Has anything changed in the management of CD?

Prof Eoin O’Brien writes that the results from the EUROASPIRE surveys show a continuing gap between the standards set in cardiovascular disease prevention guidelines and the reality of clinical practice.

The first EUROASPIRE (European Action on Secondary and Primary Prevention by Intervention to Reduce Event) survey was carried out in 1999–96 in nine European countries, the second in 1999–2001 in five European countries (of which Ireland was one) and the third in 2005–07 in 22 countries, including eight countries that participated in EUROASPIRE I and II.6,7

The first and second EUROASPIRE surveys showed high rates of modifiable cardiovascular risk factors in patients with coronary heart disease. The third EUROASPIRE survey was to show if preventive cardiology had improved and if the Joint European Societies’ recommendations on cardiovascular disease (CD) prevention were being followed in clinical practice.8

Has anything changed?

The short answer must be—yes, but for the worse! About one fifth of patients continued to smoke, with no reduction over the 12 years, but the proportion of women smokers aged less than 50 years had increased. Furthermore, there was a substantial rise in obesity and diabetes mellitus— in the latest survey, almost 40 per cent of patients were obese (with a body-mass index of 30kg/m2 or higher) and close to 30 per cent reported diabetes mellitus.

The only good news was a reduction in the proportion of patients with raised total cholesterol (245mmol/l), with a fall from 95 per cent in EUROASPIRE I to 60 per cent in the latest survey, but even for a substantial increase in the prescribing of lipid-lowering drugs, almost half of all patients remained on lipid-lowering drugs, almost 40 per cent with coronary heart disease.

As I have pointed out repeatedly, if (as conservative estimates show) white-coat hypertension is present in 20 per cent of the population when BP is measured conventionally in primary care, and masked hypertension is present in so per cent of patients whose BP is measured in similar circumstances, it follows that hypertension is being misdiagnosed in as many as a third of all patients attending for routine BP measurements.9

Are we better or worse?

In 1999, 95 per cent of the Irish population attending for routine BP measurement (ABPM) were being followed in clinical practice.