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Prevention

THE IMPACT OF SOCIOECONOMIC STATUS ON CORONARY DISEASE STATUS AND LIPID LOWERING IN THE SETTING OF SECONDARY PREVENTION: A POPULATION-BASED STUDY OF OLDER ADULTS

Poster Contributions

Poster Sessions, Expo North

Saturday, March 09, 2013, 3:45 p.m.-4:30 p.m.

Session Title: Prevention: Risk Factors, from Tooth Loss to Resistin

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Background: There are inconsistent findings from studies that have investigated the effect of socioeconomic factors on coronary disease status and the adequacy of secondary preventative therapy. In this population-based study of older adults, we evaluated whether socioeconomic status affects the prevalence of coronary disease and influences the efficacy of lipid lowering in the setting of secondary prevention for cardiovascular disease.

Methods: In a cohort of randomly selected adults of age 60-85 years (75% response rate), education levels; occupation history; past medical history; and the use of current medications were assessed using a self-administered questionnaire. Coronary artery disease status was validated by a review of medical records. Lipid levels were measured on a fasting blood test.

Results: Of the 1275 participants (69.4±6.5years, 50.1% women), 1250 (98%) provided information regarding occupation history, and 1263 (99.1%) provided details regarding their education levels. There was a stepwise increase in coronary disease rates with lower levels of education. Individuals who did not complete primary school had almost 5-times the rate of coronary disease compared to those with a postgraduate qualification (OR 4.61; 95% CI: 1.34-15.9, P = 0.015). Skilled labourers were more likely to have coronary artery disease compared to professionals (OR 1.52; 95%CI: 1.00-2.29, P = 0.049), and were almost 70% less likely to achieve target LDL-C levels in the setting of secondary prevention (OR 0.29; 95% CI: 0.08-1.09, P = 0.067).

Conclusions: In this population-based sample, socioeconomic factors were not only related to the prevalence of coronary artery disease but also influenced the efficacy of lipid lowering for secondary prevention of cardiovascular disease. Our results highlight the importance of education for the improvement of global cardiovascular health of the population.