

Prevalence Estimates (9/30/2018-9/30/2023):

Table A. Estimated Parkinson's Disease Prevalence for the State of Maryland

Measure	Unique Marylanders with Parkinson's Disease	Population	Prevalence per 100,000
Total	25,288	6,173,205	410

Table B. Estimated Parkinson's Disease Prevalence for the State of Maryland by Sex¹

Sex	Unique Marylanders with Parkinson's Disease	Population	Prevalence per 100,000
Female	10,718	3,571,034	300
Male	14,232	3,009,763	473
Unknown/	338		

"Administrative sex" concept, which represents the sex of a person used for administrative purposes (such as registering a patient in a hospital EHR or insurance billing)

Table C. Estimated Parkinson's Disease Prevalence for the State of Maryland by Jurisdiction

Jurisdiction	FIPS	Unique Marylanders with Parkinson's Disease	Population	Prevalence per 100,000
Allegany	24001	474	67,955	698
Anne Arundel	24003	2,227	589,054	378
Baltimore City	24005	4,059	853,325	476
Calvert	24009	379	92,905	408
Caroline	24011	165	33,273	496
Carroll	24013	902	172,923	522
Cecil	24015	438	103,793	422
Charles	24017	509	166,726	305
Dorchester	24019	198	32,528	609
Frederick	24021	1,198	272,765	439
Garrett	24023	177	28,792	615
Harford	24025	1,280	261,213	490
Howard	24027	1,375	332,786	413
Kent	24029	132	19,114	691
Montgomery	24031	4,298	1,060,825	405
Prince George's	24033	2,437	965,290	252

Queen Anne's	24035	247	50,023	494
St. Mary's	24037	492	113,987	432
Somerset	24039	124	24,564	505
Talbot	24041	303	37,481	808
Washington	24043	933	154,677	603
Wicomico	24045	538	103,556	520
Worcester	24047	393	52,511	748
Baltimore	24510	2,010	583,139	345

Federal Information Processing System (FIPS) Codes for States and Counties. FIPS codes are numbers which uniquely identify geographic areas.

Table D. Estimated Parkinson's Disease Prevalence for the State of Maryland by Race/Ethnicity

Race/Ethnicity	Unique Marylanders with Parkinson's Disease	Population	Prevalence per 100,000
Non-Hispanic White	18,132	3,037,929	597
Non-Hispanic Black	672	176,819	380
Non-Hispanic Asian	4,730	1,867,812	253
Non-Hispanic Other	908	415,245	219
Hispanic	684	675,400	101
Data Not Available	162		

Table E. Estimated Parkinson's Disease Prevalence for the State of Maryland by Age Group

Age Group	Unique Marylanders with Parkinson's Disease	Population	Prevalence per 100,000
Under 35	153	2,733,163	6
Between 35-44	172	814,596	21
Between 45-54	447	799,957	56
Between 55-64	669	439,482	152
Between 65-74	1,350	399,233	338
Between 75-84	5,631	584,503	963
Between 85-94	9,352	283,866	3,295
Age 85+	7,514	118,405	6,346

Parkinson's Disease Prevalence Data
Date Constructed: 11/16/23

Documentation Updated: 12/19/2023

Data includes Marylanders with at least 1 encounter coded with a diagnosis of Parkinson's Disease (ICD10 Code G20) in any diagnosis position between September 30, 2018 and September 30, 2023. The analysis was performed on Maryland Medicaid data, HSCRC hospital admission and discharge data, and CRISP-MD Participant clinical data. Using CRISP's Master Person Index (MPI), each unique person is only counted once. All demographics were assessed as the most recent demographics in the CRISP MPI at the time of the analysis. For example, Maryland residence was defined as having a Maryland address at the time the analysis was performed. Age was calculated as the difference between the person's birthdate in the MPI and the date of the analysis. The analysis does not account for out of state migration outside of CRISP known affiliates (VA, DC, WV, CT, AK) or any deaths. Sex for this analysis is 'administrative sex'[1], as that is the variable provided by sources in a standard form. Analysis uses population denominators from Maryland Department of Planning estimates for July 1, 2020 data.

Methodology:

While there is good coverage of the Maryland population across the three datasets, the analysis may not capture every Marylander with Parkinson's Disease in the 5 year period. For example, this analysis does not include data from veteran healthcare providers, military healthcare providers, or out-of-state providers serving Maryland residents, as well as individuals who chose not to seek care. The analysis also does not reflect changes or corrections in diagnoses that may occur with additional tests or information throughout a person's clinical history. Because this is not a comprehensive source of all people with Parkinson's Disease in the state, users should exercise caution in making conclusions or determinations based on prevalence estimates in this report.

Caveats:

[1] "Administrative sex" concept, which represents the sex of a person used for administrative purposes (such as registering a patient in a hospital EHR or insurance billing)