Prevention

What people really know about hypertension and other cardiovascular disease risk factors. Recommendations vs reality

Wierzowiecka M.[1]; Niklas A.[1]; Drygas W.[2]; Pajak A.[3]; Zdrojewski T.[4]; Bielecki W.[5]; Kozakiewicz K.[6]; Marcinkowska J.[7]; Tykarski A.[1]

[1]Poznan University of Medical Sciences, Department of Hypertension, Angiology and Internal Disease, Poznan, Poland
[2]National Institute of Cardiology, Department of Epidemiology, Cardiovascular Disease Prevention and Health Promotion, Warsaw, Poland
[3]Jagiellonian University, Department of Epidemiology and Population Studies, Institute of Public Health, Krakow, Poland
[4]Medical University of Gdansk, Department of Arterial Hypertension and Diabetology, Gdansk, Poland
[5]Medical University of Lodz, Department of Social Pathologies, Lodz, Poland
[6]University of Silesia, 3rd Department of Cardiology, Katowice, Poland
[7]Poznan University of Medical Sciences, Department of Computer Science and Statistics, Poznan, Poland

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Cyclically, new guidelines are developed to prevent cardiovascular diseases (CVD). But unfortunately their implementation in clinical practice is poor.

The aim of the study was: 1) to evaluate the awareness of CVD prevention principles in a representative sample of adult residents of Poland with diagnosed hypertension (HT); 2) to investigate the prevalence of modifiable CVD risk factors such as obesity, hyperlipemia, smoking, low physical activity, excessive intake of sodium, insufficient fruit and vegetable consumption in the daily diet, and to determine the extent to which recommendations for CVD prevention are implemented in everyday practice; 3) to evaluate how knowledge of CVD risk factors affects the control of HT.

The study covered 2783 individuals with diagnosed HT. 72,2% knew the term ‘risk factor’. Spontaneously listed risk factors for CVD: HT 36,8%, smoking 43,3%, overweight and obesity 28,5%, unhealthy food 30,9%, increased cholesterol level 25,3%, and low physical activity 25,1%.

Complications that can be caused by untreated HT, were listed by 72,6% to be a stroke, heart diseases by 57,8%, atherosclerotic lesions in the arteries by 17,7%, kidney disease by 9,5%, and vision disorder by 9,2%.

Prevention methods other than medication were listed by: more physical activity 38,8%, reduction of body weight in overweight people 45,5%, stop smoking 43,7%, conducting a regular lifestyle 42,1%, limiting fat intake 38,3%, restrictions on drinking alcohol 37,5%, daily consumption of vegetables and fruits 20,6%. No prevention method has been mentioned by 10,5% of patients.

73.2% declared knowledge of the upper limits of the correct blood pressure (BP), but only 10.2% gave the correct values. Overweight was found in 39% of patients, obesity in 36.7%, smoking in 21.3%, low physical activity (<30 min 4-7/week) in 33.4%, sodium intake >1.5g/day in 58.0%, low (<200g/day) consumption of fruits in 84.1%, and vegetables in 70.6%. Controlled BP was only found in 23% and controlled hyperlipidemia only in 11.2% of subjects.

During medical visits, about 9.2% of patients did not receive any recommendations for pharmacological treatment even if their BP did not reach the therapeutic goal. Knowledge about CVD risk factors [hypercholesterolemia OR 1,63; HT 1,53; low physical activity 1,24, overweight and obesity 1,23, knowledge about complications of HT [stroke or cerebral ischemia 1,77, heart disease 1,52, nephropathy 1,51, atherosclerosis 1,48, retinopathy 1,38, knowledge about non-pharmacological treatment like regular consumption of vegetables and fruits 1,33 increases the chance of achieving BP control.

The knowledge about CVD risk factors and possible complications of HT in patients with HT is low. Factors that have a significant impact on a BP control are: knowledge of CVD risk factors, possible complications of HT and the recommendations given during visits about increasing physical activity and a healthy diet, as well as home and office BP measurements.