Differences in self-reported prevalence and management of cardiovascular risk factors in Switzerland, 2007

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Purpose: To assess the prevalence of four self-reported cardiovascular risk factors (CV RFs: smoking, hypertension, dyslipidaemia and diabetes) and their reported management in seven Swiss regions (Léman, Mittelland, Zurich, North-West Switzerland, Oriental Switzerland, Central Switzerland and Tessin).

Methods: National health interview survey conducted in 2007 in a representative sample of the Swiss population (17,879 subjects). Age-adjusted data on prevalence of self-reported CV RFs, treatment among participants reporting a RF, control of RFs among treated participants and CV RF screening in the last 12 months levels were computed after weighting.

Results: The prevalence of hypertension was highest in North-West Switzerland (27.3%) and lowest in Central Switzerland (21.0%, $p<0.001$). Antihypertensive treatment was highest in Léman region (62.7%) and lowest in Oriental Switzerland (55.2%, $p<0.001$). Screening was higher in Tessin (89.3%) and lowest in Léman region (81.8%, $p<0.001$). Prevalence of dyslipidaemia was highest in Tessin and Léman region (20.7% and 20.1%, respectively) and lowest in Oriental Switzerland (14.5%, $p<0.001$). Lipid-lowering treatment was highest in Tessin and Léman region (44.3% each) and lowest in Central Switzerland (30.7%, $p<0.001$). Dyslipidaemia screening was highest in Tessin (76.6%) and lowest in Central Switzerland (58.6%, $p<0.001$). Prevalence of diabetes was highest in North-West Switzerland (5.4%) and lowest in Central Switzerland (3.3%, $p<0.05$). Diabetes screening was highest in Tessin (78.1%) and lowest in Oriental Switzerland (64.0%, $p<0.001$). Conversely, no between-region differences were found for hypertension or dyslipidaemia control (see table).

Conclusion: there are significant differences between the Swiss regions in self-reported prevalence and management of CV RFs. Screening is better in Tessin than in the other regions.

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