

# Younger doctors prescribe more drugs to reduce heart risk but offer less lifestyle advice

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Patients with heart disease risks are more likely to be prescribed cardiovascular (CV) drugs if they see a younger doctor and recommended to change their lifestyle if they see an older doctor, according to research in the June issue of IJCP, the *International Journal of Clinical Practice*.

Italian researchers studied the attitudes and prescribing trends of 1,078 family doctors, cardiologists and diabetologists, together with clinical data on 9,904 of their outpatients, after inviting the doctors to take part in an educational training programme on managing CV risk.

"While physicians recognise the importance of patients' age as a major driver for CV risk, little evidence is available on the potential impact of the doctor's age on how they manage clinical risk" says [cardiologist](#) Professor Massimo Volpe from the Faculty of Medicine at Sapienza University, Rome.

"Although younger doctors prescribed more drugs, this did not result in significantly better control of their patients' major CV [risk factors](#), suggesting that other factors have an important role to play in the [clinical management](#) of CV risk, including lifestyle changes."

The doctors, who were blind to the final purpose of the study, were selected by two-dozen regional referral centres, with 90% agreeing to

take part.

All the doctors were asked to fill in questionnaires on themselves and their practice and reply anonymously on the administrative site of their regional referral centre. They were also asked to provide clinical details of the first 10 white patients over 50 they saw, for any reason, after they agreed to take part.

A fifth of the doctors (20%) were under 45 years of age, 61% were 46-55 and 19% were over 55. Female doctors accounted for 27% of the total sample and tended to be younger, ranging from 47% of those under 45 to just 8% of those over 55.

[Family doctors](#) accounted for 78% of the total sample, followed by cardiologists (13%) and diabetologists (9%). The youngest age group included the fewest GPs (53%) and most cardiologists (31%), with the highest percentage of GPs in the 46-55 age group (86%).

Just over half of the patients (54%) were male. The average age was 67 and the ages of the patients treated by the doctors in the various age groups was very similar. However, doctors over 55 tended to treat more male patients, obese patients and smokers.

Key findings of the study included:

- High [blood pressure](#) was the most common CV risk factor, affecting 75% of patients, followed by abnormal lipid (cholesterol and/or fat in the blood) in 59% of patients and diabetes mellitus in 37%. In each case, the percentage was highest in patients managed by doctors under 45.
- Blood pressure drugs were the most commonly prescribed, by

83% of doctors under 45, 78% of doctors aged 46-55 year-old and 80% of doctors over 55. However, not all patients with high blood pressure were prescribed drugs, regardless of the age of their physician. This is consistent with research that shows that high blood pressure is widely undertreated and a key element in the global burden of CV disease in western countries.

- Younger doctors were also more likely to prescribe antidiabetic drugs, lipid-lowering agents and antiplatelet agents than their older colleagues.
- Older doctors were more likely to recommend lifestyle changes. Smoking cessation advice was highest in doctors over 55 and diet and exercise advice highest in doctors aged 46-55.
- Older doctors also tended to be more thorough and accurate when it came to recording clinical data on their patients. Previous analysis of the data provided showed a close relationship between high levels of accuracy and better CV outcomes.

"Our study demonstrated a significantly higher prevalence of major CV risk factors and associated clinical conditions among patients treated by younger, specialised doctors, rather than older doctors, who were more likely to be GPs" says Professor Volpe.

"Younger doctors were also more likely to prescribe medication and less likely to recommend [lifestyle changes](#) than their older colleagues. However this increased prescribing was not reflected in significantly better clinical management of CV risk factors.

"We believe these findings have important implications for the ongoing professional education of [doctors](#) treating patients with CV risk."

**More information:** Impact of physicians' age on the clinical management of global cardiovascular risk: analysis of the results of the Evaluation of Final Feasible Effect of Control Training and Ultra Sensitisation Educational Programme. Tocci et al. IJCP. 65, pp649-657. (June 2011). [DOI: 10.1111/j.1742-1241.2011.02664.x](https://doi.org/10.1111/j.1742-1241.2011.02664.x)

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