


# Ethnicity and Immigrants

## Selected Media



**The incidence of major cardiovascular events in immigrants to Ontario, Canada:**

*The CANHEART Immigrant Study*

Jack V. Tu, Anne Chu, Mohammad R. Rezaei, Helen Guo, Laura C. Madigan, Peter C. Austin, Gillian L. Booth, Douglas G. Manuel, Maria Chiu, Dennis T. Ko, Douglas S. Lee, Baiju R. Shah, Linda R. Donovan, Qazi Z. Sohail, David A. Alter

*Circulation* (Online before print August 31, 2015)

Logos for CANHEART, CHER, and Sunnybrook are visible.

Click above to see a slide show on the CANHEART

Immigrant Study

CBC National TV story on [CANHEART study of trends in cardiovascular risk among ethnic groups in Ontario](#). August 2015

## Related CANHEART Publications

- [CANHEART Immigrant Study Circulation Full Text - August 2015](#)
- [PubMed Abstracts](#)

## Related Links

- [CANHEART Immigrant Study Circulation Editorial](#)
- [Slide presentation re: CANHEART Immigrant Study](#)
- [ICES News Release on CANHEART Immigrant study](#)
- [Toronto Star article on CANHEART Immigrant study](#)
- [Globe and Mail article on CANHEART Immigrant study](#)

Canada is one of the most ethnically diverse high-income countries in the world yet relatively little is known about the burden of cardiovascular diseases amongst the different ethnic groups living in Canada. Information about cardiovascular risk factors and diseases amongst immigrants from different ethnic groups is necessary to enhance cardiovascular disease prevention, early detection and management

strategies for this growing segment of the population.

The CANHEART research team has linked the original CANHEART study cohort to Citizenship and Immigration Canada's Permanent Resident Database, which contains information on all immigrants to Ontario since 1985. Over 1.6 million adult immigrants have been identified and classified into 8 major ethnic groups, representing 221 countries of birth using validated algorithms based on country of birth, mother tongue and surnames (for Chinese and South Asians).

Using key risk factor prevalence, access and CANHEART developed quality indicators, our research in this area focuses on ethnic variation in cardiovascular risk factors and disease, as well as health care system utilization, receipt of preventive services and risk factor control. Our findings regarding the most important 'care gaps' in the management of patients will support the development of appropriate, culturally-sensitive and sex-specific interventions to improve care and outcomes in this population.