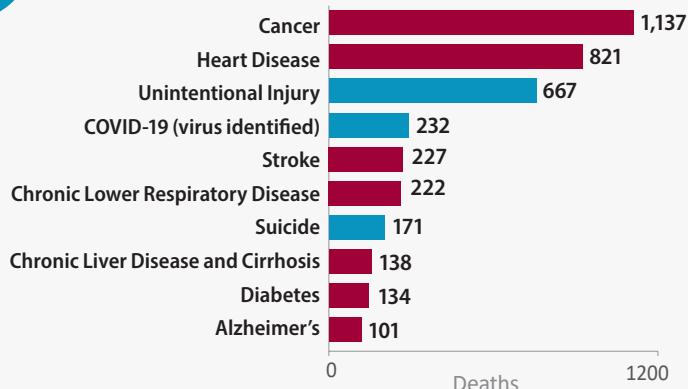


Alaska Chronic Disease Facts: 2025 Brief Report



Many of the top causes of death in Alaska are due to **chronic conditions**. (2024)¹



Chronic diseases—those that go on for a long time and often don't go away completely—are among the most common and costly health problems. We often know how to prevent them. Examples of diseases people live with for long periods, possibly a lifetime, are obesity, heart disease, stroke, cancer, diabetes, dementia, asthma, and arthritis.

Chronic Disease Illness and Death

- Cancer is the leading cause of death in Alaska, representing 21% of deaths overall.¹
 - The most common causes of **cancer death** in Alaska in 2024 were (1) lung, (2) colorectal, (3) pancreas, and (4) breast.¹
 - The most commonly **diagnosed cancers** in Alaska in 2022 were (1) breast, (2) prostate, (3) lung, and (4) colorectal. These 4 cancers represented 51% of all cancer cases in Alaska.²
- In 2024, heart disease represented 15% of deaths, and stroke represented 4% in Alaska.¹
- Having type 2 diabetes decreases life expectancy by up to 8 years.³ Nationwide, \$1 of every \$4 spent on health care goes toward caring for people with diabetes.⁴
- In 2020 an estimated 9% of Alaskans over 65 had Alzheimer's Disease.⁵

Healthy Habits

Four healthy lifestyle factors—never smoking, maintaining a healthy weight, being physically active, and following a healthy diet—are linked to as much as an 80% reduction in the chances of developing the most common and deadly chronic diseases.⁷

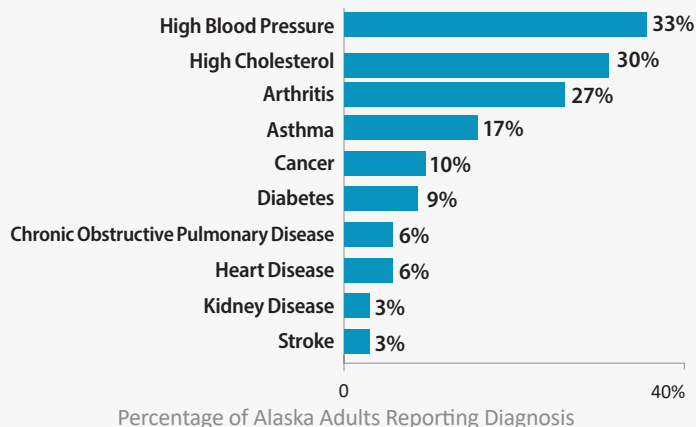
Nutrition, Physical Activity, and Obesity

For over two decades, the percentage of adult and high school-aged Alaskans with obesity has continued to rise.⁸ Physical activity and healthy eating can prevent overweight, obesity, and several chronic diseases, including many cancers, heart disease, and type 2 diabetes.^{9,10} It can also impact mental health. Healthy eating patterns have been associated with a reduced risk of depression.¹¹ The mental health benefits of physical activity—for adults and children—include better mood, sleep and focus.⁹

Tobacco

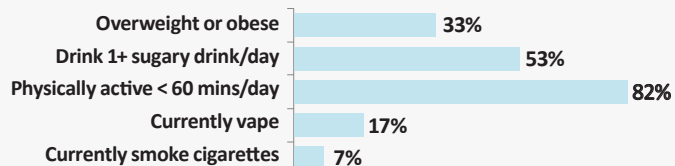
Tobacco use is the leading preventable cause of disease and death in the United States, and smoking has been linked to causing diseases in nearly all organs of the body.¹² Alaska's economy loses an estimated \$400 million per year because smoking-related illnesses impacts people's ability to do their usual activities, including work.¹³ In 2016, health care costs exceeded \$192 million for Alaska adults covered by Medicaid who had a diagnosis linked to tobacco use.¹⁴

Many Alaska adults are living with chronic conditions. (2024)⁶
(See reference for condition definitions)

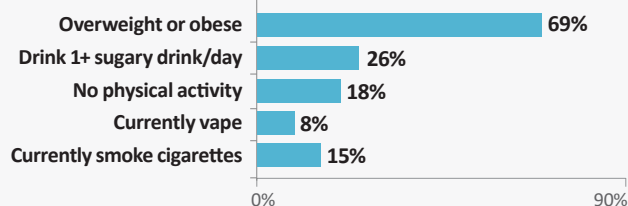


Many Alaska adults and teens have factors that increase their chance of developing chronic diseases.

HIGH SCHOOL STUDENTS (2023)¹⁵



ADULTS (2024)⁶



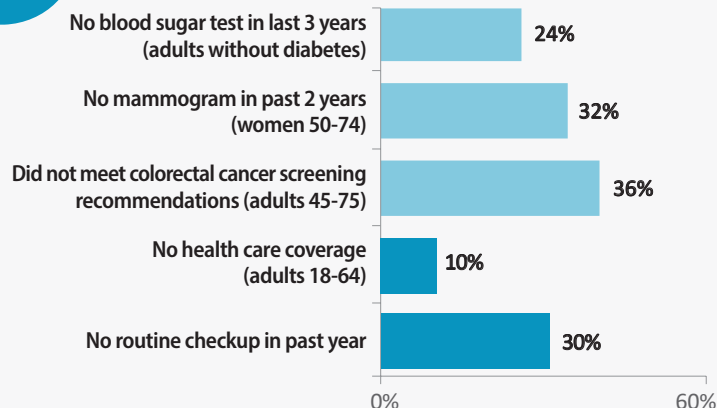
Alaska Chronic Disease Facts: 2025 Brief Report



Many Alaska adults get less than the recommended preventive services and access to health care (2024).⁶

Preventive Health Services

Access to health care impacts everything from prevention of disease and disability, to quality of life and life expectancy. Limited access can reduce the possibility of receiving preventive health care, including routine disease screening and immunizations. Alaskans' access to health care depends on many things: routine access to a trusted health care provider, transportation, health insurance, access to clear and accurate information, and many more factors. Even those with health insurance face limitations on the services they can receive due to gaps in coverage and rates of reimbursement.¹⁶



Early Detection

Prediabetes is a health condition involving blood sugar levels that are higher than normal, but not high enough to be diagnosed as diabetes. Many people have prediabetes and don't know it. Answers to [a few questions](#) can aid diagnosis. Once diagnosed, prediabetes can be reversed with changes to physical activity and nutrition before it becomes type 2 diabetes.¹⁷ Screening for lung cancer, breast cancer, colorectal cancer, and cervical cancer has been shown to either lower chances of dying from that cancer or prevent that cancer altogether.¹⁸⁻²¹ Changes to memory can impact many aspects of health. However, early dementia diagnosis can help individuals understand the changes to their brain and adjust lifestyles to potentially slow memory loss. Early access to resources can guide informed decisions about the future while ensuring better availability of care, medications, and services.²² Finally, identifying high blood pressure and making changes to health and medication is an important step to preventing complications, including risk of stroke, heart disease, and kidney disease.²³

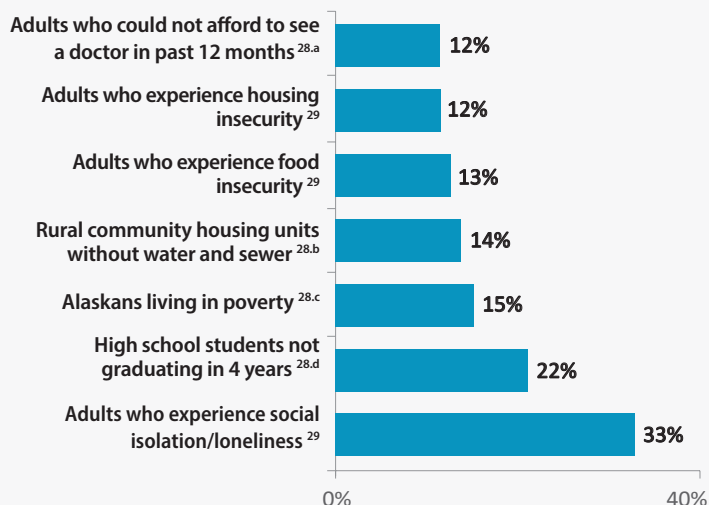
No Health Care Coverage

Uninsured adults have less access to recommended care, receive poorer quality of care, and experience worse health outcomes than insured adults do.²⁴ Expiration of the expanded Medicaid access under the federal COVID-19 public health emergency has increased the number of Alaskans falling in the gap between being eligible for Medicaid and being able to afford insurance.

Health begins where we live, learn, work and play—long before we need medical care.

Our life experiences impact our health in many ways.²⁵ These experiences can affect people's ability to access health care and preventive services, and live long, full lives. For example, we know that Alaska adults who have not had the opportunity to obtain a high school diploma or do not have an income above the federal poverty level have less confidence in their ability to take preventive actions and are also less likely to do so.²⁶ To improve the health of all Alaskans, we must take action to address poverty, education, and other societal factors that impact the ability to achieve health.²⁷

Many Alaskans have life experiences that may impact their opportunity to be healthy.



RESOURCES

For resources to improve chronic disease prevention and management, visit the Section of Chronic Disease Prevention and Health Promotion at <https://health.alaska.gov/en/division-of-public-health/chronic-disease-prevention/>. See more resources on page 3.



What can we do to prevent or manage chronic disease?

Community partners and public health professionals

- Support policies that improve access to education, housing, healthy foods, healthy neighborhoods, and health care for everyone.
- Make the healthy choice the easier choice. Choose actions that improve the health of all Alaskans, specifically groups who face increased chances of getting sick or dying from a chronic disease. For example:
 - Provide tobacco-free workplaces and schools, with alternatives-to-suspension programs for students.
 - Support policies that increase the price and legal age to purchase tobacco products.
 - Increase access to affordable, smokefree housing.
 - Build walkable and rollable communities to support physical activity, e.g., improve bike lanes, sidewalks, trails, and lighting.
 - Ensure nutritious foods and beverages are available at schools and worksites.
 - Offer all students quality health and physical education in schools.
 - Support physical activity and good nutrition in childcare centers and preschools.
 - Offer proven prevention programs at worksites, and educate policy makers and employers about the cost of chronic diseases and the value of reimbursement for preventive and screening services.
 - Increase availability of healthy food options by partnering with food hubs, farmers markets, community gardens, and other programs that encourage individuals and small businesses to use and contribute to a sustainable Alaskan food market.



Alaska Chronic Disease Facts: 2025 Brief Report

References

1. Alaska Department of Health, Division of Public Health, Health Analytics & Vital Records. Alaska Vital Statistics 2024 Annual Report. October 2025. Available at: <https://health.alaska.gov/media/wrbjtk3l/2024-alaska-vital-statistics-annual-report.pdf>. Accessed November 7, 2025.
2. Alaska Cancer Registry. Cancer in Alaska – 2022. Anchorage, Alaska: Section of Health Analytics and Vital Records, Division of Public Health, Alaska Department of Health; August 2025.
3. Rosenquist KJ, Fox CS. Mortality Trends in Type 2 Diabetes. In: Cowie CC, Casagrande SS, Menke A, et al., eds. *Diabetes in America*. 3rd ed. Bethesda (MD): National Institute of Diabetes and Digestive and Kidney Diseases (US); August 2018.
4. American Diabetes Association. Economic Costs of Diabetes in the U.S. in 2022. *Diabetes Care*. 2024;47(1):26-43. doi: 10.2337/dci23-0085.
5. Dhana K, Beck T, Desai P, Wilson RS, Evans DA, Rajan KB. Prevalence of Alzheimer's disease dementia in the 50 US states and 3142 counties: A population estimate using the 2020 bridged-race postcensal from the National Center for Health Statistics. *Alz & Dem*. 2023;19(10):3388-4395. <https://doi.org/10.1002/alz.13081>
6. Alaska Behavioral Risk Factor Surveillance System (BRFSS). Alaska Department of Health, Division of Public Health, Section of Chronic Disease and Prevention and Health Promotion. <https://alaska-dph.shinyapps.io/BRFSS/>. Accessed November 7, 2025
7. Ford ES, Bergmann MM, Kröger J, Schienkiewitz A, Weikert C, Boeing H. Healthy living is the best revenue: findings from the European Prospective Investigation Into Cancer and Nutrition-Potsdam study. *Arch Intern Med*. 2009;169(15):1355-1362. doi:10.1001/archinternmed.2009.237.
8. Alaska Department of Health. Alaska Physical Activity, Nutrition and Obesity Facts Report – 2025. Anchorage, Alaska: Section of Chronic Disease Prevention and Health Promotion, Division of Public Health. August 2025. https://health.alaska.gov/media/njuccka/ak_2025_panandobesityfactsreport.pdf
9. U.S. Department of Health and Human Services. *Physical Activity Guidelines for Americans*. 2nd edition. Washington, DC: U.S. Department of Health and Human Services; 2018.
10. U.S. Department of Health and Human Services and U.S. Department of Agriculture. *2020-2025 Dietary Guidelines for Americans*. 9th Edition. December 2020. Available at: <https://www.dietaryguidelines.gov/resources/2020-2025-dietary-guidelines-online-materials>. Accessed September 9, 2025.
11. Lassale C, Batty GD, Baghdadli A, et al. Healthy dietary indices and risk of depressive outcomes: a systematic review and meta-analysis of observational studies. *Mol Psychiatry*. 2019;24:965-86. doi:10.1038/s41380-018-0237-8.
12. U.S. Dept of Health and Human Services. *The Health Consequences of Smoking—50 Years of Progress. A Report of the Surgeon General*. Atlanta: USDHHS, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2014.
13. Shrestha SS, Ghimire R, Wang X, Trivers KF, Homa DM, Armour BS. Cost of Cigarette Smoking–Attributable Productivity Losses, U.S. *Am J Prev Med*. 2018;63(4), 478–485. <https://doi.org/10.1016/j.amepre.2022.04.032>
14. Alaska Department of Health, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion. The Cost of Eight Chronic Conditions on Alaska's Medicaid Program. Anchorage, AK: Alaska Department of Health; 2017. Available at: https://alaska.access.preservica.com/uncategorized/IO_92a1f9e4-63e8-4679-8d20-b85af2af9d37/
15. Alaska Youth Risk Behavior Survey, Section of Chronic Disease Prevention and Health Promotion. 2023.
16. Frazier R, Foster M. How hard is it for Alaska's Medicare patients to find family doctors? UA Research Summary 14. Institute of Social and Economic Research, University of Alaska Anchorage, 2009. https://iseralaska.org/static/legacy_publication_links/2010_06-ImprovingHealthCareAccessforOlderAlaskans.pdf
17. Diabetes Prevention Program Research Group. Long-term effects of lifestyle intervention or metformin on diabetes development and microvascular complications over 15-year follow-up: the Diabetes Prevention Program Outcomes Study. *Lancet Diabetes Endocrinol*. 2015;3(11):866-875. doi:10.1016/S2213-8587(15)00291-0.
18. Albert L. Siu, on behalf of the U.S. Preventive Services Task Force. Screening for Breast Cancer: U.S. Preventive Services Task Force Recommendation Statement. *Ann Intern Med*. 2016;164:279-296. doi:10.7326/M15-2886.
19. U.S. Preventive Services Task Force. Screening for Cervical Cancer: U.S. Preventive Services Task Force Recommendation Statement. *JAMA*. 2018;320(7):674–686. doi:10.1001/jama.2018.10897.
20. Jonas DE, Reuland DS, Reddy SM, et al. Screening for Lung Cancer With Low-Dose Computed Tomography: Updated Evidence Report and Systematic Review for the US Preventive Services Task Force. *JAMA*. 2021;325(10):971–987. doi:10.1001/jama.2021.0377.
21. Lin JS, Perdue LA, Henrikson NB, Bean SJ, Blasi PR. Screening for Colorectal Cancer: Updated Evidence Report and Systematic Review for the US Preventive Services Task Force. *JAMA*. 2021;325(19):1978–1998. doi:10.1001/jama.2021.4417.
22. Arvanitakis Z, Shah RC, Bennett DA. Diagnosis and management of dementia: A review. *JAMA*. 2019;322(16):1589-1599. doi: 10.1001/jama.2019.4782.
23. Schmidt B-M, Durao S, Toews I, Bavuma CM, Hohlfield A, Nury E, Meerpohl JJ, Kredt T. Screening strategies for hypertension. *Cochrane Database of Systematic Reviews*. 2020, Issue 5. Art. No.: CD013212. DOI: 10.1002/14651858.CD013212.pub2.
24. McWilliams JM. Health consequences of uninsurance among adults in the United States: recent evidence and implications. *Milbank Q*. 2009;87(2):443–494. doi:10.1111/j.1468-0009.2009.00564.x.
25. Marmot M, Friel S, Bell R, Houweling TA, Taylor S. Commission on Social Determinants of Health. Closing the gap in a generation: health equity through action on the social determinants of health. *Lancet*. 2008 Nov 8;372(9650):1661-9. doi: 10.1016/S0140-6736(08)61690-6. PMID: 18994664.
26. Fenaughty A, Potempa A, Barker J. Connecting risks for chronic disease and COVID-19 outcomes. Alaska Public Health Association Health Summit presentation, January 20, 2022.
27. Braveman PA, Egerter SA, Mockenhaupt RE. Broadening the focus. The need to address the social determinants of health. *Am J Prev Med* 2011;40(1S1):S4-S18.
28. From Healthy Alaskans 2030 Scorecards. Available at: https://www.healthyalaskans.org/wp-content/uploads/2025/01/HA2030_Dec_2024.html; Data sources: a) BRFSS (2023), b) AK Dept of Environmental Conservation (2021), c) Current Population Survey (2020-2022), d) Alaska Department of Education and Early Development (2022-2023).
29. Alaska Behavioral Risk Factor Surveillance System, Section of Chronic Disease Prevention and Health Promotion. 2022-2023 Social Determinants Module.

Individuals

- Support your health and your family's health by being physically active, spending time in nature, eating a healthy diet, cutting out sugary drinks (see [Play Every Day](#) for tips), and avoiding tobacco use.
- See a health care provider every year and ask about recommended screenings and services.
- Consider signing up for Alaska's [Fresh Start](#) programs. Fresh Start helps connect Alaska adults to free or low-cost programs that can help them make a fresh start any time in their life – no matter if it's losing weight, adding physical activity, lowering blood sugar, lowering blood pressure, or quitting smoking or vaping.
- If you smoke, vape, or use any tobacco or nicotine, consider quitting. There are many resources available, some may be in your community, or online at [Alaska's Tobacco Quit Line](#).
- Log onto [Live Vape Free](#) for personalized support tips and resources to start conversations with your teens about vaping.



Health care providers

- Ask and advise patients of all ages about physical activity, maintaining healthy weight, avoiding sugary drink consumption, and all forms of tobacco and nicotine use.
- Screen for chronic conditions and their risk factors.
- Refer patients to preventive and treatment services, including Alaska's [Fresh Start](#) programs and Alaska's Tobacco Quit Line.
- Support access to primary care and patient navigation to improve patient outcomes while managing costs.
- Implement team-based and patient-centered care models, incorporating the Community Health Worker role when possible.

