



## Research Findings

### Most Americans Say That Having a Heart Attack Tomorrow Would Make Them Feel Depressed, Financially Strained, and Anxious About Their Future Health

#### Heart Attacks Rank Second Most Concerning Out of Five Possible Conditions/Diseases – Behind Only Cancer

**Washington, DC, January 31, 2019** — According to a recent online survey conducted by Ipsos on behalf of MDVIP, a national network of primary care doctors who focus on delivering personalized medicine, patient-centered medicine and preventive care, nearly nine in ten adults say that if they were to experience a heart attack tomorrow, it would make them feel anxious about their future health (89%) and concerned about having another heart attack (88%). Seven in ten say that this would make them feel depressed (71%) and/or financially strained (69%) and most would likely feel as though they were a heavy burden to their family (63%). Nearly half say that having a sudden heart attack would make them feel isolated (46%), while more than a third would worry about having sex (39%) and having to leave or change their job (34%).

- Those who have heart disease and/or have experienced a heart attack/stroke are significantly more likely to say that they would feel like a burden to their family (76% vs. 62% of those who have never experienced any of these), isolated (65% vs. 44%), and be worried about having sex (50% vs. 37%) or having to leave their job (49% vs. 32%).
- Men and younger adults (especially those under the age of 35) are also significantly more likely to believe that having a heart attack tomorrow would impact their sex lives and their careers compared to women and those over the age of 55.
- Anticipating feelings of depression is much more common among those living in the Midwest (81%) compared to those from all other regions.

A large majority are also optimistic, however, with just over nine in ten saying that having a heart attack tomorrow would make them very/somewhat likely to adopt healthier lifestyle habits (92%) and focus more on the important things in life (93%). Those most likely to be optimistic in the event of a heart attack include women, older adults (ages 55+), and those with a family history/spouse/partner with heart disease.

In contrast, not quite three in ten (29%) feel as though having a heart attack tomorrow would not impact their lives (29%) – with men (35% vs. 23% of women), those who are married (34% vs. 23% of those who are not married), those who have heart disease and/or have experienced a heart attack/stroke (44% vs. 27% who have never experienced these), and those with a family history/spouse/partner with heart disease (45% vs. 24% of those with a family history of heart disease) especially likely to feel this way.

Out of a list of five conditions/diseases, heart attacks rank second most concerning – behind only cancer (62% ranking this a 1 or 2) – with more than half classifying this as among their top two most concerning conditions/diseases (55%). Roughly three in ten are most

Address: 2020 K Street NW, Suite 410  
Washington, DC 20006  
Tel: +1 202 463-7300

Contact: **Chris Jackson**  
*Vice President, U.S., Ipsos Public Affairs*  
Email: [chris.jackson@ipsos.com](mailto:chris.jackson@ipsos.com)  
Tel: +1 202 420-2025



## Research Findings

likely to be concerned with strokes (33%) or Alzheimer's disease (28%), while diabetes comes in last with not quite one in four saying that this condition is among their top two most concerning (23%). Heart attacks are especially concerning to middle aged adults (63% of those age 35-54 vs. 47% of those age 18-34 and 53% of those age 55+), non-Caucasian respondents (65% vs. 51% of Caucasians), and those with a family history of heart disease (63% vs. 49% of those with no family history).

One in twenty Americans surveyed say that they have been diagnosed with heart disease (5%), and this is especially common among men (7% vs. 3% of women), older adults (8% of those age 55+ vs. 3% of those age 18-54), Caucasian respondents (6% vs. 0% of non-Caucasian respondents), and those with a spouse/partner that has heart disease (22% vs. 2% of those who don't have a family history/spouse/partner with heart disease). Not quite as many report that they have had a heart attack (3%) or stroke (3%) in the past – with heart attacks much more prominent among men (6%) compared to women (1%) and those with a spouse/partner that has heart disease (15% vs. 2% of those who don't have a family history/spouse/partner with heart disease). On the other hand, most say that they have never been diagnosed with any of these (89%) while 2% don't know.

Despite the low occurrence of heart disease/heart attacks/strokes, 42% report that they have a family history of heart disease and another one in twenty (5%) say they have a spouse/partner with the condition. Less than half (47%) say that they neither have a family history of heart disease nor a spouse/partner with heart disease while one in ten (8%) don't know.

- Adults who have been diagnosed with heart disease are significantly more likely to say that they have a family history of the disease (69% vs. 41% of those who have not been diagnosed with heart disease/heart attack/stroke). Those with heart disease (23%) and those who have already suffered a heart attack (22%) are also much more likely to say that they have a spouse/partner with heart disease (vs. 3% of those who have not been diagnosed with heart disease/heart attack/stroke).

### Heart Attack IQ

Six in ten believe that they are very/somewhat knowledgeable when it comes to factors that may make people at risk for heart disease (61%) and ways to prevent heart disease (61%). Nearly as many say the same thing about their knowledge of heart disease symptoms (56%). Fewer report being very/somewhat knowledgeable when it comes to the contribution of inflammation to heart disease, though 44% nevertheless believe they are well-informed on this topic.

- Men, those with a college degree, those who are married, those who have been diagnosed with heart disease, those who have had a heart attack, those with a family history of heart disease and those that have a spouse/partner with heart disease are particularly likely to report being knowledgeable when it comes to heart health.
- Very few major differences emerge across age groups, though 18-34-year-olds are much more likely to say that they are knowledgeable when it comes to the contribution of inflammation to heart disease (49%) compared to those over the age of 55 (39%).

In fact, more than three quarters of Americans say that they would recognize if someone around them were having a heart attack (77% vs. 13% who would definitely/probably not) – and this is especially true among men (82%), those who have had a heart attack (97%), those with a spouse/partner that has heart disease (87%) and those with a family history of heart disease (83%). One in ten (10%) are not sure if they would recognize someone having a heart attack in their presence.

Address: 2020 K Street NW, Suite 410  
Washington, DC 20006  
Tel: +1 202 463-7300

Contact: **Chris Jackson**  
*Vice President, U.S., Ipsos Public Affairs*  
Email: [chris.jackson@ipsos.com](mailto:chris.jackson@ipsos.com)  
Tel: +1 202 420-2025



## Research Findings

The MDVIP survey included a series of questions asked to gain insight into how well Americans know and understand heart health facts. Grades were assigned based on the number of correct answers each respondent scored on the quiz. Despite majorities claiming to be very/somewhat knowledgeable when it comes to heart disease, very few (3%) received an 'A' or 'B' grade (80% or higher), while one in ten scored a 'C' (12%) and 23% obtained a 'D' grade – leaving more than six in ten (62%) with a failing grade. The average quiz score was 52% - or 14.6 correct answers out of a possible 28.

- Compared to their demographic counterparts, those with a significantly higher average Heart Attack IQ score include older adults (15.8 for those age 55+ and 14.8 for those age 35-54 vs. 12.9 for those age 18-34), those with a college degree (15.5 vs. 13.9 for those with no degree), married adults (15.2 vs. 14 for those who are not married), Caucasian respondents (14.9 vs. 13.5 for non-Caucasians), and those who with a family history of heart disease (15.6) or a spouse/partner with heart disease (16 vs. 14.4 for those with neither a family history or a spouse/partner with heart disease).

### Heart Disease Questions

When it comes to facts about heart disease in general, Americans fare rather well. For instance, 86% correctly believe that anyone, including children, can develop heart disease (vs. 4% false and 10% don't know) and nearly seven in ten also correctly identify heart disease as the leading cause of death for both men and women in the United States (69% vs. 14% who think this is false and 16% who don't know).

At least two thirds are also aware that more than half of preventable heart disease and stroke deaths happen to people under age 65 (69% vs. 10% who think this is false and 21% who don't know) and that race and ethnicity impact a person's risk of suffering a heart attack or stroke and their chances of survival (66% vs. 18% who say this is false and 16% that don't know).

When it comes to the belief that heart disease cannot be reversed, 23% mistakenly believe this to be true – versus 56% who correctly say this is false (and another 21% that don't know). Not quite as many (42%) believe women receive some protection against heart disease from estrogen in their pre-menopausal years, but after that their risk increases dramatically – which is true – though just as many (42%) don't know and another 16% believe this is false.

### Heart Attack Questions

The quiz also features a series of questions surrounding heart attacks. Nearly two thirds of Americans incorrectly believe that a heart attack happens when cholesterol builds up in the blood and clogs an artery (64%). Only 25%, in comparison, select the correct answer, saying that a heart attack occurs when a blood clot forms over a plaque lesion. Fewer believe that heart attacks happen when LDL or "bad" cholesterol gets too high (6%) or HDL or "good" cholesterol stops clearing the arteries (4%).

When it comes to true or false statements about heart attacks, more than eight in ten correctly believe that people can have warning signs and symptoms of a heart attack for days or weeks in advance (81% vs. 7% who believe this is false and 12% who don't know). A majority also correctly acknowledge that women are more likely than men to have heart attack symptoms beyond chest pain, such as neck pain, jaw pain and abdominal discomfort (60% vs. 14% who believe this is false and 27% who don't know) and that some heart

Address: 2020 K Street NW, Suite 410  
Washington, DC 20006  
Tel: +1 202 463-7300

Contact: **Chris Jackson**  
Vice President, U.S., Ipsos Public Affairs  
Email: [chris.jackson@ipsos.com](mailto:chris.jackson@ipsos.com)  
Tel: +1 202 420-2025



## Research Findings

attacks cause no symptoms at all, especially those that happen to people with diabetes (53% vs. 12% who believe this is false and 35% who don't know). Most are also aware that heart attacks and strokes kill more women each year than the next four causes of death combined, including cancer (58%), compared to only 17% who incorrectly identify this statement as being false and a quarter (25%) who don't know.

One in five (18%) believe that it is dangerous to exercise after you've recovered from a heart attack, which is incorrect. Instead, just over six in ten correctly identify this statement as being false (62%) though 20% don't know.

Beliefs are split when it comes to thinking the heart stops beating when a heart attack strikes, with 43% correctly identifying this as being false, versus 32% who think this is true and another 24% who don't know. Similarly, Americans are not as likely to know whether men have a lower chance of surviving first heart attacks than women, with only 27% correctly identifying this as being false, versus 34% who think this is true and 39% who admit they don't know.

One third of Americans are aware that the trigger for most heart attacks and strokes is inflammation in the arteries, and not the buildup of cholesterol (35% vs. 25% who incorrectly think this is false and another 40% who say that they don't know). Fewer correctly believe that most major heart attacks occur in people with normal cholesterol levels (25%), though greater proportions say this is false (38%) or admit that they do not know (37%).

### *Lifestyle Questions*

Just over eight in ten Americans correctly believe that heart disease is preventable 80 percent of the time through lifestyle changes (81%) – compared to only 5% who think this is false and 14% who don't know. Furthermore, three quarters (77%) correctly say that it is false to think that if heart disease runs in your family, there is little you can do to reduce your own risk for developing the disease (vs. 12% who think this is true and 11% who don't know).

Another eight in ten are correct in saying that half of all American adults have at least one of three major risk factors for heart disease: high blood pressure, high cholesterol, and smoking (83% vs. 5% who mistakenly think this is false and 12% who don't know). Most also believe that if you quit smoking, your risk of having a heart attack is cut in half after one year (73%) – which is true – compared to one in ten (11%) who think this is false and 16% that don't know.

Nearly half (48%) are aware that people with depression have more than a 60 percent greater risk of developing heart disease compared to the general population – though 14% do not believe this to be true and nearly two in five say that they don't know (38%). Similar proportions correctly believe that a primary care doctor is the best doctor to help prevent a heart attack (49% vs. 28% who think this is false and 23% who don't know).

Fewer are aware that two out of three people with diabetes will die from heart disease or stroke, with 40% correctly identifying this statement as being true, versus just as many who don't know (41%) and another 19% who think this is false. Similar proportions correctly identify that the annual out-of-pocket cost for someone with heart disease is more than double the cost for someone with diabetes (38% vs. 16% who incorrectly believe this is false and 46% who do not know).

Address: 2020 K Street NW, Suite 410  
Washington, DC 20006  
Tel: +1 202 463-7300

Contact: **Chris Jackson**  
*Vice President, U.S., Ipsos Public Affairs*  
Email: [chris.jackson@ipsos.com](mailto:chris.jackson@ipsos.com)  
Tel: +1 202 420-2025



## Research Findings

Thinking about exercise, just over two in five say that not exercising is worse for your health than smoking, diabetes and heart disease (43%), which is true – though more than a third (35%) believe this is false and another 22% are not sure.

When it comes to food, just over half of those surveyed incorrectly believe that if you have heart disease, you should eat as little fat as possible (52%). In comparison, only 25% correctly identify this statement as being false, while nearly as many are unsure (23%). Not quite two in five also incorrectly believe that having enough good cholesterol offsets bad cholesterol (36%), while just as many correctly identify this as being false (38%) and 26% admit that they don't know. In a multiple-choice question asking respondents to select which food is the worst for their cholesterol, only 9% correctly identify a cup of ice cream as being the worst – versus 65% who incorrectly believe a medium French fry is the worst, 16% who select a 3oz. filet mignon, and 10% who believe a scrambled egg is the worst.

### *Red Flags/Risk Factors*

Though not counted toward the quiz portion, the study also included a question featuring several red flags/risk factors for heart disease (all of which are true) and asked respondents to identify which ones were real. Eight in ten (80%) recognize weight gain as a potential red flag for heart disease, while roughly two thirds are also aware that ankle swelling (69%) and sleep apnea (66%) can also be a sign of heart disease. Periodontal disease (47%), rotating shift work (44%), asthma (34%), erectile dysfunction (32%), rheumatoid arthritis (23%), and yellow bumps on the skin fall onto a secondary tier, with at least one in five correctly identifying these as potential risk factors for heart disease, while fewer recognize that an ear lobe crease (17%), polycystic ovaries (17%), psoriasis (12%), and male pattern baldness (11%) can be indicative of heart disease.

### **Lifestyle**

The majority (53%) of adults surveyed say that they are doing everything they can to prevent heart disease (e.g., healthy diet, regular exercise) and another 53% agree that they do not see themselves as being at high risk for heart disease.

- Men and those who neither have a family history of heart disease or spouse/partner with heart disease are significantly more likely to agree that they are doing everything they can to prevent heart disease and to not see themselves as being high risk for heart disease compared to women and those with a family history of heart disease.

However, 70% admit that they could do a better job of exercising regularly – compared to only 25% who say they are doing a good job of this – and another six in ten (60%) believe that they could be doing a better job of maintaining a healthy weight (versus 34% who feel they are doing a good job of this). In fact, just over two in five say that they have been told they are overweight/obese by their primary care doctor (41%). The [American Heart Association](#) recommends that adults participate in moderate-intensity activity at least 150 minutes per week or vigorous activity for 75 minutes per week to maintain good health. On average, Americans report participating in moderate physical activity for at least 30 minutes only 2.5 times per week – or about 75 minutes. This includes 27% who say they don't ever do this. Participation in vigorous physical activity for at least 20 minutes is even more scarce, with Americans saying they do this an average of 1.3 times per week (or 26 minutes). Here, more than half (53%) say that they do not participate in any vigorous physical activity at all.

Address: 2020 K Street NW, Suite 410  
Washington, DC 20006  
Tel: +1 202 463-7300

Contact: **Chris Jackson**  
*Vice President, U.S., Ipsos Public Affairs*  
Email: [chris.jackson@ipsos.com](mailto:chris.jackson@ipsos.com)  
Tel: +1 202 420-2025



## Research Findings

- Women, those with no college degree, those who have never been diagnosed with heart disease/had a heart attack/stroke, and those with no family history/spouse/partner with heart disease are among the most likely to admit they could be doing a better job of both exercising and maintaining a healthy weight compared to their respective demographic counterparts.

Two thirds (66%) also admit they could do a better job of eating a healthy, well-balanced diet, compared to 30% who feel they are doing a good job of this and only 4% who don't feel the need to do this. Looking at what Americans typically consume on daily basis (once a day or more than once a day) over the course of a month, 53% say that they eat vegetables and another 43% report eating fruit. However, one in four also report eating desserts/sweets (24%), white bread/rolls/pasta (23%), or drinking regular soft drinks/pop/soda (24%) at least once a day, if not multiple times a day. Nearly one in ten (8%) also admit to eating fast food from a restaurant or store (e.g., hamburgers, pizza, etc.) once a day or more. When it comes to meat, Americans are just as likely to eat chicken/poultry (17%) daily as they are to eat red meat (15%), while another 12% say they eat processed meats (e.g., sausage, hot dogs, deli meat) at least once a day. Only 6%, in comparison, report eating fish daily.

Americans practice better lifestyle habits when it comes to minimizing alcohol consumption, with most Americans saying that they are currently doing a good job of this (60%), compared to 24% who feel they could do a better job and 16% who don't feel the need to do this. More than one in ten (13%) report drinking alcoholic beverages about once a day/more than once a day. Most Americans also report that they are doing a good job of avoiding tobacco smoke (65%) though a quarter admit that they could be doing a better job of this (23% vs. 13% who don't feel the need to do this).

- Nearly three in ten say that they use tobacco products inside their home on occasion (28%), including 23% who do so on a daily or weekly basis. Men (37%), adults under the age of 35 (44%), those with no college degree (32%), those who have been diagnosed with heart disease (53%), those who have had a heart attack (68%), and those who have had a stroke (73%) are especially likely to report using tobacco inside their home.
- Similar proportions (31%) report being exposed to second hand smoke, including 27% who report that someone in their household uses tobacco products inside their home on a daily/weekly basis.

Six in ten (61%) say that they are doing a good job of going to regular/annual doctor visits (vs. 33% who say they could do a better job of this and 6% who don't feel the need to do this), though fewer report doing a good job when it comes to getting all the recommended screening tests for timely disease detection (40% vs. 51% who say they could do better here).

Less than half of those surveyed believe that they are doing a good job of taking time off work/vacationing (45% vs. 41% could do a better job and 14% don't feel the need to do this), getting the recommended amount of sleep most nights (44% vs. 50% could do a better job), and managing/reducing stress (34% vs. 59% who could do a better job of this).

### Health Demographics

Nearly two thirds of adults say that they are aware of their current risk level for heart disease (64%) though fewer consider themselves well-informed when it comes to the best screening methods for heart disease (49%). Just over half (51%) say that they have received clear direction from their primary care doctor on how to prevent or manage heart disease and 42% have asked their primary care doctor for help or advice on how to prevent or manage heart disease.

Address: 2020 K Street NW, Suite 410  
Washington, DC 20006  
Tel: +1 202 463-7300

Contact: **Chris Jackson**  
*Vice President, U.S., Ipsos Public Affairs*  
Email: [chris.jackson@ipsos.com](mailto:chris.jackson@ipsos.com)  
Tel: +1 202 420-2025



## Research Findings

- Compared to women, men are much more likely to say they are aware of their current risk for heart disease (70% vs. 60%) and consider themselves well-informed when it comes to screening methods (56% vs. 43%). They are also much more likely to have received direction on how to prevent or manage heart disease from their physician (60% vs. 43%) and have asked their doctor for help or advice (53% vs. 31%).
- Those who have been diagnosed with heart disease/have had a heart attack/stroke, those with a family history of heart disease, and those with a spouse/partner with heart disease are also significantly more likely to agree with all four statements above.

Another two in five (42%) say that their primary care doctor coached them on specific lifestyle habits (e.g., diet, exercise, meditation) that can help them prevent or manage heart disease, particularly men (46%), adults over the age of 55 (49%), those living in the South (46%), those who have been diagnosed with heart disease (70%), have had a heart attack (65%), have a family history of heart disease (54%), and those with a spouse/partner with heart disease (61%).

The most common screening procedures undergone include having their blood pressure (74%) and cholesterol levels (54%) checked, with a majority saying that they have had these checked by a primary care doctor in the past year. Only about one in ten have never had these checked by a doctor before (9% and 15%, respectively).

Two in five (39%) say that a primary care doctor has checked their hemoglobin A1c within the past year, though nearly as many say that they have never experienced this type of testing (34%). Whereas a quarter have had a glucose tolerance test (24%) or electrocardiogram (ECG or EKG) (24%) within the past year, respondents are more likely to have experienced this type of testing more than a year ago (26% and 39%, respectively) or never (39% and 31%).

Items least likely to have been checked by a primary care doctor include genetic testing for inherited heart disease risk (72%), ankle-brachial index test (70%), carotid ultrasound or CIMT test (66%), heart CT scan/coronary calcium score (64%), inflammatory markers (54%), and cardiac stress tests (53%) where the majority of respondents say that they have never had these checked/ordered before. Roughly one in ten, however, say that they have been ordered these tests by a primary care physician in the past year – especially inflammatory marker blood tests (14%).

Roughly a third of those surveyed say that they have been told they have hypertension/high blood pressure (33%) and/or high cholesterol (31%) by their doctor. Another one in five say that their primary care physician has told them they are pre-diabetic or have Type 2 diabetes or insulin resistance (20%) and/or that they are at high risk for heart disease (18%). Nearly one in ten have been told that they have high levels of inflammation in their arteries (8%).

- Men are significantly more likely to say that a physician has told them they have hypertension (39% vs. 28% of women), high cholesterol (36% vs. 26%), high levels of inflammation in their arteries (12% vs. 3%), and are high risk for heart disease (23% vs. 13%). Older adults mirror these trends – though a greater proportion of those age 18-34 have been told that they have high levels of inflammation in their arteries (15% vs. 4% of those age 55+).
- Being told they have hypertension, high cholesterol, high levels of inflammation in their arteries, and are at high risk for heart disease is also much more common among those who have been diagnosed with heart disease, have a spouse/partner with heart disease, a family history of heart disease, and those who have had a heart attack in the past.

Address: 2020 K Street NW, Suite 410  
Washington, DC 20006  
Tel: +1 202 463-7300

Contact: **Chris Jackson**  
*Vice President, U.S., Ipsos Public Affairs*  
Email: [chris.jackson@ipsos.com](mailto:chris.jackson@ipsos.com)  
Tel: +1 202 420-2025



## Research Findings

When it comes to actions currently being taken to prevent or treat heart disease, taking blood pressure medications (28%) and cholesterol medications (24%) are among the most common – though just as many report currently taking supplements (27%) and/or baby aspirin (24%) for these reasons. At least one in five are seeing a cardiologist (15%) or taking diabetes medication (10%). Two in five are not currently taking any of these actions to prevent or treat heart disease (40%), and this is most common among women (45% vs. 35% of men), adults under the age of 35 (64% vs. 14% of those age 55+), those who are not married (45% vs. 35% of married adults), non-Caucasian respondents (49% vs. 37% of Caucasians), and those who have never been diagnosed with heart disease/heart attack/stroke (44% vs. 3% of those who have heart disease/have experience a heart attack/stroke).

### About the Study

These are the findings from an Ipsos poll conducted November 15 - 16, 2018 on behalf of MDVIP. For the survey, a sample of 1,006 adults ages 18 and over from the continental U.S., Alaska and Hawaii was interviewed online, in English. The precision of Ipsos online polls is measured using a credibility interval. In this case, the poll has a credibility interval of  $\pm 3.5$  percentage points for all respondents.

The sample for this study was randomly drawn from Ipsos's online panel (see link below for more info on "Access Panels and Recruitment"), partner online panel sources, and "river" sampling (see link below for more info on the Ipsos "Ampario Overview" sample method) and does not rely on a population frame in the traditional sense. Ipsos uses fixed sample targets, unique to each study, in drawing sample. After a sample has been obtained from the Ipsos panel, Ipsos calibrates respondent characteristics to be representative of the U.S. Population using standard procedures such as raking-ratio adjustments. The source of these population targets is U.S. Census 2016 American Community Survey data. The sample drawn for this study reflects fixed sample targets on demographics. Post-hoc weights were made to the population characteristics on gender, age, region, race/ethnicity and income.

Statistical margins of error are not applicable to online nonprobability sampling polls. All sample surveys and polls may be subject to other sources of error, including, but not limited to coverage error and measurement error. Where figures do not sum to 100, this is due to the effects of rounding. Ipsos calculates a design effect (DEFF) for each study based on the variation of the weights, following the formula of Kish (1965). This study had a credibility interval adjusted for design effect of the following ( $n=1,006$ ,  $DEFF=1.5$ , adjusted Confidence Interval=5.0).

For more information about conducting research intended for public release or Ipsos' online polling methodology, please visit our [Public Opinion Polling and Communication](#) page where you can download our brochure, see our public release protocol, or contact us.

### For more information on this news release, please contact:

Chris Jackson  
Vice President, U.S.  
Ipsos Public Affairs  
+1 202 420-2025  
[chris.jackson@ipsos.com](mailto:chris.jackson@ipsos.com)

Address: 2020 K Street NW, Suite 410  
Washington, DC 20006  
Tel: +1 202 463-7300

Contact: **Chris Jackson**  
*Vice President, U.S., Ipsos Public Affairs*  
Email: [chris.jackson@ipsos.com](mailto:chris.jackson@ipsos.com)  
Tel: +1 202 420-2025



## Research Findings

Marie-Pierre Lemay  
Senior Account Manager, U.S.  
Ipsos Public Affairs  
+1 613 793-1622  
[marie.lemay@ipsos.com](mailto:marie.lemay@ipsos.com)

### About Ipsos

Ipsos is an independent market research company controlled and managed by research professionals. Founded in France in 1975, Ipsos has grown into a worldwide research group with a strong presence in all key markets. Ipsos ranks fourth in the global research industry.

With offices in 89 countries, Ipsos delivers insightful expertise across five research specializations: brand, advertising and media; customer loyalty; marketing; public affairs research; and survey management.

Ipsos researchers assess market potential and interpret market trends. They develop and build brands. They help clients build long-term relationships with their customers. They test advertising and study audience responses to various media and they measure public opinion around the globe.

Ipsos has been listed on the Paris Stock Exchange since 1999 and generated global revenues of €1,780.5 million in 2017.

#### GAME CHANGERS

« Game Changers » is the Ipsos signature.

At Ipsos we are passionately curious about people, markets, brands and society.  
We make our changing world easier and faster to navigate and inspire clients to make smarter decisions.  
We deliver with security, speed, simplicity and substance. We are Game Changers.

Ipsos is listed on Euronext Paris.  
The company is part of the CAC Mid & Small index  
and is eligible for the Deferred Settlement Service (SRD).

*ISIN code FR0000073298, Reuters ISOS.PA, Bloomberg IPS:FP*  
[www.ipsos.com](http://www.ipsos.com)

Address: 2020 K Street NW, Suite 410  
Washington, DC 20006  
Tel: +1 202 463-7300

Contact: **Chris Jackson**  
*Vice President, U.S., Ipsos Public Affairs*  
Email: [chris.jackson@ipsos.com](mailto:chris.jackson@ipsos.com)  
Tel: +1 202 420-2025



## Research Findings

Address: 2020 K Street NW, Suite 410  
Washington, DC 20006  
Tel: +1 202 463-7300

Contact: **Chris Jackson**  
*Vice President, U.S., Ipsos Public Affairs*  
Email: [chris.jackson@ipsos.com](mailto:chris.jackson@ipsos.com)  
Tel: +1 202 420-2025