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Cardiovascular Disease: Analyzing Primary and Secondary Prevention Strategies

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Cardiovascular Disease: Analyzing Primary and Secondary Prevention Strategies

Cardiovascular disease (CVD) is the single most common cause of death around the world, with an increasing number of people living with coronary heart disease (CHD) (Anderson et al., 2016). Smoking and tobacco use are major risk factors for CVD and are the leading preventable causes of death globally. The chance of developing CVD is reversible and the elimination of tobacco use after a heart attack can reduce an individual's risk of CVD mortality by 36% over two years (Rigotti & Clari, 2013). Smoking cessation is the central element of primary and secondary prevention strategies. Primary interventions can include aspirin and statin therapy, while secondary preventions include, but are not limited to, exercise-based rehabilitation and psychosocial interventions. The purpose of this project is to determine whether primary or secondary interventions are more effective in reducing the risk of developing CVD. To answer the clinical question, a thorough review of the literature was organized in the databases, Cochrane Library, National Guideline Clearinghouse, CINAHL, and PubMed Clinical Queries. The search yielded relevant sources of evidence which met the inclusion and exclusion criteria. Evidence included systematic reviews and randomized control trials. The findings regarding the best interventions to reduce the risk of cardiovascular disease will be presented. These findings will assist healthcare providers in implementing the best quality of care to their patients.

Key words

- 1 Cardiovascular Disease
- 2 Smoking/tobacco use
- 3 Smoking cessation
- 4 Primary prevention
- 5 Secondary prevention
- 6 Aspirin
- 7 Statin therapy
- 8 Exercise-based rehabilitation
- 9 Psychosocial interventions

*Tabletop Poster has not yet been completed.