ACC.17™

1835
JACC March 21, 2017
Volume 69, Issue 11

Prevention

CARDIOVASCULAR RISK REDUCTION COMMUNITY BASED APPROACH

Poster Contributions
Poster Hall, Hall C
Saturday, March 18, 2017, 3:45 p.m.-4:30 p.m.

Session Title: Innovations in Cardiovascular Risk Assessment and Reduction
Abstract Category: 32. Prevention: Clinical
Presentation Number: 1235-068

Authors: *Sanjib Kumar Sharma, Anup Ghimire, Bhawesh Koirala, Samyog Uprety, B. P. Koirala Institute of Health Sciences, Dharan, Nepal*

Background: Due to lack of resources, treatment options for cardiovascular disease is limited in Nepal. A community based volunteer program may help early detection and management of cardiovascular risk factors leading to reduction in cardiovascular disease burden.

Methods: A network of primary health care center or equivalent and tertiary care center along with community-based volunteer program was created to educate, screen and intervene for hypertension, diabetes, cardiovascular risk factors and chronic kidney disease. The subjects were closely monitored by community volunteers to pursue follow-up and adherence to prescribed treatment. Predicted cardiovascular risk reduction was calculated at the end of 3 years of follow up.

Results: A total of 25000 population residing in 4 district of Nepal were screen. Mean age of screened population was 39.5years. Hypertension, obesity, diabetes and smoking was found in 22%, 5.3%, 8.4%, and 23% respectively. Metabolic syndrome was 20.7% (NCEP definition). 40% of hypertensive and 48% of diabetics patients were newly detected during the screening. Two or more cardiovascular risk factors were present in 29.6% of the screened population. 4100 subjects positive at screening entered an intervention program by combining lifestyle modifications and pharmacological management with cheap drugs. Three years follow up was reached by 3240 participants. Glycemic (HbA1c <7%) and blood pressure control (<140/90 mmHg) was achieved in 63% and 73%, respectively. The prevalence of participants with a predicted 10 year cardiovascular risk of 10% or more was 28% at baseline and decreased to 17% after 3 years.

Conclusions: Community based volunteer program helped to reduced cardiovascular risk in resource limited set up