



POSITION STATEMENT

Cerebrovascular mortality in Portugal: Are we overemphasizing hypertension and neglecting atrial fibrillation?

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Abstract

Cerebrovascular disease has long been the leading cause of death in Portugal. Despite improvements in the treatment of hypertension and the resulting decrease in associated mortality, the progressive aging of the population and increased prevalence of atrial fibrillation have prevented the incidence of stroke from falling as much as desired. The authors review the evidence on the situation in Portugal and propose an intervention plan.

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PALAVRAS-CHAVE

Fibrilhação auricular;
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Mortalidade cerebrovascular em Portugal: estaremos a colocar demasiada ênfase na hipertensão e a negligenciar a fibrilhação auricular?

Resumo A insuficiência cardíaca é uma patologia comum e uma causa importante de mortalidade, morbilidade e deterioração da qualidade de vida. A anemia é uma comorbilidade frequente na insuficiência cardíaca e agrava o seu prognóstico e capacidade funcional. Independentemente da presença ou não de anemia, a deficiência de ferro é um problema associado à insuficiência cardíaca muitas vezes não identificado. Este artigo revê os mecanismos, impacto prognóstico e tratamento da anemia e deficiência de ferro.

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Introduction

According to a 2008 report from the Portuguese Directorate-General for Health, diseases of the circulatory system remain the leading cause of death in Portugal,¹ accounting for 32.3% of all deaths. This is almost 40% more than the second cause of death, all forms of cancer, which account for 23.5%. However, unlike other European countries, in which ischemic heart disease is the most common form of cardiovascular disease, in Portugal cerebrovascular disease is more important, accounting for 13.9% of deaths.

For several decades particular attention has been paid to the diagnosis and treatment of hypertension. These efforts have been reasonably successful, with some improvements over time, although the problem is not completely resolved. However, partly as a result of this success, although cerebrovascular disease remains the leading cause of death in Portugal, the pattern of stroke has changed, with atrial fibrillation (AF) now being recognized as a major factor. AF is the most prevalent sustained cardiac arrhythmia,² occurring in up to 25% of individuals aged over 40 some point in their lives, and is associated with a marked increase in the incidence of cerebral and systemic thromboembolism.³ Stroke in patients with AF is also associated with higher mortality (50% at one year)⁴ and is usually more severe and incapacitating.⁵ Recent studies in Portugal show that the rate of diagnosis of AF is clearly unsatisfactory⁶ and that even when diagnosed, patients often do not receive appropriate treatment.⁷

Better understanding of the real situation concerning AF and stroke, together with a concerted effort on the part of the entire medical community – including cardiologists, neurologists, internists and family practitioners, as well as other healthcare workers – is urgently needed to put a halt to this train of events.

Hypertension in Portugal

Changes in diagnosis and control in recent years

The VALSIM study was a cross-sectional epidemiological study of the prevalence of the metabolic syndrome in the Portuguese population, supported by the National Cardiology Data Collection Center of the Portuguese Society of Cardiology, that ran between April 2006 and November 2007. It analyzed 16 856 participants aged over 18 assessed in a primary care setting, involving 719 general practitioners and representing all Portuguese regions. In this study the prevalence of hypertension adjusted for age and gender was 42.62%; with some regional variations in prevalence and treatment, some 10% of hypertensives were not receiving drug treatment (reaching over 50% in individuals aged under 30), and 47.6% were receiving monotherapy only. These figures are well above the European average, which shows that therapeutic inertia is all too common in Portugal.

In the AMALIA study, an epidemiological study assessing cardiovascular risk in Portugal based on direct interviews of 38 893 individuals aged 40 or over, the prevalence of self-reported hypertension was only 23.5%,⁹ considerably lower than in the above study, even though younger

age-groups were excluded. This may be explained by the sampling method (a questionnaire) and by the fact that people are frequently unaware that they have hypertension. In other words, these figures refer only to those individuals who had previously been diagnosed with hypertension and who wished to make this known, while excluding all those who were hypertensive but failed to report the fact or who were unaware of their condition through lack of blood pressure measurement.

The question of awareness of hypertension was analyzed by Pereira et al. in a sample of 2310 Portuguese individuals aged 18 or over randomly selected from the population of the city of Porto in 1999-2003. The prevalence of hypertension was 46.7% in men and 42.7% in women.¹⁰ Only 41.3% of the men and 58.9% of the women were aware of the diagnosis, while only 60.2% of women and 71.7% of men who were aware of their condition were medicated, and of these only 23.0% of women and 22.8% of men were controlled.

The PAP study of prevalence, awareness, treatment and control of hypertension in Portugal in 5023 adults representative of all Portuguese regions assessed between March 2003 and February 2004 showed similar results for prevalence and awareness of hypertension, although with even lower prevalence of treated and controlled hypertension than in Pereira et al. (39.0% and 11.2%, respectively).¹¹

Although the figures are still a cause for concern, developments at national level have been favorable. A recent systematic review shows that the prevalence of hypertension in Portugal fell in middle-aged individuals (from 58.3% to 49.1% in men and from 51.5% to 42.3% in women) and in the elderly (from 96.4% to 74.5% in men and from 89.6% to 67.6% in women) between 1990 and 2005.¹² The prevalence of awareness rose by 0.4% a year during the same period, while mean systolic and diastolic blood pressure decreased between 1975 and 2005, with mean systolic blood pressure in the elderly falling by 22 mmHg in men and by 32 mmHg in women. However, the authors noted that despite these favorable developments, the figures for Portugal were still above the average for countries in western Europe.

The problem of salt

Salt consumption in Portugal is high, as shown by a study by Polónio et al.¹³ that assessed 24-hour urinary sodium excretion while maintaining normal dietary habits in 426 individuals (mean age 50±22 years) in four groups: university students, factory workers, relatives of patients with recent stroke and hypertensives. The estimated daily salt intake was 12.3 g, double that recommended by international organizations,¹⁴ with no significant differences between the groups.

Following the publication of this study, in which the tertile with highest salt consumption also consumed the most bread, a review was undertaken of the salt content in Portuguese bread compared to six other European countries. The mean sodium content was 19.2 g per kg, 53% higher than that of bread in the other countries. A series of measures followed designed to educate the public concerning over-consumption of salt^{15,16} and approaches were made to

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