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PP.16.14: RISK FACTORS MODIFICATION IN VERY-HIGH RISK PATIENTS WITH ARTERIAL HYPERTENSION IN UKRAINE AND EU COUNTRIES BY EUROASPIRE IV. RESULTS COMPARISON.

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____ Abstract

Objective: Objective of the study was to evaluate the risk factors prevalence in veryhigh cardio-vascular risk patients and their modification in Ukraine compared to EU countries.

Design and method: We examined 643 patients after acute coronary event or revascularization procedure (index event) as a part of EUROASPIRE IV cohort. Risk factors were assessed and their modification analysis in all hypertensive patients was performed.

Results: Groups in Ukraine and Europe were comparable by age (64 +/- 6,3 vs. $63,5 \pm 0.05$ and gender (26,75% vs. 25% women, p = 0.33). By index event date 527 patients (82,0%) had arterial hypertension (AH): 29 patients (6,37%) with grade I, 300 (65,93%) - grade II and 126 (27,69%) - grade III. 38% of patients in Ukraine and 37,6% in Europe were obese (p = 0,84). The prevalence of central obesity was significantly lower in Ukraine (51% vs. 58,2%, respectively, p = 0,004). Within one month prior to index event 47% of patients did smoke in Ukraine, and 48,6% did in EU countries (p = 0,43). Among Ukrainian patients 42%, continuing smoking after index event, reported their unwilling to guit smoking. According to IPAQ questionnaire low levels of physical activity were noted in 64%, moderate - in 12% and high - in 24% of patients in Ukraine. In EU countries corresponding values constituted 62%, 13,5% and 24,5%, respectively. Conclusions: 1. Obesity prevalence in Ukraine is similar to EU (38% vs. 37,6%, respectively) with significantly lower prevalence of namely central obesity (51% vs. 58,2%, respectively). 2. Prevalence of smoking prior to index event was similar in Ukraine and Europe. 42% of patients, having smoked after the index event reported their intention continue on, which could be explained by insufficient counseling smoking harms and risks. 3. Low overall levels of physical activity, observed in Ukraine (64%), as well as in EU countries (62%), could be one of the main factors impairing inadequate BP target level achievement.