



Sri Lanka College of Internal Medicine 2019

3rd Annual Academic Sessions

"Fostering Integrated Health Care
Bridging Boundaries"

SIMCon 2019
Proceedings & Abstracts

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Abstract 15

STATIN USE IN PRIMARY PREVENTION OF CARDIOVASCULAR DISEASES AMONG AN URBAN SRI LANKAN COHORT OF PATIENTS WITH CARDIOVASCULAR RISK FACTORS

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Background

Guidelines on statin prescription for primary prevention of cardiovascular diseases (CVD) have changed. However, there is limited data on use of statin in primary prevention among Sri Lankans.

Objectives

We aimed to describe statin use in primary prevention of CVD in relation to 2018 AHA guidelines among an urban Sri Lankan cohort of patients with cardiovascular risk factors

Methods

All patients without previous CVD but having vascular risk factors attending a follow-up medical clinic of a community surveys of urban Sri Lanka were studied from March 2018-2019. Data were collected using an interviewer administered questionnaire. Patients' 10-year CV risk was calculated using WHO/ISH charts (SEAR B). LDL targets were defined as <70 mg/dl - high risk, <100 mg/dl - intermediate risk and <130mg/dl - low risk patients on AACE 2017 Guidelines. Data were analysed using SPSS-version22.

Results

Total of 170 subjects (mean age 66.0 ± 6.70 years) were studied and of them 137(80.6%) were females. 129(75.9%), 26(15.3%), 15(8.8%) were at low, intermediate and high risk of CVD respectively. Prevalence of CV risk factors; diabetes mellitus, hypertension and smoking were 80 (47.1%), 114(67.5%), 4(2.4%) respectively.

152(89.4%) were on statins and 110(72.4%) had LDL controlled to target. 87% (70) of diabetics were on statins and 68% (48) had LDL <100mg/dl and 61%(43) had LDL <70mg/dl. Over 93% (14) high CVD risk patients were on statins but only 7% (1) of them had LDL <70 mg/dl. All patients with LDL>190mg/dl were on statins.

Conclusions

Even though statin prescription in primary prevention is satisfactory, a significant proportion has not met the treatment goals in this Sri Lankan cohort.