16th WONCA EUROPE CONFERENCE

CARDIOVASCULAR RISK IN DIABETIC IMMIGRANTS IDIME STUDY

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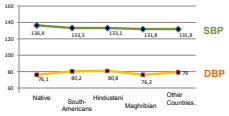
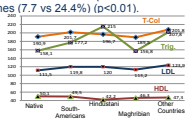
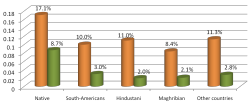
Aim: To study the presence of cardiovascular risk factors and their treatment among the diabetic immigrant population in Spain.

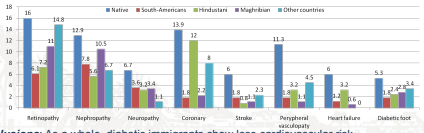
Design & Methods: National cross-sectional case-control study (diabetic immigrants versus native diabetic, a proportion of 2 to 1). Studied variables: sociodemographic, anthropometric, clinical and cardiovascular risk factors. Cardiovascular risk at 10 years was calculated with UKDPS risk engine.



Results: Diabetic immigrants are younger than native (50.4 ±11.5 vs 62.7 ±13 years) with less diabetes evolution years (5.8 ±6.4 vs 10.5 ±8.3 years) (p<0.001). The sample population of smokers contributes to practically an inexistent percentage (0.2%). The diagnosis of hypertension is less prevalent among diabetic immigrants (40% vs 63.2%) (p<0.001). There is no statistical significance considering the prevalence of dyslipidemia between immigrants and natives (86.6 vs 86.5%), although the percentage is slightly higher among hindustani (92%), whom show higher values of triglycerides and use more fibrates (39.4%). Diabetic immigrants use less antiaggregation (21.1 vs 39.5%) (p<0.001). The calculated coronary risk is clearly lower in diabetic immigrants (9.9 vs 17.1%) as well as the risk of stroke (2.5 vs 8.7%) (p<0.001). The prevalence of all complications is fewer in diabetic immigrants, especially the macrovascular ones (7.7 vs 24.4%) (p<0.01).







Conclusions: As a whole, diabetic immigrants show less cardiovascular risk than native diabetic, probably due to less age, less disease evolution time and less prevalence of hypertension.

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