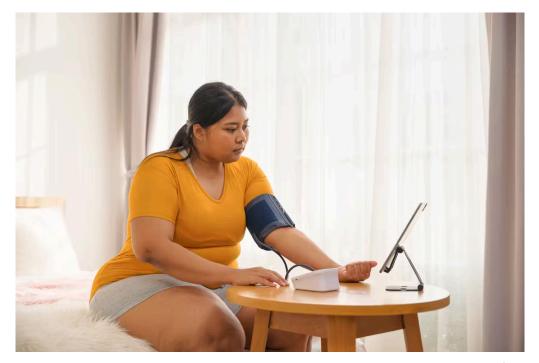
Why your late teens and early 20s are crucial times for lifelong heart health

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Many young adults don't realize that high cholesterol, obesity, high blood pressure and lack of physical activity are early heart disease risk factors.

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Emerging adulthood – the life stage that unfolds around ages 18-25 – is full of major transitions, such as starting college or learning a trade, making new friends and romantic connections, and generally becoming more independent.

It's also a stage where behaviors that diminish heart health, such as spending more time sitting, consuming more fast food and using more tobacco and alcohol, become more common. In fact, only about 1 in 4 youths maintain positive health behavior patterns during the transition to adulthood.

More Americans die of heart disease than of any other condition. People often think of heart disease as an illness that mostly affects older people, but data from electronic health records show that the rate of heart disease in people under 40 has more than doubled since 2010 and tripled among people who use tobacco. Researchers like me are learning a great deal more about how heart health later in life heavily depends on the habits built during late adolescence and early adulthood.

I am a primary care nurse practitioner and researcher studying how early life shapes long-term heart health. In my clinical practice, I frequently care for people in their early 20s who are entering adulthood and are already facing serious cardiovascular risk factors such as elevated blood pressure, high blood sugar or a body mass index in the obesity range.

Just as young people on the cusp of adulthood make important decisions about their education, career and relationships, the health habits they build during this critical time also lay the foundation for lifelong heart health and better quality of life.

Early roots of heart disease

The most common form of heart disease is atherosclerotic cardiovascular disease, which develops when sticky, fatty plaque builds up in the blood vessels and makes it harder for blood to flow.

Heart health doesn't suddenly decline in middle age. It starts to slip much earlier, often without people realizing it. In fact, research shows that a key turning point is around age 17. That's when overall heart health scores based on behaviors such as diet, movement and sleep, along with clinical measures such as blood pressure, begin to worsen.

That means by the time many young people are finishing high school, heart disease risk factors are already emerging. The good news is that most of the risk factors that drive this buildup are modifiable – meaning you can do something about them.

In a report I co-authored in March 2025, my colleagues and I explored the key risk factors for heart disease in emerging adults. One of the most important is nicotine exposure. Use of cigarettes, vapes and other nicotine products has surged among young adults in recent years, from 21% of 18- to 23-year-olds in 2002 to 43% in 2018. Nicotine damages blood vessels and speeds up the plaque formation process, increasing the risk of serious heart problems later in life. While signs such as chest discomfort or shortness of breath tend to show up much later, the groundwork for those symptoms is laid much earlier.

Obesity is another early risk factor. In fact, 1 in 5 young people under age 25 have a BMI of 30 or higher, and projections suggest nearly 3 in 5 will meet that threshold by age 35.

Meanwhile, fewer than half of adults ages 18-34 recognize high cholesterol, obesity, high blood pressure and lack of physical activity as heart disease risk factors. These early warning signs, often uncovered during routine checkups, can set the stage for future heart disease.

Societal factors shape heart health, too

Heart health isn't shaped by individual choices alone. Broader policies and systems also play a major role.

For example, the Affordable Care Act allows young adults to stay on their parents' insurance plans until age 26, which can help ensure access to preventive services. These services, such as routine checkups, blood pressure screenings and conversations about family history, are key opportunities for your primary care provider to catch early signs of cardiovascular risk.

While preventive care use among young adults increased after the ACA was passed, overall rates of preventive care visits still remain low. Policies that expand access to health care and that make it easy for young people to take advantage of these services, such as telehealth, can make a real difference. And if a provider doesn't bring up heart health during a well-check visit, patients can ask questions or start the conversation themselves.



Living in a neighborhood with access to outdoor spaces can make it easier to engage in activities that support heart health.

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Beyond health care access, the conditions of people's daily lives, such as where they live, their education level and their economic stability, also play important roles in heart health. Neighborhoods can include resources such as parks and green spaces, which make healthy choices more feasible. Education and stable employment are tied to health care access, lower stress and food security, all of which support a healthier heart.

Healthy social connections matter, too. Strong, supportive relationships are linked to better overall well-being, including heart health. Recently, several major health organizations have spotlighted loneliness as a public health issue. However, there is still a lot to learn about exactly how social connections translate to healthier lives, and not enough of this research focuses on young adults.

Pew research shows that 1 in 3 teens report near-constant use of social media, but those connections do not yield the same health benefits as interacting in real life. In my own research, I am investigating how social connection affects heart health in young adults in particular.

Building a foundation for heart health

There is a lot you can do today to make a difference in your heart health. In our recent report, written with the American Heart Association, my colleagues and I highlighted a group of eight risk factors that people can modify to reduce their heart disease risk, called the Essential 8.

Four are health behaviors. In addition to avoiding nicotine, young people should prioritize getting 150 minutes of moderate to vigorous activity a week, or around 20 minutes a day, as recommended by the American Heart Association. They should also aim to get seven to nine hours of sleep nightly and to eat a diet rich in fish, berries and vegetables. Even small changes in these four behaviors can have positive effects.

Of these four behaviors, U.S. children score worst on diet – an important area for improvement in the transition to adulthood. Young adults with stronger cooking skills tend to have healthier eating habits in middle age, suggesting that learning how to cook could be a valuable step toward better heart health.

The other four factors are clinical measures: blood pressure, blood sugar, cholesterol and BMI. Since the early 2000s, three of the four – blood pressure, blood sugar and BMI – have all worsened among young adults.

These changes can go unnoticed until much later, but checking in on them early creates an opportunity to take action. The next time you are at a checkup, ask your provider about your heart health – even if you think you're too young to be worrying about heart disease. A simple conversation today could shape the way you feel years from now, and your future heart will thank you.

Jewel Scott receives funding from the National Institutes of Health. She is a volunteer with the American Heart Association.

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