

HOUSE RESOLUTION NO. 51

Reps. O'Neal, Wilson, Byrnes, Rheingans, Grant, Glanville, Young, Hope, Brabec, Rogers, Hood, Aiyash, Alexander, BeGole, Bezotte, Bierlein, Breen, Fitzgerald, Haadsma, Liberati, Morse, Schuette, Shannon and Snyder offered the following resolution:

1 A resolution to declare March 2, 2023, as Cardiovascular
2 Disease Awareness Day in the state of Michigan.

3 Whereas, Cardiovascular disease is the leading cause of death
4 in the United States and includes numerous diseases and disorders
5 such as Atherosclerotic Cardiovascular Disease (ASCVD) and
6 Hypertrophic Cardiomyopathy (HCM); and

7 Whereas, In the United States, approximately 21 million
8 patients have been diagnosed with ASCVD and an estimated 700,000 to
9 1,650,000 people have HCM, yet 85% of them may remain undiagnosed;

1 and

2 Whereas, The Mayo Clinic states that ASCVD is linked to the
3 build-up of cholesterol in the arteries and the risk of associated
4 events can be modified by lowering low-density lipoprotein
5 cholesterol (LDL-C); and

6 Whereas, HCM is a chronic cardiovascular disease involving
7 thickening of the heart muscle and can potentially lead to
8 debilitating symptoms and serious complications including heart
9 failure, atrial fibrillation, stroke, and in rare cases, sudden
10 cardiac death; and

11 Whereas, HCM is the most common inheritable heart disease and
12 can affect anyone regardless of age, gender, or ethnicity with a
13 reported prevalence ranging from 1 in 200 to 1 in 500 in the
14 general population; and

15 Whereas, Approximately 43.1 million people in the United
16 States are currently treated with lipid-lowering therapies to
17 manage cardiovascular risk. Only 20% of people with ASCVD who are
18 taking statins, one of the leading lipid-lowering therapies,
19 actually achieve healthy levels of LDL-C; and

20 Whereas, HCM shares symptoms with other common cardiovascular
21 and pulmonary diseases, such as shortness of breath, chest pain,
22 fatigue, palpitations, and fainting, making it difficult to
23 distinguish HCM from these other diseases; and

24 Whereas, A healthcare provider must conduct a thorough
25 screening with cardiac health questions to help identify a risk of
26 cardiac disorders both genetic and congenital and may include an
27 echocardiogram, a cardiac MRI, or genetic testing to confirm a
28 family history of cardiovascular disease, and must examine the
29 heart to diagnose HCM; and

1 Whereas, The total direct and indirect cost of ASCVD in the US
2 was \$555 billion in 2016 and is projected to climb to \$1.1 trillion
3 by 2035 according to the American Heart Association; and

4 Whereas, In Michigan, 730,900 adults have been told by a
5 health professional that they had angina, a stroke, a heart attack,
6 or coronary heart disease, which are some of the manifestations of
7 ASCVD or HCM; and

8 Whereas, In Michigan, 15,472 people had ASCVD as an underlying
9 cause of death. With HCM, the all-cause mortality risk is 3-4x
10 higher in patients than that of the general population; and

11 Whereas, In Michigan, 348,600 adults reported experiencing a
12 heart attack in their lifetime and 281,200 adults reported
13 experiencing a stroke in their lifetime; and

14 Whereas, Following a diagnosis of any cardiovascular disease,
15 it is important for patients to work with their healthcare provider
16 to learn more about their disease and understand different
17 management options, including prescription medicines and surgical
18 treatment options that may help; and

19 Whereas, The fourth Wednesday in February is an appropriate
20 day to observe Atherosclerotic Cardiovascular Disease &
21 Hypertrophic Cardiomyopathy Awareness Day; now, therefore, be it

22 Resolved by the House of Representatives, That the members of
23 this legislative body declare March 2, 2023, as Cardiovascular
24 Disease Awareness Day in the state of Michigan. We urge state
25 agencies to expand comprehensive cardiovascular screening programs
26 to allow for earlier identification of patients at risk of
27 cardiovascular events; and be it further

28 Resolved, That we encourage state agencies to explore ways to
29 collaborate with federal and national agencies and organizations to

1 establish or expand comprehensive cardiovascular screening programs
2 and to update the state's cardiovascular plan to accelerate quality
3 improvements in the care rendered to these patients such that
4 screening, treatment, monitoring, and improved health outcomes are
5 achieved. We support the creation of policies to decrease the
6 rising number of deaths of Americans as a result of ASCVD. We
7 acknowledge the critical importance of hypertrophic cardiomyopathy
8 awareness, support raising awareness of the consequences of
9 undiagnosed and untreated HCM, and encourage appropriate care for
10 HCM as a serious public health issue.