SHORT-TERM (10-YEAR) AND LIFETIME PREDICTED RISK FOR CARDIOVASCULAR DISEASE: THE CRONICAS COHORT STUDY.

Poster Contributions
Hall C
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Session Title: Prevention: Familial Hypercholesterolemia, Novel Therapies and Cardiovascular Risk
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Background: Short-term (ST) cardiovascular diseases (CVD) risk assessment has been extensively used in asymptomatic subjects. However, individuals with relatively low ST predicted risk become high-risk during their lifetime (LT).

Methods: Baseline data from disease-free individuals aged 30-79 years enrolled in the CRONICAS Cohort Study was used to estimate ST CHD and LT predicted CVD risk. Subjects were classified into three categories: low ST (<10%)/low LT risk, low ST/high LT risk, and high ST risk (≥10% risk in 10-year or diabetes). Differences between groups of ST and LT risk were explored by geographical location and wealth index.

Results Data from 2,976 Peruvian adults (mean age 54.5±10.2 years, 48.6% male) was included in the analysis. 643 individuals were excluded due to missing values. The prevalence of high ST risk was 32.7% (95%CI 31.0%-34.4%). >50% of low ST risk patients had a high LT risk (53.5%, 95%CI 51.3%-55.7%). Overall, individuals with all optimal risk factors (RF) were 15.4%, but it was higher in rural areas (20.5%, 95%CI 18.4%-22.7%) and in middle wealth tertile (21.1%, 95%CI 18.5%-23.9%).

Conclusions: In this cohort study, about one third of subjects had a high ST risk, and nearly half of subjects with apparently low ST risk had a high LT risk. These findings emphasize the underestimation of CVD risk projections using ST tools in populations from LMIC.