



ORIGINAL ARTICLE

Association between cardiovascular disease and socioeconomic level in Portugal[☆]



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Abstract

Introduction: Cardiovascular disease is the leading cause of morbidity, mortality and disability in Portugal. Socioeconomic level is known to influence health status but there is scant evidence on socioeconomic inequalities in cardiovascular disease in Portugal.

Aim: To analyze the distribution of cardiovascular disease in the Portuguese population according to socioeconomic status.

Methods: We conducted a cross-sectional study using data from the fourth National Health Survey on a representative sample of the Portuguese population. Socioeconomic inequalities in cardiovascular disease, risk factors and number of medical visits were analyzed using odds ratios according to socioeconomic status (household equivalent income) in the adult population (35–74 years). Comparisons focused on the top and bottom 50% and 10% of household income distribution.

Results: Of the 21 807 individuals included, 53.3% were female, and mean age was 54±11 years. Cardiovascular disease, stroke, ischemic heart disease, hypertension, diabetes, obesity and physical inactivity were associated with lower socioeconomic status, while smoking was associated with higher status; number of medical visits and psychological distress showed no association. When present, inequality was greater at the extremes of income distribution.

Conclusions: The results reveal an association between morbidity, lifestyle and socioeconomic status. They also suggest that besides improved access to effective medical intervention, there is a need for a comprehensive strategy for health promotion and disease prevention that takes account of individual, cultural and socioeconomic characteristics.

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PALAVRAS-CHAVE

Fatores
socioeconômicos;
Desigualdades;
Doenças
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Odds Ratio

Associação entre as doenças cardiovasculares e o nível socioeconômico em Portugal**Resumo**

Introdução: Em Portugal, as doenças cardiovasculares são a principal causa de morbimortalidade e invalidez. Sabe-se que o nível socioeconômico influencia o estado de saúde, todavia, são escassas as evidências sobre as desigualdades socioeconômicas nas doenças cardiovasculares em Portugal.

Objetivo: Analisar a distribuição das doenças cardiovasculares de acordo com o nível socioeconômico da população portuguesa.

Métodos: Foi realizado um estudo transversal usando a base de dados do 4.º Inquérito Nacional de Saúde (inquérito representativo da população portuguesa). As desigualdades socioeconômicas nas doenças cardiovasculares, fatores de risco e número de consultas médicas foram analisadas através dos *odds ratios* por nível socioeconômico (rendimento familiar equivalente) na população adulta (35-74 anos). As comparações incidiram sobre os 50 e 10% das famílias mais ricas e mais pobres.

Resultados: Dos 21.807 indivíduos, 53,3% são do sexo feminino e a idade média é de 54 ± 11 anos. As doenças cardiovasculares, acidente vascular cerebral, doença cardíaca isquêmica, hipertensão arterial, diabetes *mellitus*, obesidade e sedentarismo estão associados aos níveis socioeconômicos mais baixos; o tabagismo está associado aos níveis mais elevados; enquanto o número de consultas médicas e sofrimento psicológico não apresentam associação. Nos casos em que existe desigualdade ela é significativamente maior quando se consideram os extremos da distribuição do rendimento familiar.

Conclusões: Os resultados revelam a associação entre morbilidade, estilos de vida e nível socioeconômico e sugerem que, para além de intervenções médicas eficazes, são necessárias políticas de saúde mais abrangentes de acordo com as características individuais, culturais e socioeconômicas da população, dirigidas à promoção da saúde e prevenção da doença.

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List of abbreviations

BMI	body mass index
CVD	cardiovascular disease
CVRF	cardiovascular risk factor
DM	diabetes mellitus
HTN	hypertension
ICD	International Classification of Diseases
IHD	ischemic heart disease
MHI	Mental Health Inventory
NHS	National Health Survey
NIH	National Institute of Health
OECD	Organization for Economic Cooperation and Development
OR	odds ratio
SES	socioeconomic status
WHO	World Health Organization

Introduction

Portugal has seen significant improvements in the health status of its citizens over the last 25 years. Since 1980, when the country had some the worst health indicators in Europe, there has been continuous improvement, closing the gap in relation to other countries. Indicators that have improved include perinatal and infant mortality, mean

life expectancy at birth, potential years of life lost before age 65 and mortality before age 65 from the most common causes, including ischemic heart disease (IHD), stroke and motor vehicle accidents.¹

Cardiovascular disease (CVD) is among the principal causes of morbidity, mortality and disability in Portugal, particularly stroke and IHD, which are the third and fourth cause of potential years of life lost and the leading cause of death in Portugal in both sexes.² The increasing societal burden of these diseases has social, economic and cultural impacts and highlights the need for health promotion and disease prevention strategies that take account of different populational characteristics, such as gender, ethnicity and socioeconomic status (SES).²

The etiology of CVD is atherosclerotic in most cases. Various cardiovascular risk factors (CVRFs), both modifiable (including hypertension [HTN], diabetes mellitus [DM], hypercholesterolemia, dyslipidemia, obesity, smoking, physical inactivity, diet, alcohol abuse and stress) and non-modifiable (gender, age, and personal and family history), contribute to its onset, clinical course, complications and prognosis. It is estimated that 75% of cases of CVD can be attributed to modifiable CVRFs and are thus preventable, treatable and/or controllable.³

The 2004–2010 and 2012–2016 Portuguese National Health Plans^{2,4} established various priorities, including CVD prevention, treatment and rehabilitation and promotion of healthy lifestyles, as well as equality in health care.

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