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Lifestyle habits in patients with established cardiovascular diseases - EUROPREV III study

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Background & Aim: CVD is now the leading cause of death worldwide; it is on the rise and has become a true pandemic that respects no borders. CVD is strongly connected to lifestyle, especially the use of tobacco, unhealthy diet habits, physical inactivity and psychosocial stress. European guidelines advocate that prevention for patients who have had a clinical event such as an acute coronary syndrome or stroke automatically qualify for intensive risk factor evaluation and management and should include the adoption of a healthier diet and increasing physical activity (PA). As noted, persons with established CVD are already at very high risk of further events and need prompt intervention on all risk factors. The five year CVD rate of recurrent MI, stroke or heart failure or CV death, is estimated to be about 30% for patients with known CV disease, which is about 5 times greater than the corresponding rate of healthy people.

Method:

- a. presentation of EUROPREV III Study
- b. explanation of nonpharmacological and pharmacological interventions after CVD event
- c. discussion
- d. conclusion

Results: The protocol of EUROPREV III Study will be presented. Conclusions: Beneficial reductions in major risk factors—in particular smoking, BP, and cholesterol—accounted for more than half of the decrease in CHD deaths, although they were counteracted by an increase in the prevalence of obesity and type 2 diabetes. The potential for prevention based on healthy lifestyles, appropriate management of classical risk factors, and selective use of cardio protective drugs is obvious.