Cardiovascular disease

Cardiovascular risk factors in middle age linked to heart failure later on

Preventing hypertension, obesity and diabetes in middle age improves morbidity and mortality related to heart failure, a pooled analysis of data from the United States has shown.

The authors, from Northwestern University in Chicago, sampled data from communities across the United States in four major cohort studies: the Framingham Heart, Framingham Offspring, Chicago Heart Association Detection Project in Industry, and the Atherosclerosis Risk In Communities studies.

Individuals with and without hypertension, obesity or diabetes and combinations of these risk factors, aged 45 and 55 years were studied up to age 95. The authors analysed the association between the absence of risk factors at mid-life and incident heart failure, heart failure-free survival, and overall survival.

In those aged 45 there were 1,677 heart failure events over 516,537 person-years of follow-up. Men and women who had no risk factors, compared with those with all three (hypertension, obesity and diabetes) had a 73-85% lower risk of heart failure.

Men and women without any of the three risk factors at age 45 lived on average 34.7 years and 38.0 years respectively without heart failure.

They also lived, on average, an additional 3-15 years longer free of heart failure than those with one, two or three risk factors. Similar trends were seen when participants were stratified at index age 55.

A significant amount of time is devoted to managing hypertension, obesity and diabetes and to the prevention of these conditions but the association of cardiovascular risk factors in middle age with the development of heart failure has not been quantified.

The authors concluded that the prevention of hypertension, obesity, and diabetes by ages 45 and 55 could prolong heart failure-free survival and decrease heart failure-related morbidity. This ultimately will translate into improved life expectancy.

Studies such as this provide further encouragement to healthcare professionals to continue to drive home the lifestyle messages that will help prevent our patients from developing hypertension, diabetes and obesity and to manage such conditions aggressively when they become manifest.

DR PETER SAVILL

Ahmad FS, Ning H, Rich JD et al. Hypertension, obesity, diabetes, and heart failure-free survival: The Cardiovascular Disease Lifetime Risk Pooling Project. *JACC Heart Fail* 2016;4(12):911-19

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CREMATION FORMS: an open letter to colleagues



I am a GP partner and public health doctor working in the UK.

I believe, like many of us, that primary care is vital to improving the health of whole communities.

This March, I am hoping you'll stand with me and primary healthcare professionals around the world as part of the **As One** campaign – by donating the fees from the cremation forms we do that month to Health Poverty Action. It's an organisation whose belief in primary health care drives everything it does.

With increasing pressures on our own health system, it is as important as ever that we support one another to overcome the everyday challenges. I hope that you will extend that same support to primary healthcare professionals in some of the world's most isolated communities. Because when we come together - **As One** – we can achieve so much more.

Together we can ensure that 'Health for All' becomes more than just an aspiration. This March, I'll be donating my cremation form fees to Health Poverty Action, and I hope you and your colleagues will too.

Yours sincerely

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TO FIND OUT MORE AND DONATE:
healthpovertyaction.org.uk/as-one

AS ONE

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