

CVD expert calls for mandatory screening of 18 year-old Mexicans

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A cardiovascular disease (CVD) expert is calling for mandatory screening of 18 year-old Mexicans to halt the CVD epidemic plaguing the nation. Cardiovascular risk factors will be a key theme at the Mexican Congress of Cardiology, held 23 to 27 November in Leon, Guanajuato, Mexico. The Congress is organised by the Mexican Society of Cardiology (MSC) and features a collaborative programme with the European Society of Cardiology (ESC).

Dr Enrique C. Morales Villegas, Director of the Cardiometabolic Research Centre in Aguascalientes, Mexico, said: "I have proposed to the Mexican government that 18 year-olds should have obligatory measurements of glucose, cholesterol, [blood pressure](#) and [body mass index](#) (BMI), with repeat assessment every three years. Screening could be done in schools, shopping centres and other public places and if an abnormality is found a strategy should be in place to treat it. This would be easy and inexpensive and I am waiting for the government's response."

He added: "The Mexican diet is more dangerous than [fast food chains](#). It's a combination of fried food, junk food and soft drinks. The philosophy of life is around comfort. People eat too much and everyday they watch 4 hours of TV, spend 2 hours at the computer and do less than 10 minutes of physical activity."

Dr Morales continued: "This combination of poor diet and sedentary lifestyles is the main cause of Mexico's obesity epidemic. Obesity is not

just an aesthetic problem, it's a profound health problem and the consequences are diabetes, hypertension ([high blood pressure](#)) and hypercholesterolaemia (high blood lipids) – all known as cardiometabolic [risk factors](#). This explains the very high mortality from cardiovascular diseases and diabetes in Mexico."

Mortality from cardiovascular diseases and diabetes rose by 9.5% in just one year, from 189 000 in 2009 to 207 000 in 2010. The latest Mexican National Survey of Health and Nutrition (1) reveals that 73% of women, 69% of men and 35% of adolescents are overweight or obese (BMI >25kg/m²). Dr Morales said: "The prevalence of overweight and obesity in Mexico is one of the highest in the world and the problem is increasing in all age groups. Obesity begins in childhood and persists into adolescence and adulthood."

The survey also shows that diabetes is increasing in men, women and children of all ages, with an estimated adult prevalence of 14-16%. Diabetes is highest (up to 18%) in the states of Mexico City, México State, Nuevo Leon, Veracruz, Tamaulipas Durango and San Luis Potosi. Dr Morales said: "These states have a high prevalence of obesity and a high fat diet which explains the amount of diabetes."

An average of 31% of adults in Mexico have hypertension. Levels increase with age and two-thirds of 70 year-olds have hypertension. An average of 40% of Mexicans have high levels of bad cholesterol (LDL).

Dr Morales said: "In addition to the high prevalence of [cardiovascular risk factors](#) in Mexico we have low detection. Just 50% of people with diabetes, hypertension or hypercholesterolaemia know they have it. Of those who do know, only 50% receive treatment. And of those treated, just 50% reach the treatment goals in the ESC Clinical Practice Guidelines on diabetes,(2) hypertension (3) and hypercholesterolaemia.(4) At the end of the day just 12.5% of people

with one cardiovascular risk factor have it detected, treated and controlled."

He continued: "Mandatory screening of cardiovascular risk factors is needed to improve detection in the current population. In addition, education on healthy diet and physical activity is needed in schools to prevent CVD risk factors developing in future generations."

Dr Juan Verdejo Paris, MSC President, said: "We need to modify the 'Mexican way of life' and perform the latest procedures to treat [cardiovascular disease](#). The traditional Mexican diet is rich in carbohydrates and fat and in recent years exercise has diminished a lot, especially among children in schools. We need to change public perceptions so that our children become more active and eat more healthily."

Professor Fausto Pinto, ESC President Elect, said: "ESC prevention guidelines advocate a healthy diet as the cornerstone to CVD prevention, along with physical activity and a healthy body weight.(5) During the Congress in Mexico ESC experts will share their insights and experience on how to prevent and control [cardiovascular risk](#) factors."

More information: References

(1) Gutierrez JP, Rivera-Dommarco J, Shamah-Levy T, Villalpando-Hernandez S, Franco A, Cuevas-Nasu L, Romero-Martinez M, Hernandez-Avila M. Encuesta Nacional de Salud y Nutricion 2012. Resultados Nacionales. Cuernavaca, Mexico: Instituto Nacional de Salud Publica (MX), 2012. Mexican National Survey of Health and Nutrition (Encuesta Nacional de Salud y Nutrición; ENSANUT) 2012.

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(2) 2013 ESC guidelines on the management of stable coronary artery

disease: The Task Force on the management of stable coronary artery disease of the European Society of Cardiology. *European Heart Journal*. 2013;34(38):2949-3003.

(3) 2013 ESH/ESC Guidelines for the management of arterial hypertension: The Task Force for the management of arterial hypertension of the European Society of Hypertension (ESH) and of the European Society of Cardiology (ESC). *European Heart Journal*. 2013;34:2159.

(4) ESC/EAS Guidelines for the management of dyslipidaemias: The Task Force for the management of dyslipidaemias of the European Society of Cardiology (ESC) and the European Atherosclerosis Society (EAS). *European Heart Journal*. 2011;32:1769.

(5) European Guidelines on cardiovascular disease prevention in clinical practice (version 2012): The Fifth Joint Task Force of the European Society of Cardiology and Other Societies on Cardiovascular Disease Prevention in Clinical Practice (constituted by representatives of nine societies and by invited experts). *European Heart Journal*. 2012;33:1635.

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