# Cardiovascular risk profiles in a cohort of new diagnosis of type 2 diabetes. Study of the Castilla y León Sentinel Network

A.Tomás Vega Alonso, Milagros Gil Costa, José Eugenio Lozano Alonso, Socorro Fernández Arribas,
Rufino Álamo Sanz, Red de Médicos Centinelas de Castilla y León.
Dirección General de Salud Pública y Consumo. Consejería de Sanidad. Paseo de Zorrilla, 1. 47071 Valladolid. Tel.: 34-9 83 41 37 53.
Fax: 34- 9 83 41 37 45. e-mail: vegaloto@jcyl.es. Web site: http://www.jcyl.es/salud

### INTRODUCTION

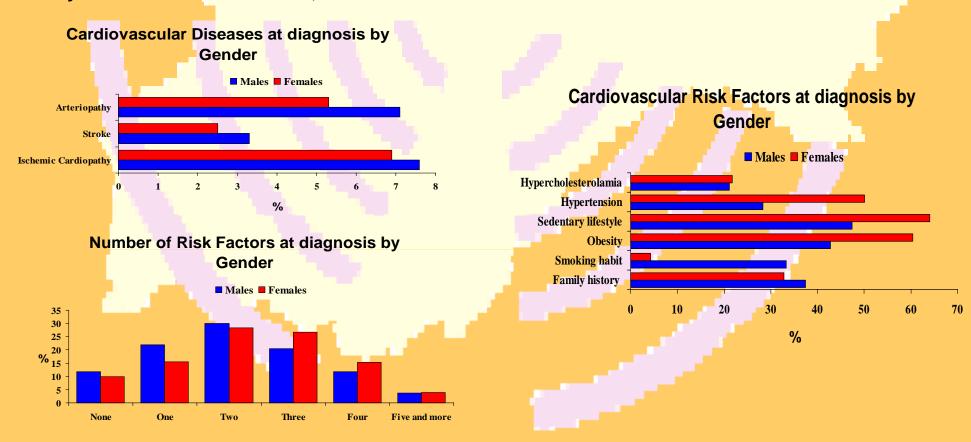
Type 2 diabetes is one of the main health problems in industrialized countries. As a risk factor for cardiovascular diseases, a risk profile of patients at diagnosis is essential in prevention, therapy and prognosis. The objective of this communication is to describe this cardiovascular risk profile in a cohort of new diagnoses of type 2 diabetes in Castilla y León (Spain)

## **METHODS**

From 2000 to 2003, 164 General Practitioners recorded in a standard questionnaire the new diagnoses of diabetes and their associated cardiovascular risk factors in a population of 115,000 people-year. Cases of type 2 diabetes and aged 15 and over were used for this study.

#### RESULTS

The number of cases in the period was 781 (53.9% males and 46,1% females). Among males, 52.8% were diagnosed before age 65. In females, this percentage decreases significantly to 42.6%. More than 50% are casual diagnoses and only 2.6% are discovered because of complications of the disease. Almost 15% of diabetics had some kind of ischemic disease at the moment of diagnosis, 7.3% ischemic cardiopathy, 2.9% stroke and 6.3% arteriopathy. Family history of cardiovascular disease was reported in 35.5% of patients, smoking habit in 19.8%, obesity in 50.8%, sedentary lifestyle in 54.9%. Treatment for hypertension was reported in 38.4% and for hypercholesterolemia in 21.4%. Only 11% of diagnoses had not any cardiovascular risk factor, and 40% had 3 or more.



# **CONCLUSIONS**

Type 2 diabetes is diagnosed when other cardiovascular risk factors are already present in the patients. Obesity, sedentary lifestyle and hypertension have a great prevalence in these patients, mainly in women, whose diagnosis was later than in men. Because of diabetes is a major cardiovascular risk factor, the treatment and control of this disease must take into account the global cardiovascular risk. More specific and accuracy estimates should be performed in order to calculate the risk for cardiovascular events on the basis of age, sex, smoking status and levels of arterial pressure and total cholesterol.