

One Size Doesn't Fit All: Ethnic Difference of CV Risk Example Europe vs Asia

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Abstract

Background: Chronic statin treatment is well established for patients with dyslipidemia and high risk for subsequent cardiovascular events and its use is widespread in clinical practice. Little is known about differences in patient characteristics and target achievements between Europe and China.

Methods: The cross sectional, observational study DYSIS examined lipid goal attainment among statin-treated very high cardiovascular risk (defined as per 2011 EAS/ESC guidelines, including patients suffering from coronary heart disease, diabetes, chronic kidney disease or peripheral atherosclerotic disease) patients in Canada, Europe, Middle East countries and China. Data were collected under real life conditions in physicians' offices and hospital outpatient wards between 2008-2012. We compared the level of LDL-C goal achievement in Europe and China.

Results: Of a total of 57,090 patients, 25,317 were enrolled in China and 31,773 in Europe. There are substantial differences in the prevalence of cardio-vascular risk factors between China and Europe. Chinese patients less often were smokers and less often suffered from obesity, diabetes and hypertension, sedentary lifestyle as compared to European patients, but more often had prior cerebro-vascular events. In both regions, two thirds of patients did not reach the recommended LDL-Chol target <70mg/dl. Chinese patients more often had combined dyslipidemia with low HDL-Chol as well as high triglycerides.

Conclusion: Patients treated with statins for secondary prevention in China have a substantially different cardiovascular risk profile as compared to European patients. Despite statin treatment, two thirds of patients in China and Europe do not reach the recommended LDL-Chol target value of < 70mg/dl in clinical practice.

Keywords

Lipid Lowering Treatment, Statins, Target Achievement, Europe, China