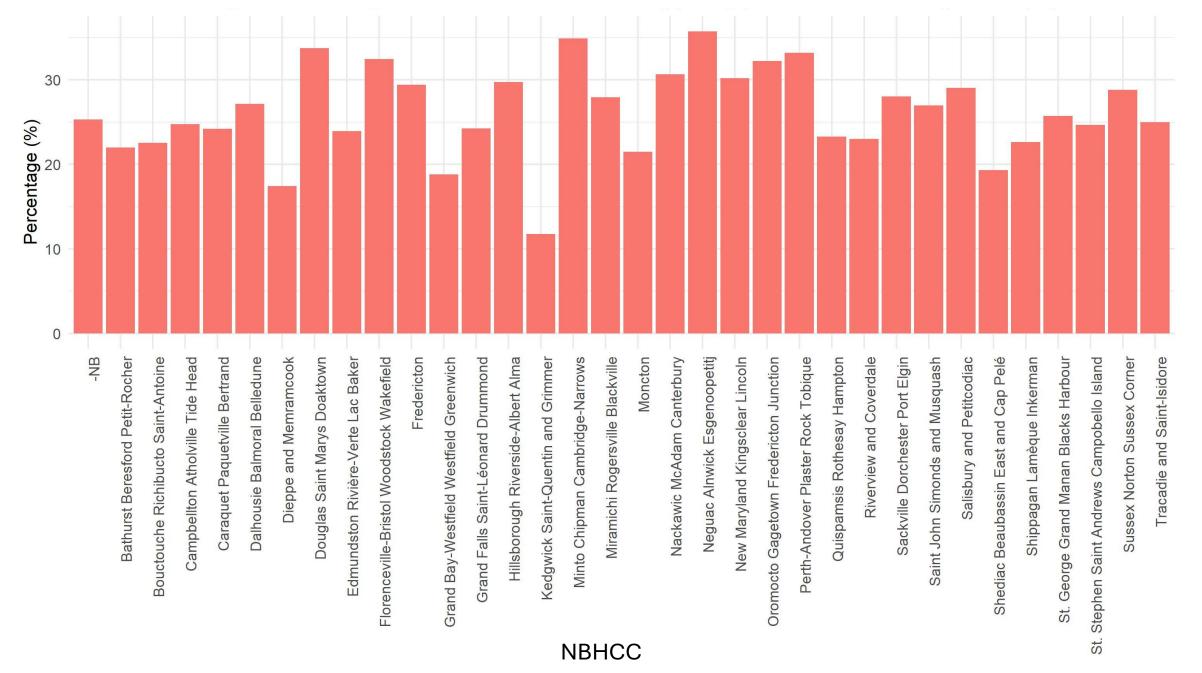


Figure 102. Proportion of HbA1c test results indicating poor glycemic control among overall population by NBHCC separated by sex, 2018

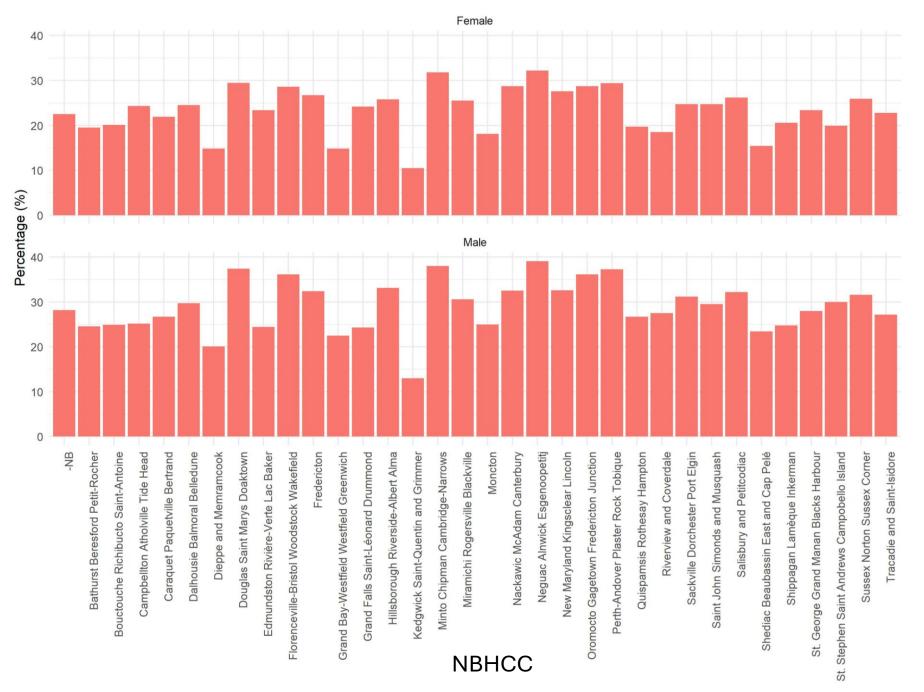


Figure 103. Rate of HbA1c testing among diabetic population by NBHCC, 2018 (tests per 1000 population)

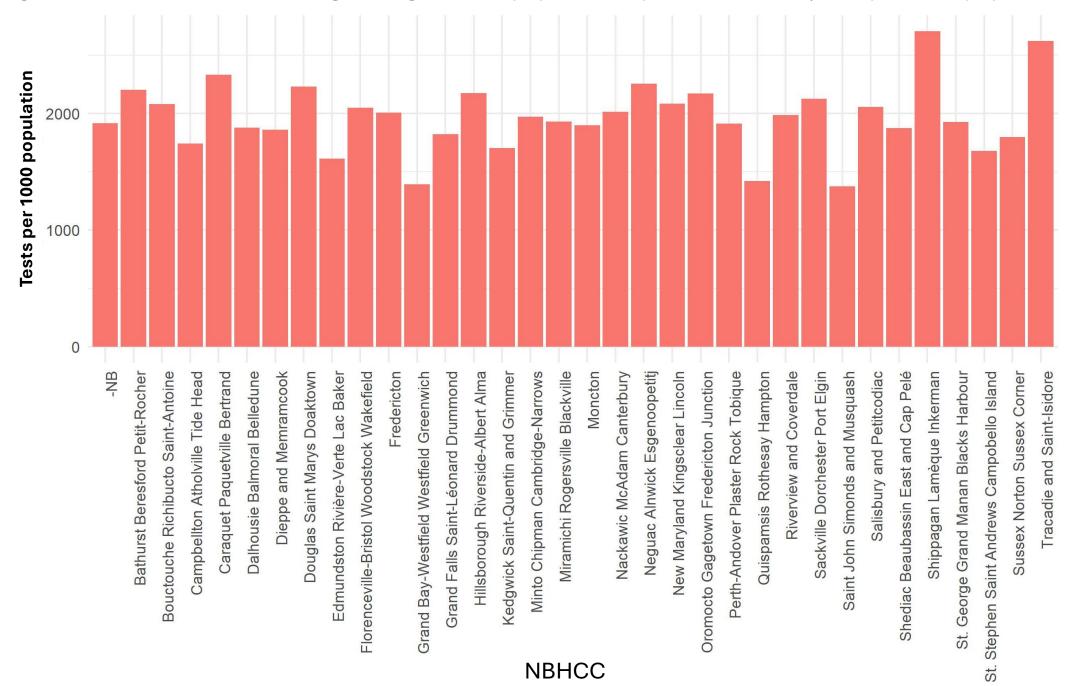


Figure 104. Rate of HbA1c testing among diabetic population by NBHCC separated by sex, 2018 (tests per 1000 population)

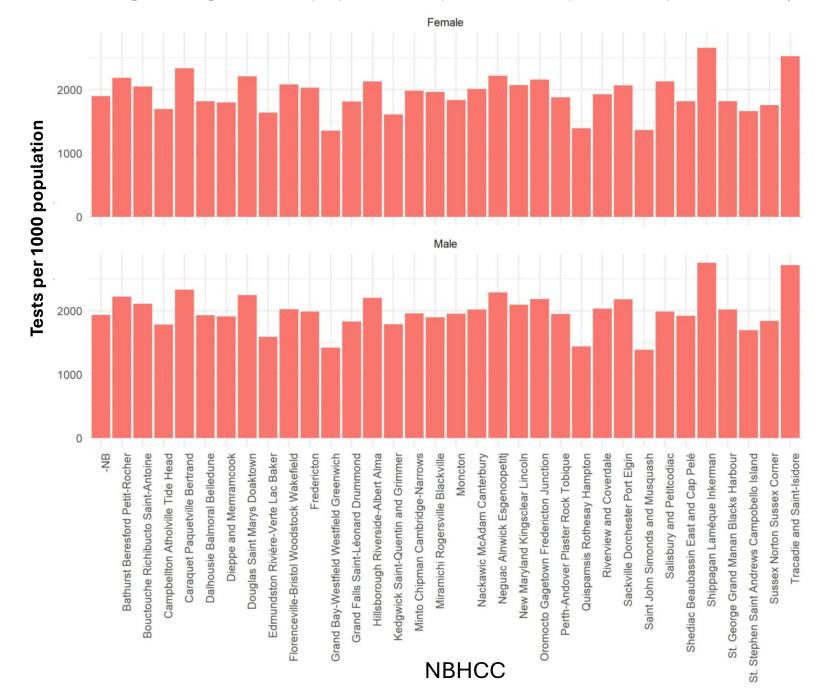


Figure 105. Proportion of HbA1c test results indicating poor glycemic control among diabetic population by NBHCC, 2018

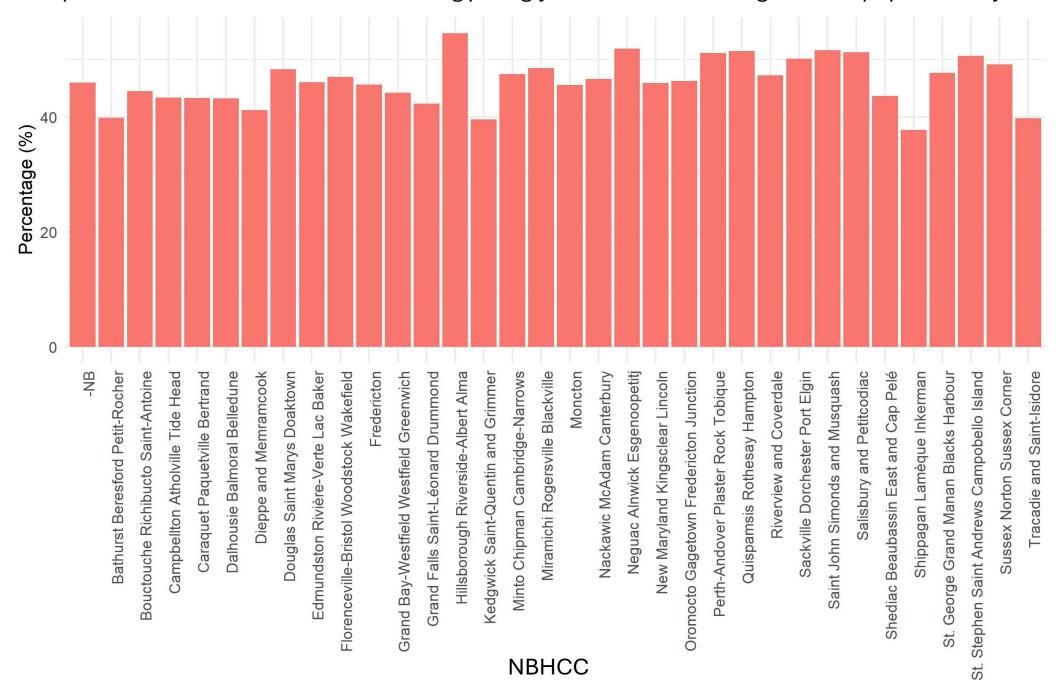


Figure 106. Proportion of HbA1c test results indicating poor glycemic control among diabetic population by NBHCC separated by sex, 2018

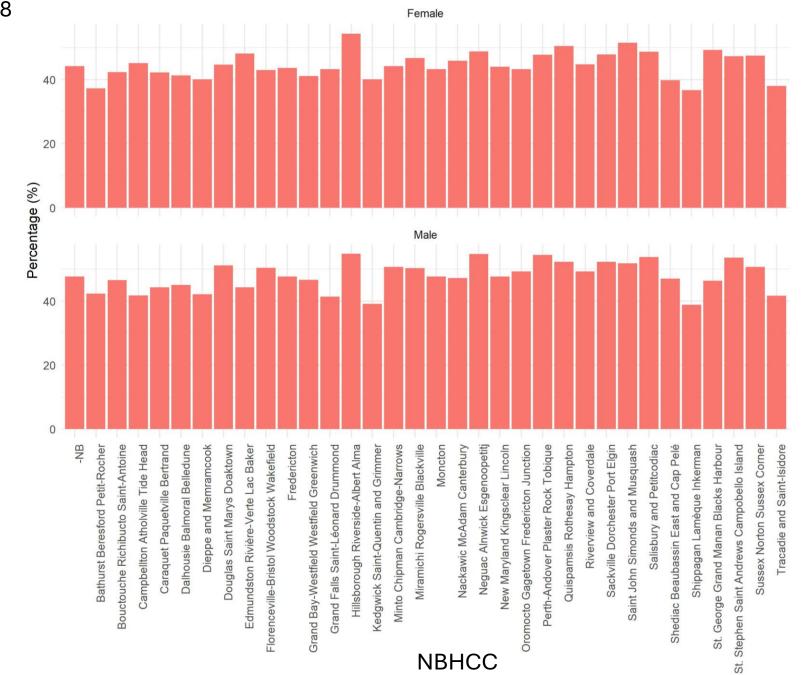
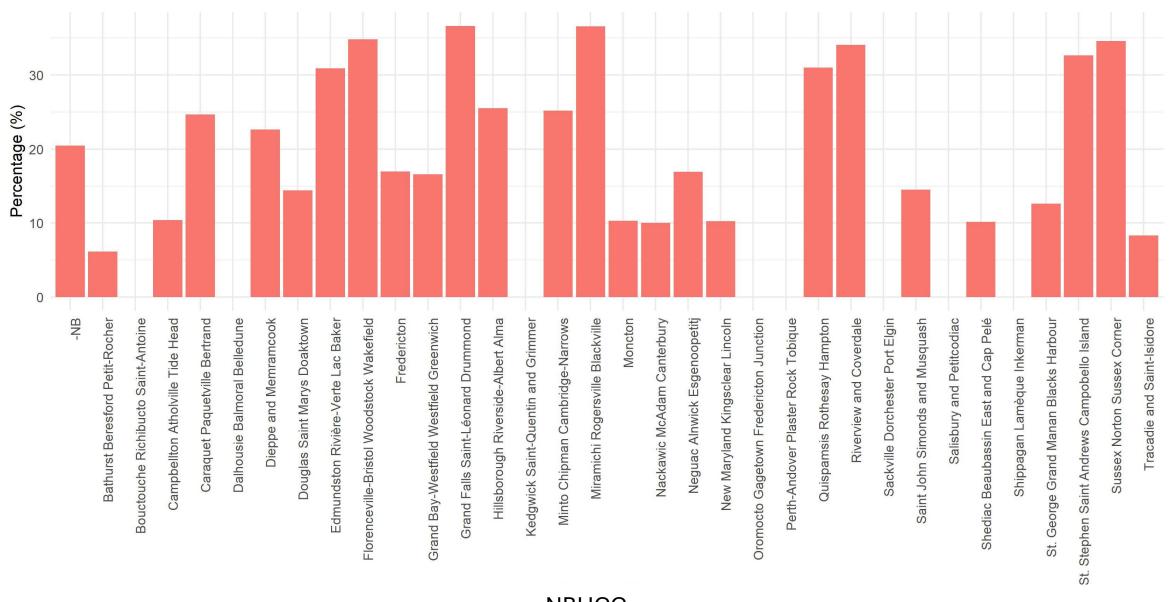


Figure 107. Proportion of potentially eligible population enrolled in NB Insulin Pump Program by NBHCC, 2018



**NBHCC** 

Figure 108. Proportion of potentially eligible population enrolled in NB Insulin Pump Program by NBHCC separated by sex, 2018

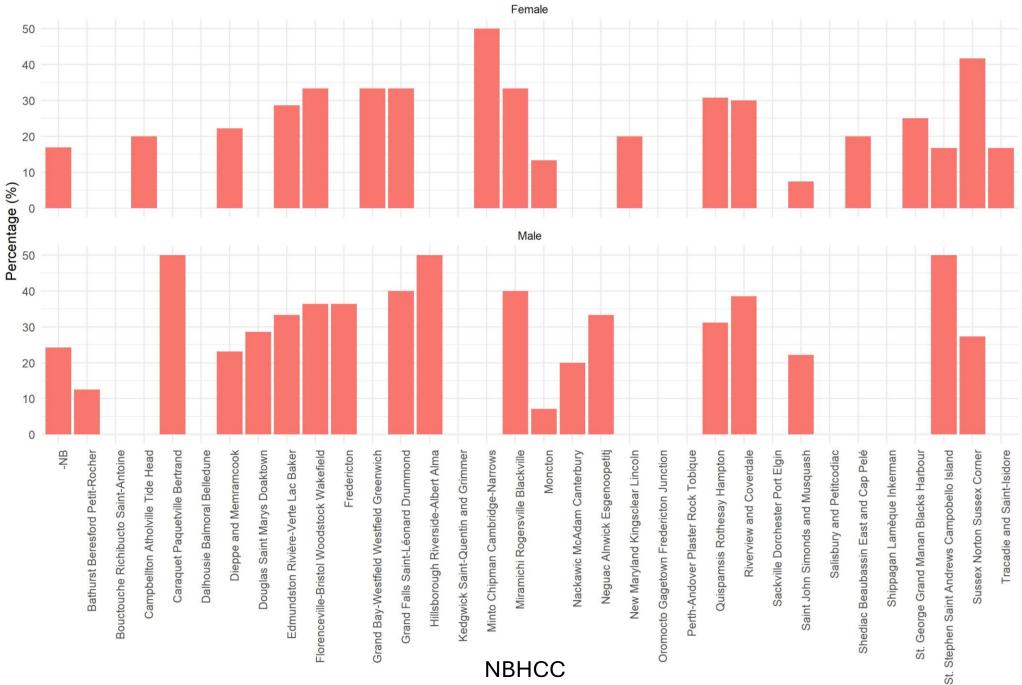


Figure 109. Rate of Tele-Care 811 calls about self among overall population by NBHCC, 2018 (calls per 1000 population)

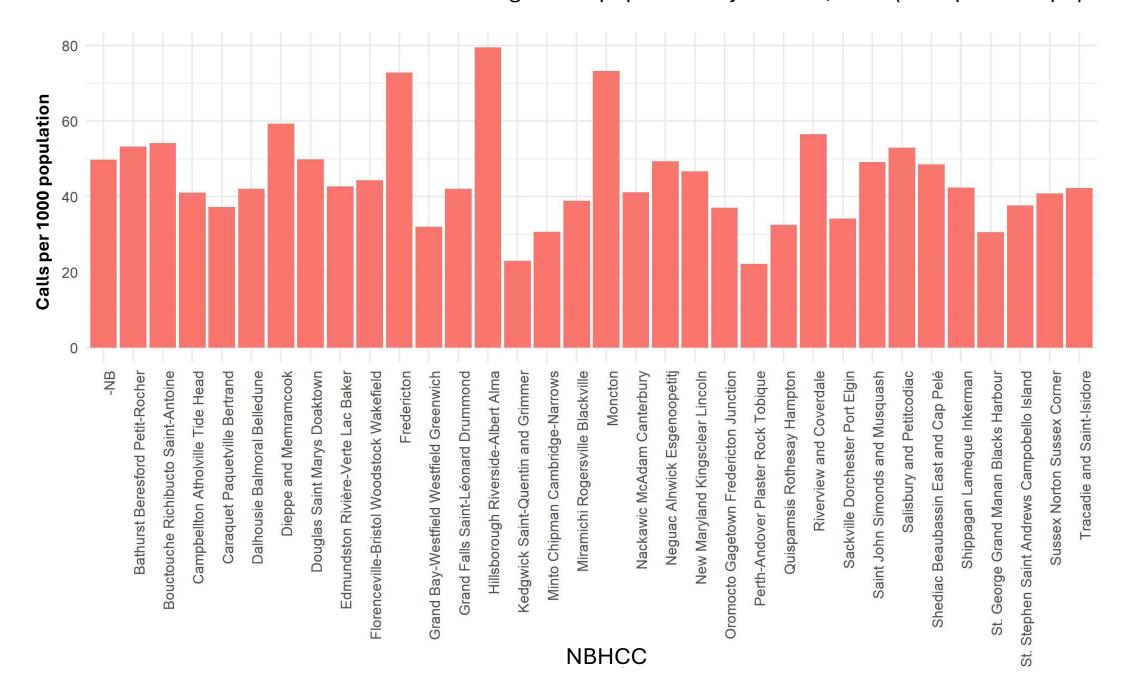


Figure 110. Rate of Tele-Care 811 calls about self among overall population by NBHCC separated by sex, 2018 (calls per 1000 population)

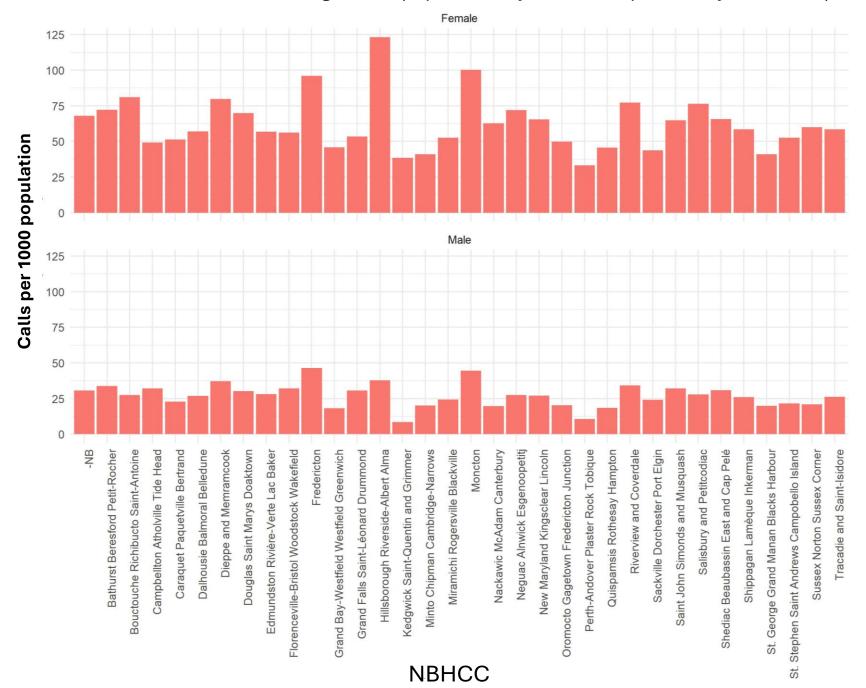


Figure 111. Rate of Tele-Care 811 calls about self among population with any cardiovascular diagnosis by NBHCC, 2018 (calls per 1000 population)

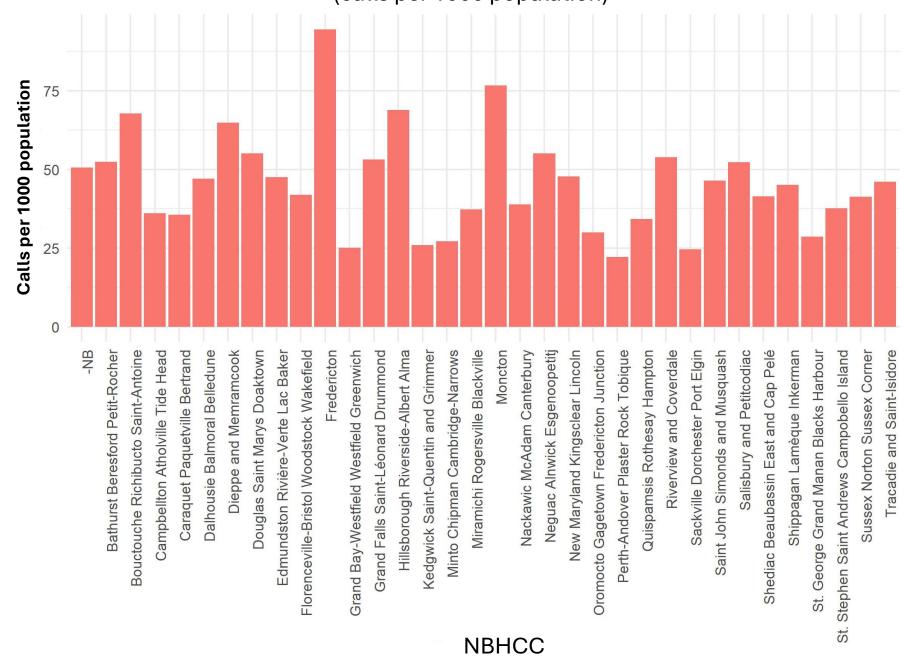


Figure 112. Rate of Tele-Care 811 calls about self among population with any cardiovascular diagnosis by NBHCC separated by sex, 2018 (calls per 1000 population)

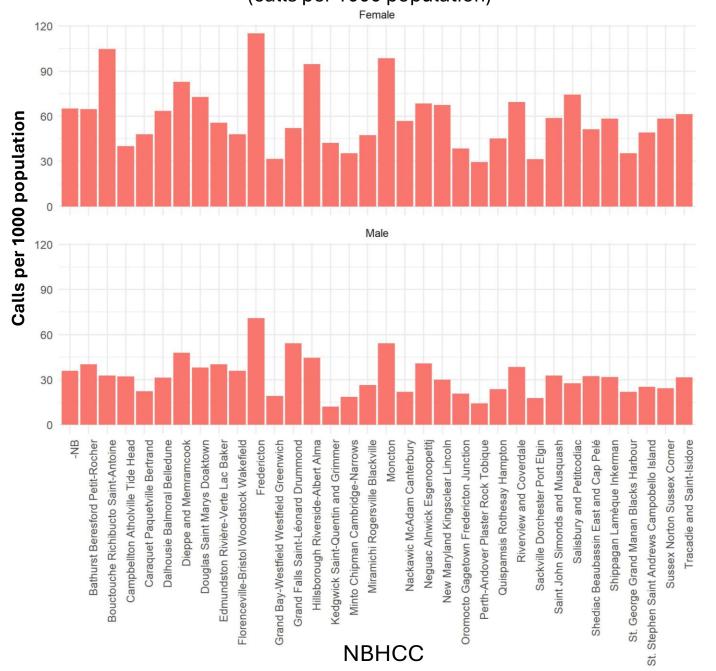


Figure 113. Rate of Tele-Care 811 calls about self among diabetic population by NBHCC, 2018 (calls per 1000 population)

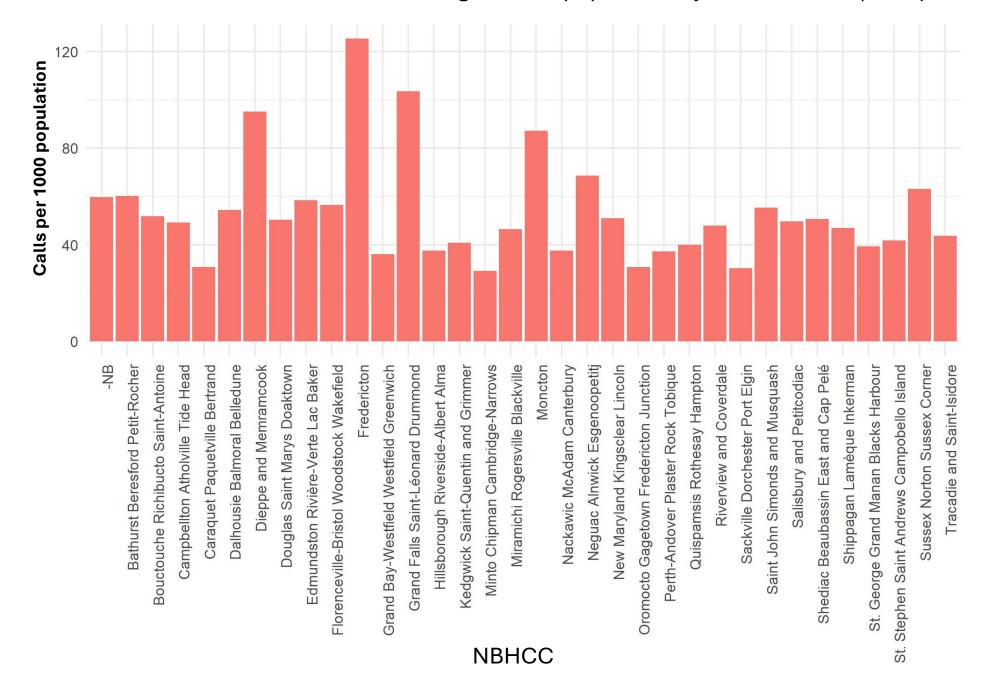


Figure 114. Rate of Tele-Care 811 calls about self among diabetic population by NBHCC separated by sex, 2018 (calls per 1000 population)

