



EDUCATION AND ACTIONS TO REDUCE THE RISK OF CARDIOVASCULAR DISEASE IN ARGENTINE RAILWAY POPULATION

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Introduction



HIGH INCIDENCE OF CARDIOVASCULAR DISEASE

Unhealthy diet, smoking,
sedentary lifestyle,
obesity, overweight,
dyslipidemia
and high blood pressure



CLOSURE OF OWN ASSISTANCE EFFECTORS



Lack of preventive
medical control



DETECTION OF CARDIOVASCULAR RISK FACTORS

in places of concentration
of workers



**Sanitary Railworkers
Agents**

Modifiable
CVD risk
factors



MODIFIABLE:
DIABETES - HYPERTENSION -
SMOKING - DYSLIPIDAEMIA -
SEDENTARY LIFESTYLE - OBESITY -
DIET - STRESS



NON MODIFIABLE:
SEX - AGE - HEREDITY

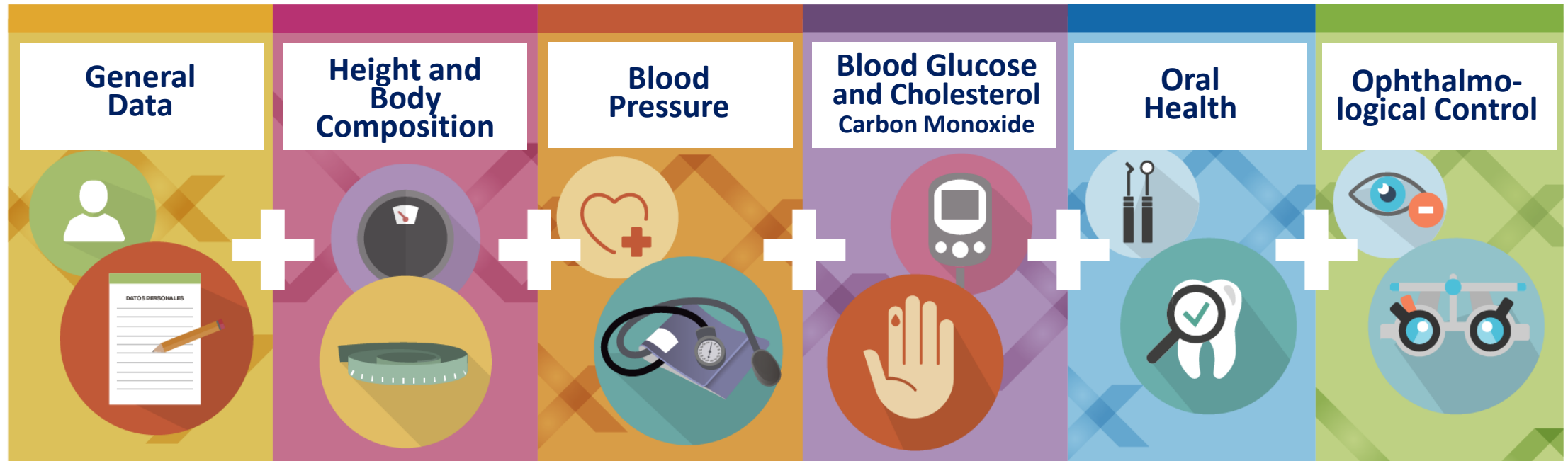


SPECIAL:
PREVIOUS CVA - HIV -
SLEEP DISORDER

STAGE I: CARDIOVASCULAR PREVENTION PROGRAMME OSFE

Mass CV Risk Screening

MASS CV RISK SCREENING



CARDIOVASCULAR RISK

BASIC INFORMATION



► DEMOGRAPHIC AND BEHAVIOURAL DATA:

- ✓ Basic socio-demographic information
- ✓ Tobacco consumption
- ✓ Alcohol consumption
- ✓ Fruit and vegetable intake
- ✓ Physical activity

► PHYSICAL MEASUREMENTS:

- ✓ Height
- ✓ Body weight
- ✓ Blood Pressure
- ✓ Waist circumference

► BIOCHEMICAL MEASUREMENT:

- ✓ Blood glucose
- ✓ Cholesterolemia
- ✓ Carbon monoxide levels

BODY MASS INDEX

32%



WITHOUT
OVERWEIGHT

34%

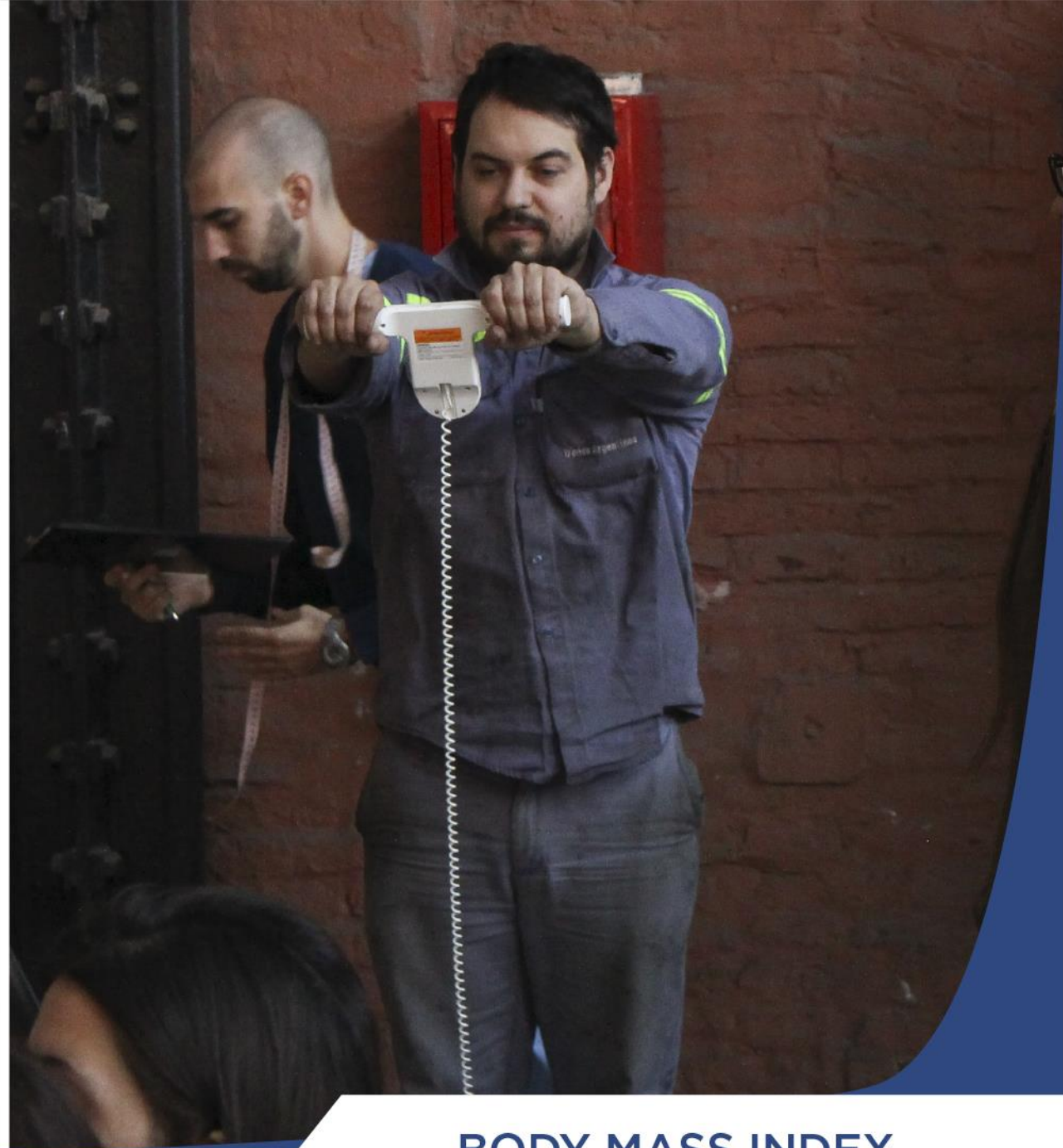


OVERWEIGHT

34%

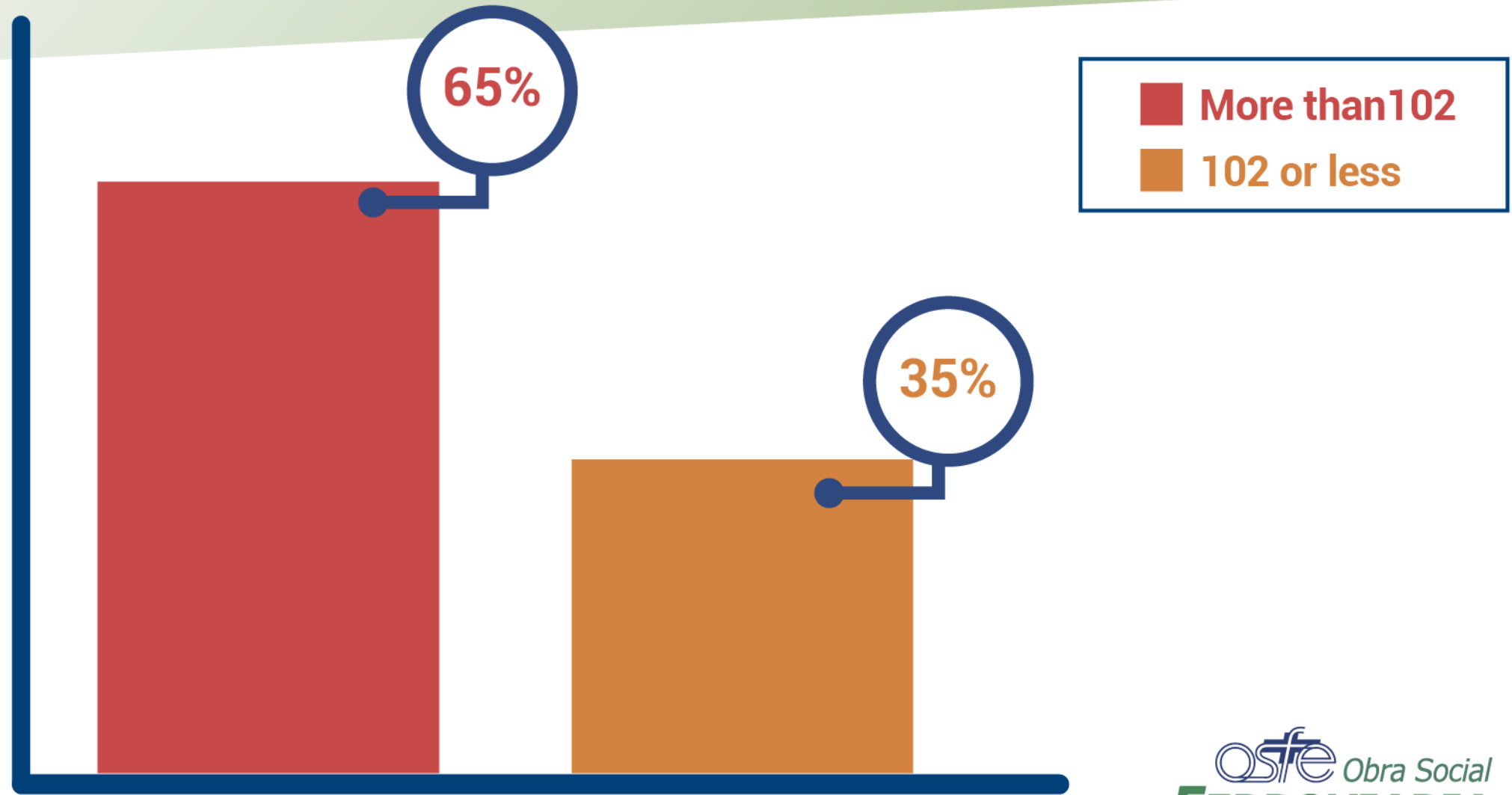


WITH OBESITY

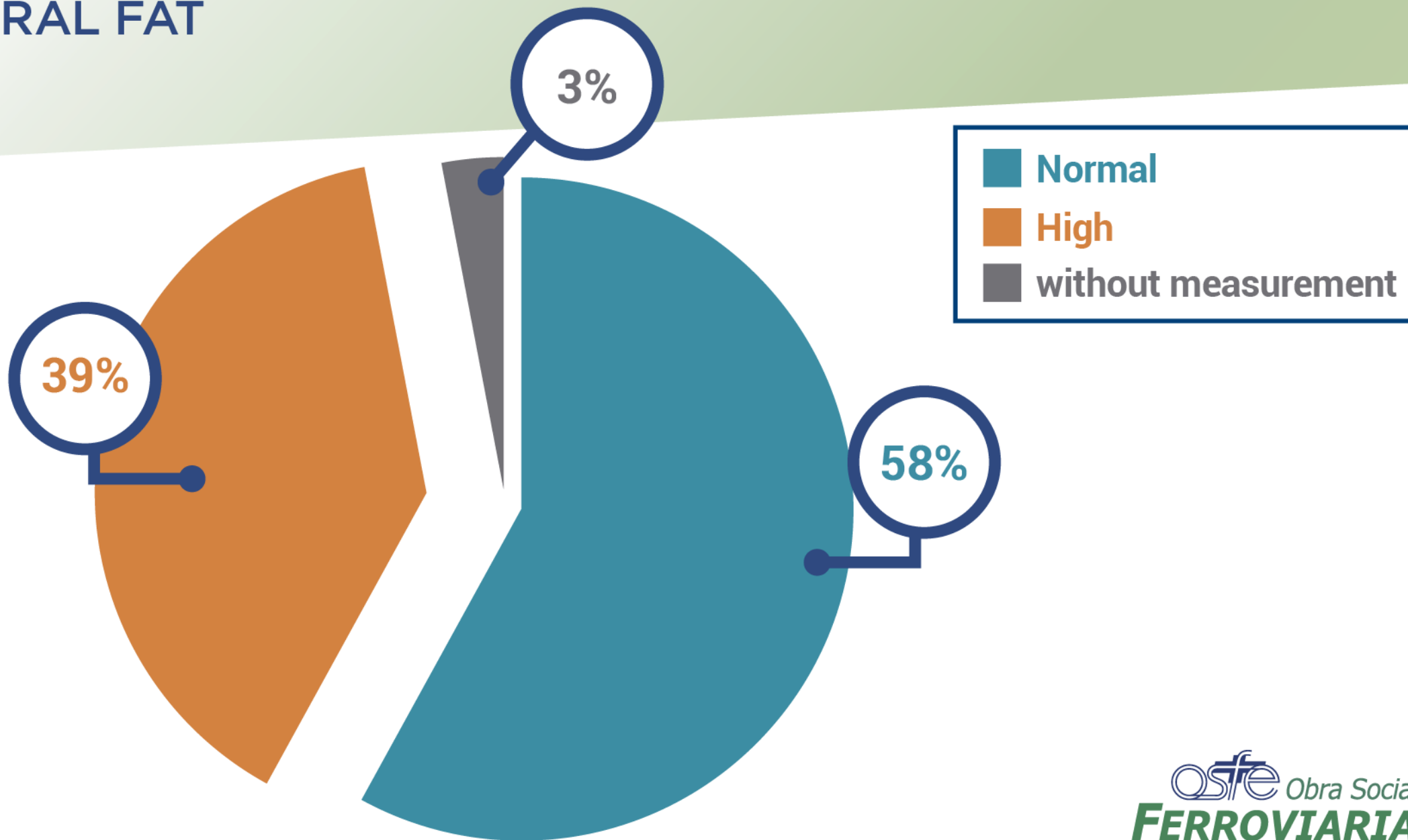


BODY MASS INDEX

WAIST PERIMETER (MEN)

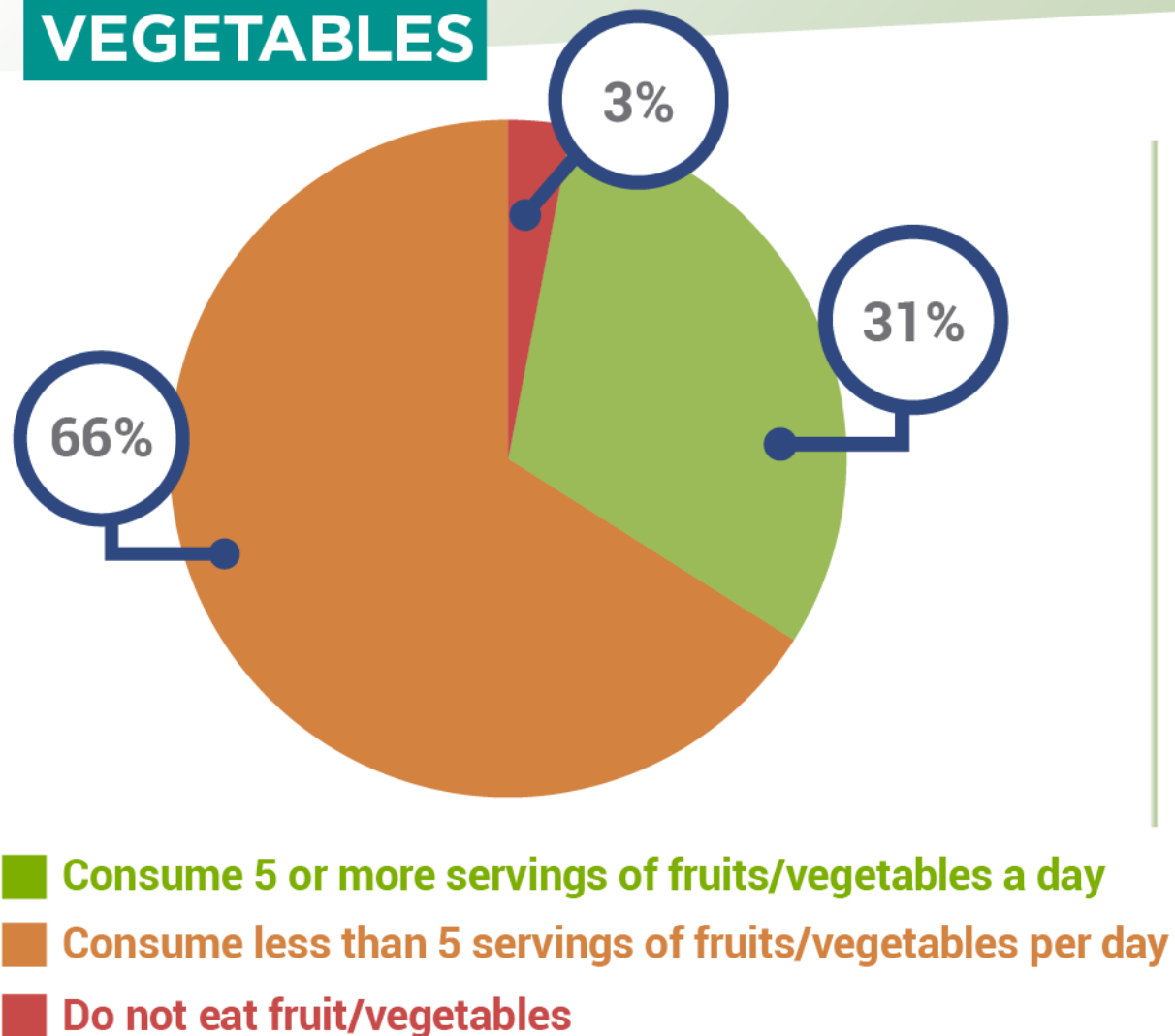


VISCERAL FAT

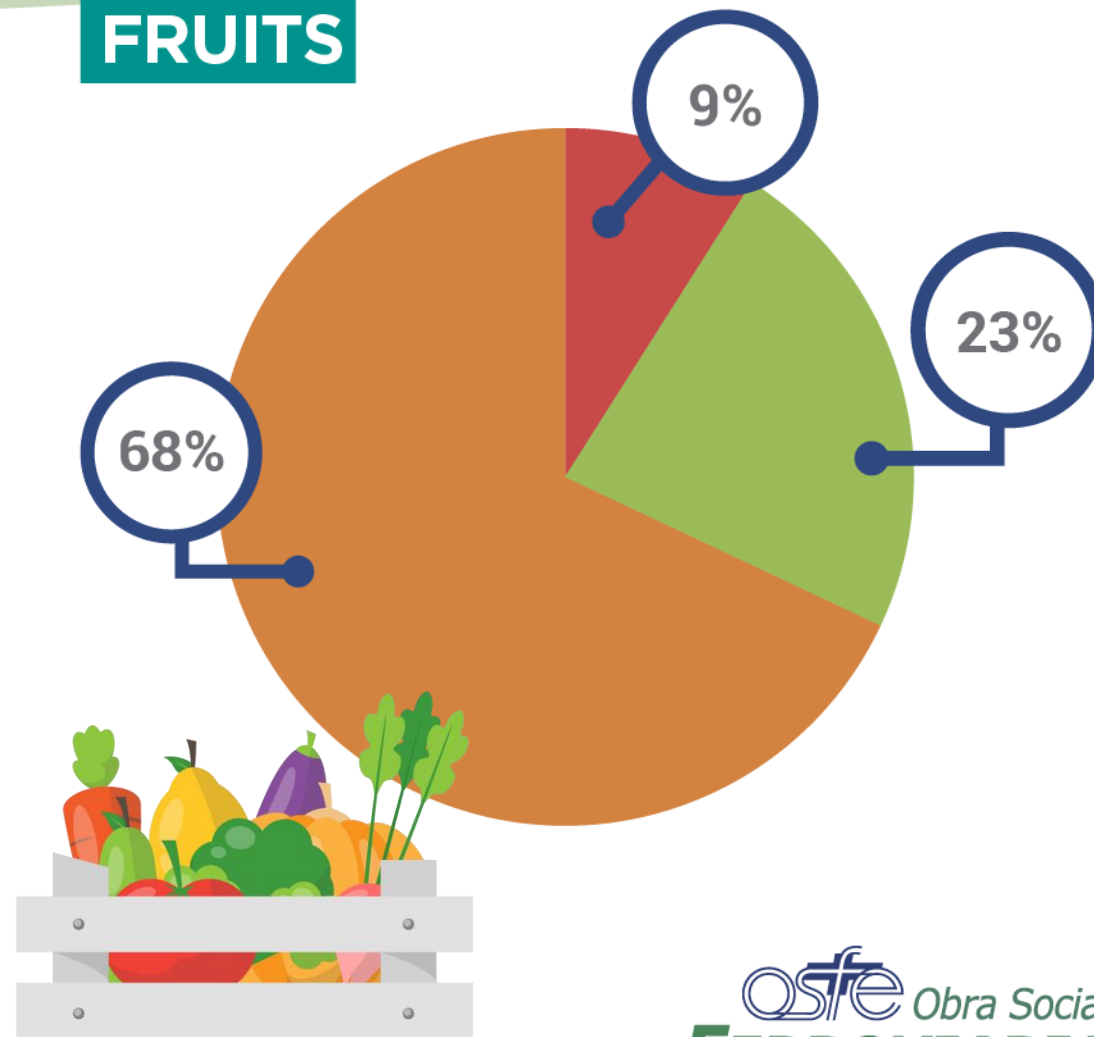


FRUIT AND VEGETABLE CONSUMPTION

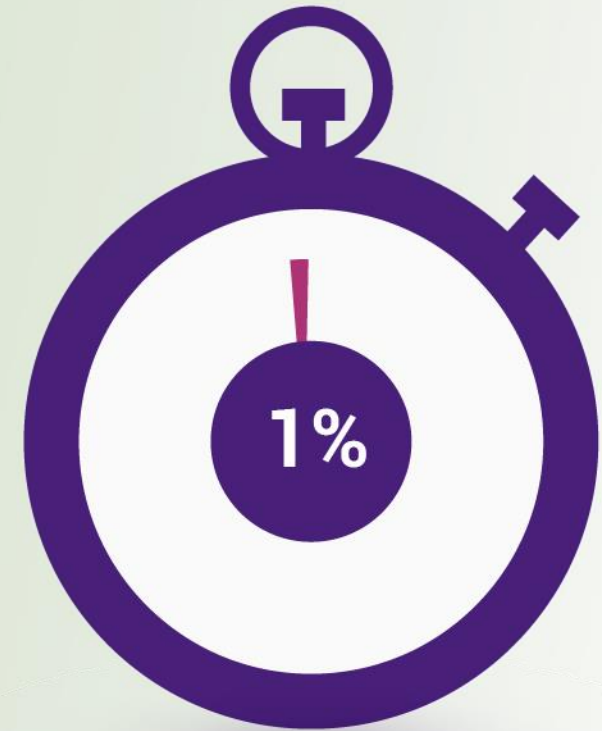
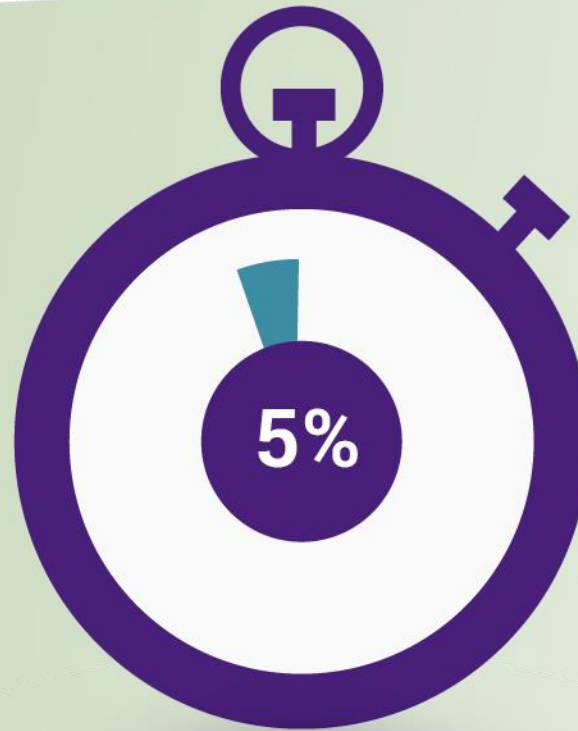
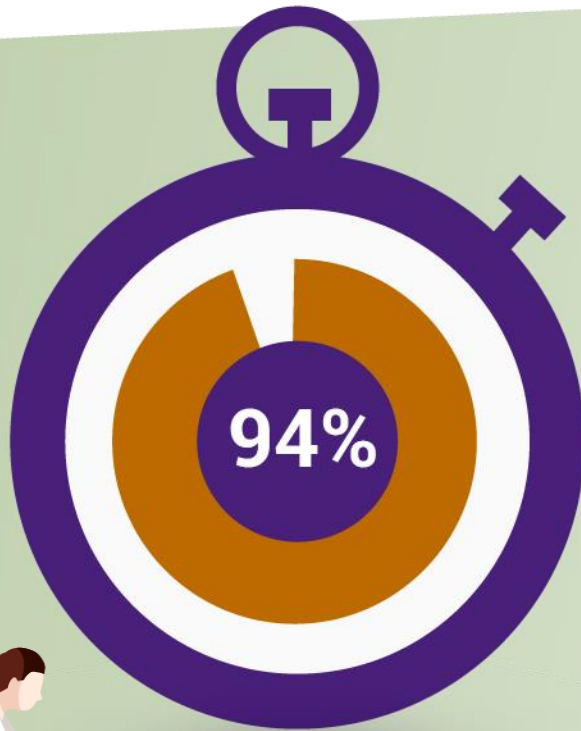
VEGETABLES



FRUITS



PHYSICAL ACTIVITY



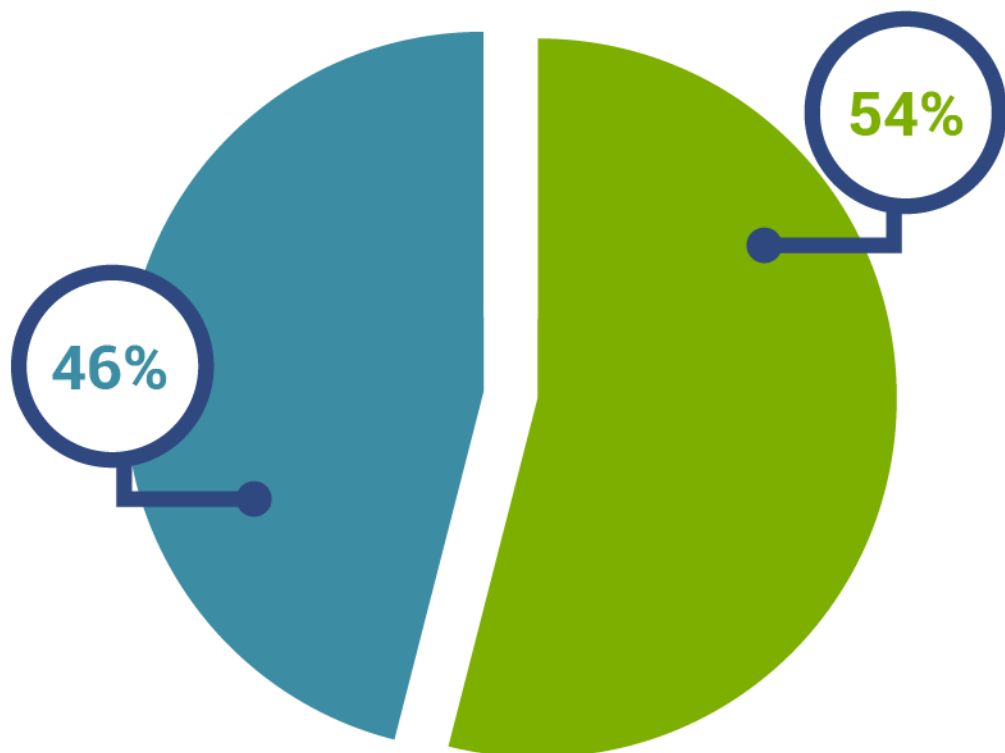
■ Less than 120

■ Between 120 y 150

■ More than 150

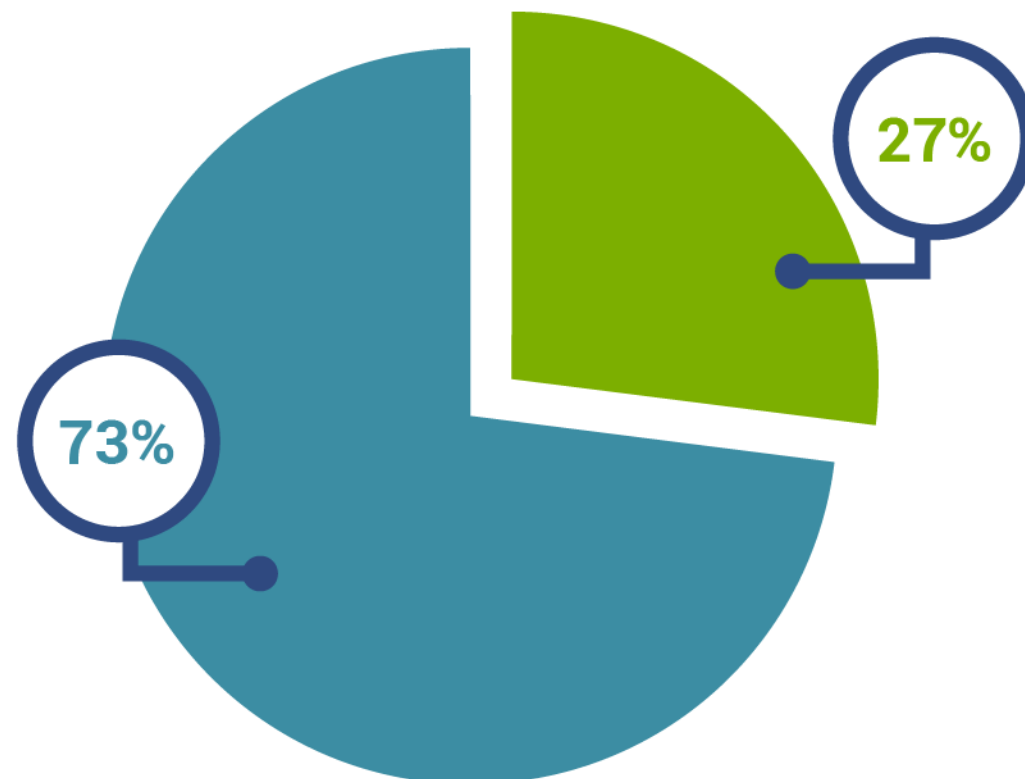
HIGH BLOOD PRESSURE

SYSTOLIC BLOOD PRESSURE

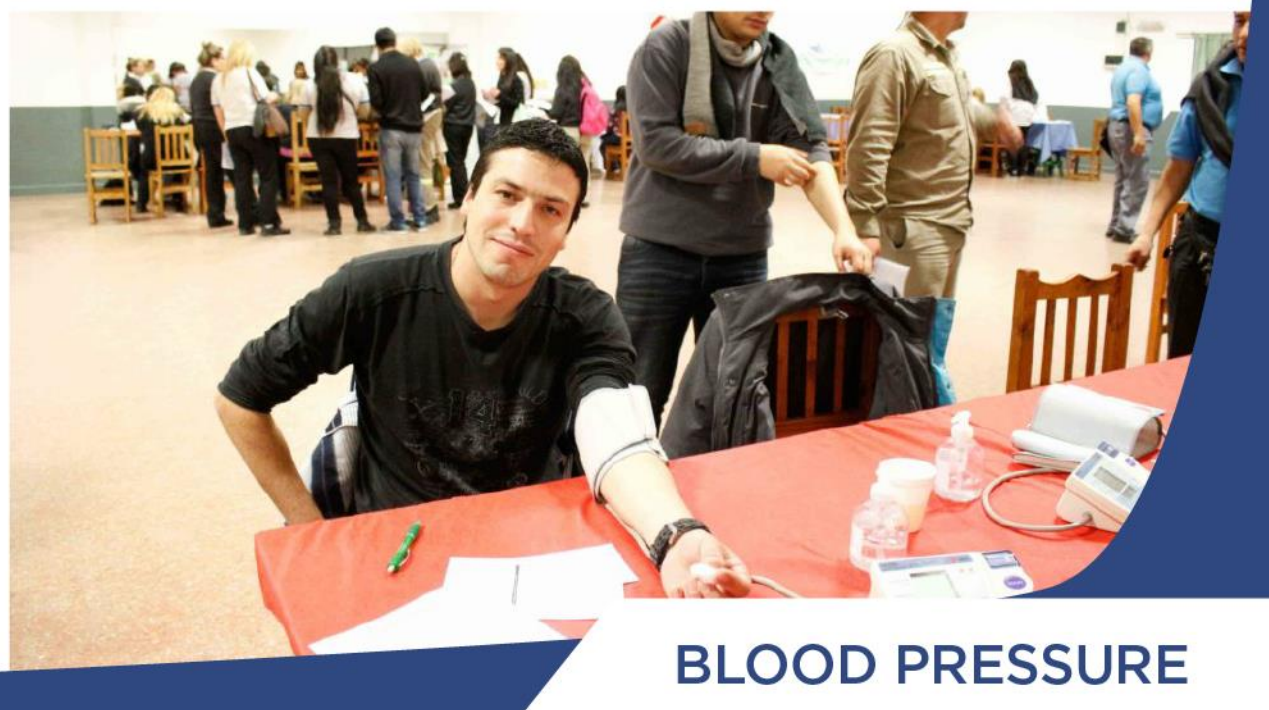


- 140 or less
- More than 140

DIASTOLIC BLOOD PRESSURE

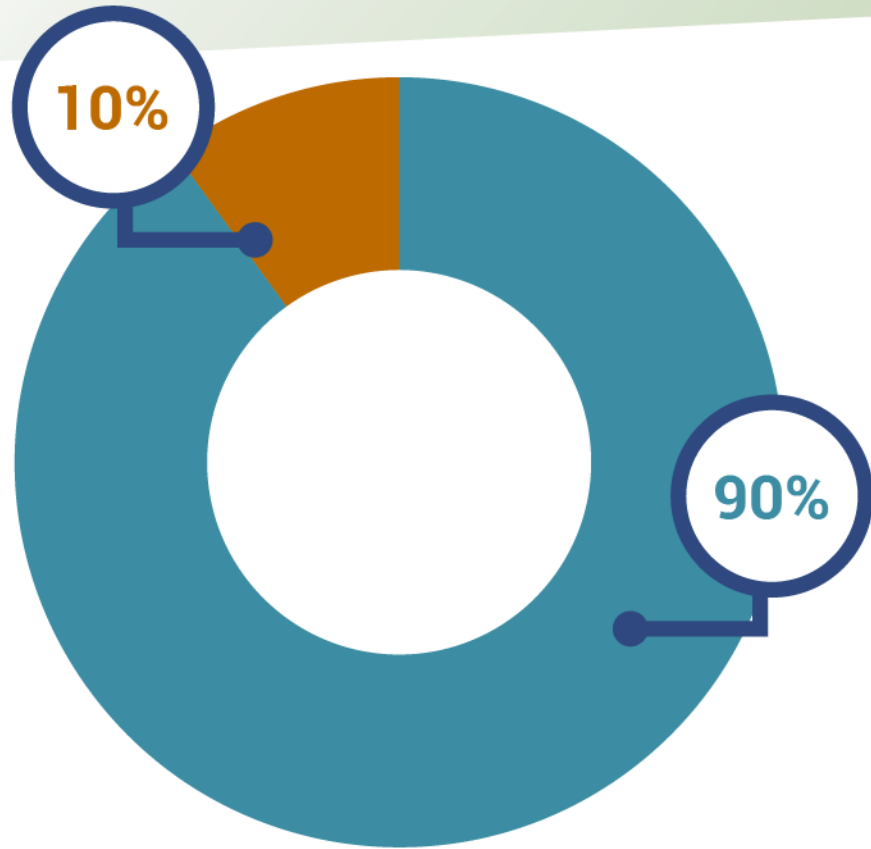


- More than 90
- 90 or less



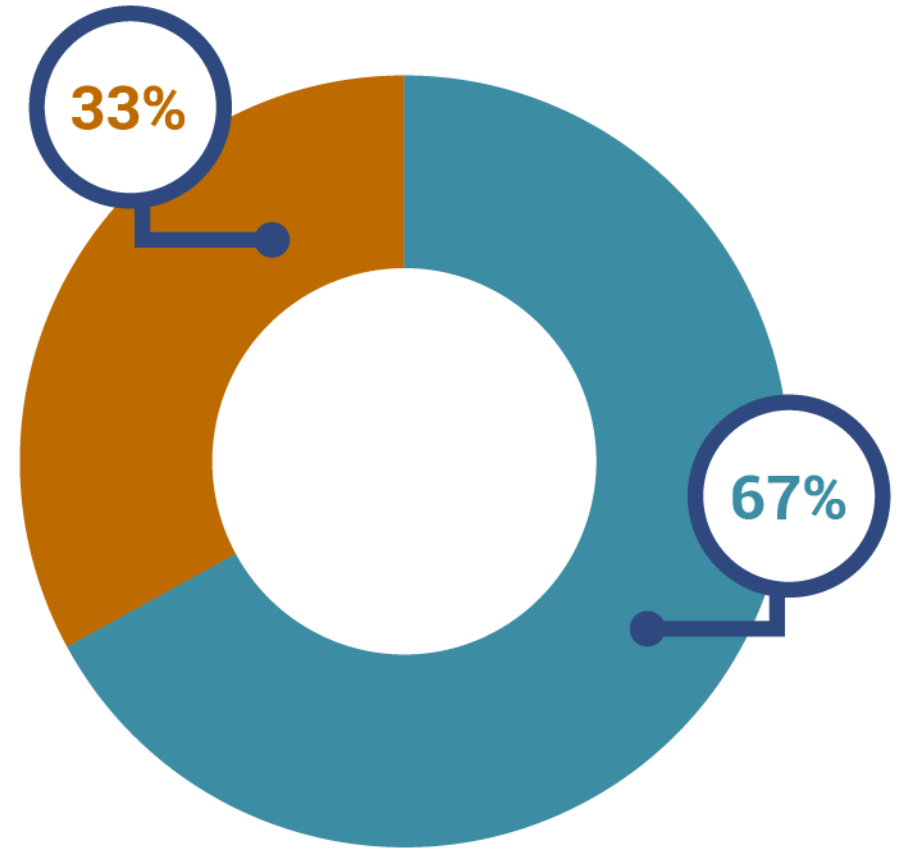
BLOOD PRESSURE

HYPERGLYCEMIA



■ Less/equal than 126
■ More than 126

CHOLESTEROLAEMIA



■ Less/equal than 200
■ More than 200



CHOLESTEROL / GLUCEMIA

SMOKING



35% Smoker 65% Non Smoker

STAGE II: SUMMARY OF ASSESSED POPULATION (Nº: 11.020 beneficiaries)



WOMAN: 24%



MEN: 76%

AGE	41-83 YEARS
BODY HEIGHT	171 cm
DIASTOLIC BP	85,44 mmHg
SYSTOLIC BP	141,82 mmHg
BODY WEIGHT	82,60 Kg
BODY MASS INDEX	28,87
CHOLESTEROL/GLYCEMIA	196 / 104 mgr/dl

OSFE RESULTS /10 years of work

VALUES	Survey National FRCV	OSFE 2007/2008	OSFE 2016/2017
Hyperglycaemia	8,5 %	7%	7%
Cholesterolemia	27,8 %	28%	26%
Smoking	33,4 %	36 %	30 %
Hypertension Arterial	34,4 %	43 %	31 %
Overweight	34,5 %	39 %	33 %
Obesity	14,6 %	37 %	34 %
Sedentary lifestyle	46,2 %	94 %	41 %

OSFE RESULTS

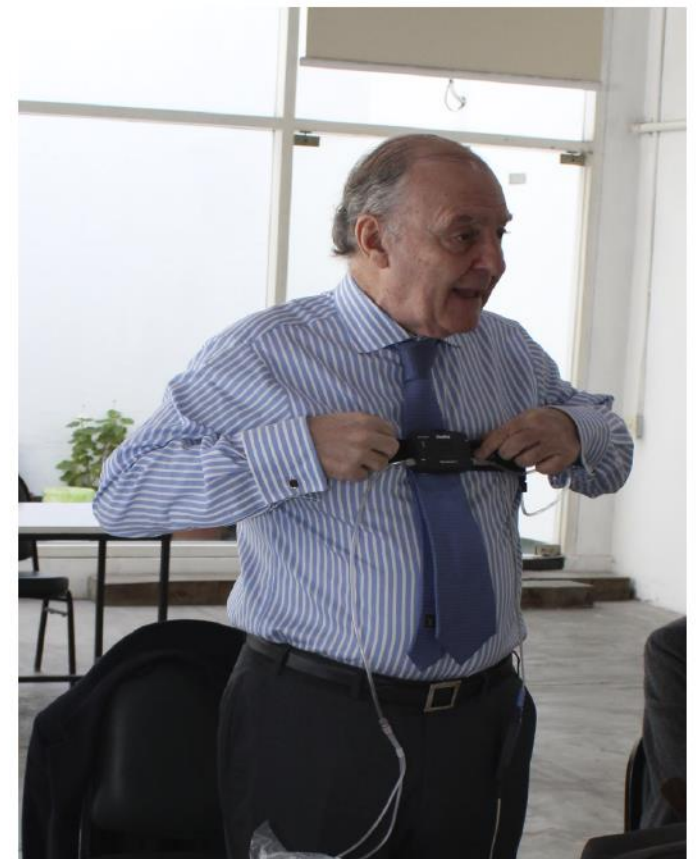
Comparing AMI and stroke incidence data from the 2007/2008 biennium, with those from the 2016/2017; 2022/2023 biennium.

	2007/2008	Rate/100,000 beneficiaries	2016/2017	Rate/100,000 beneficiaries	2022/2023	Rate/100,000 beneficiaries
AMI	67	9,7	22	2,45	32	2,3
Stroke	97	11,42	70	7,8	51	6,92

POOR SLEEP QUALITY IS INCORPORATED AS A CARDIOVASCULAR RISK FACTOR



Railway drivers started to be studied with a polygraph in order to correct modifiable factors for APNEA/HIPOPNEA.



OSFE PREVENT GAME



Since 2022, we have been working on the development of an application to learn and evaluate different health prevention topics.





The metrics of the game allow to define and analyse which issues or problems need to be addressed with more attention.



THANKS FOR YOUR ATTENTION



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