



# Prevalence, awareness, and treatment of hypercholesterolaemia in 32 populations:

results from the WHO MONICA Project

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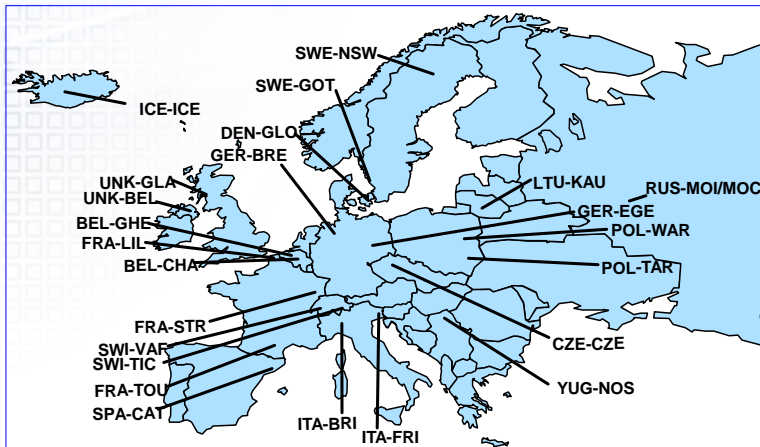
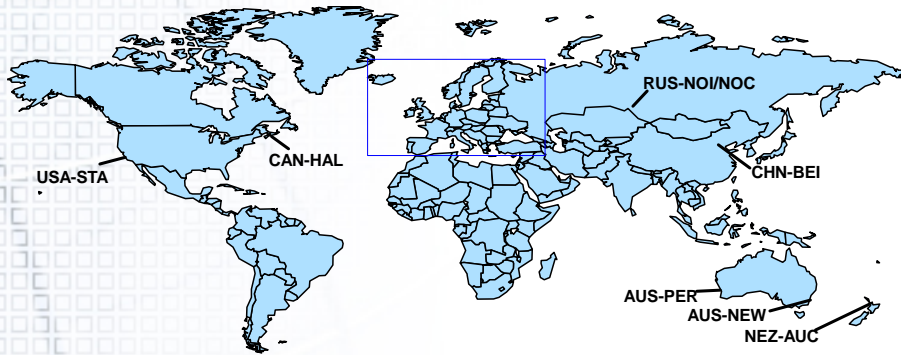
# Background

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- ❖ Hypercholesterolaemia is a well-established risk factor for coronary heart diseases
- ❖ No large scale multinational comparisons exist
- ❖ Individual studies not comparable because of the differences in
  - ❖ data collection methods
  - ❖ age groups included
  - ❖ indicators used



# Methods



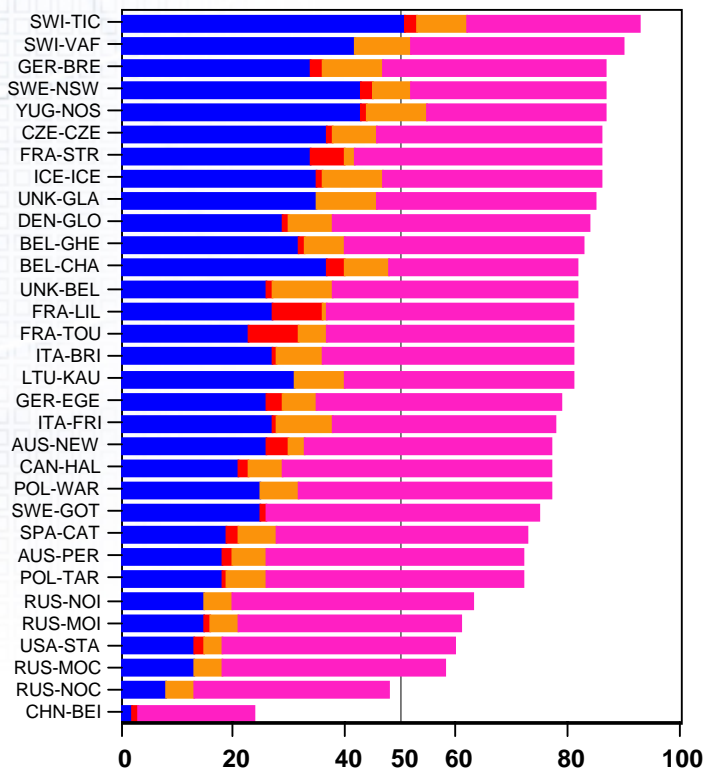
32 populations, 19 countries,  
4 continents

- ❖ The final WHO MONICA risk factor surveys (1989-1997)
- ❖ Age group 35-64 years
- ❖ Standardized data collection methods
- ❖ Response rates between 41% and 90%

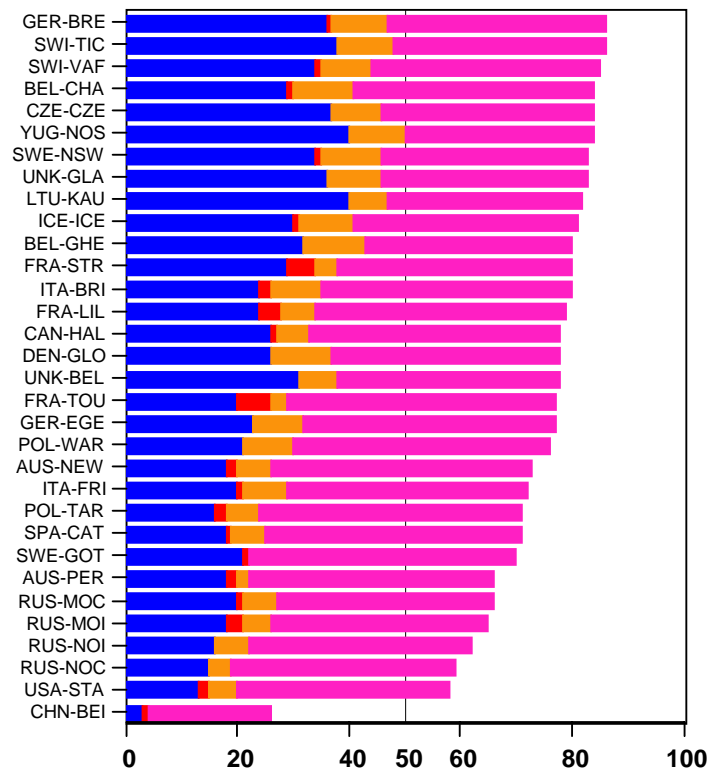


# Prevalence of hypercholesterolaemia

## Men



## Women



≥ 6.5 mmol/l    ≥ 6.5 mmol/l or treatment    ≥ 6.2 mmol/l    ≥ 5.0 mmol/l

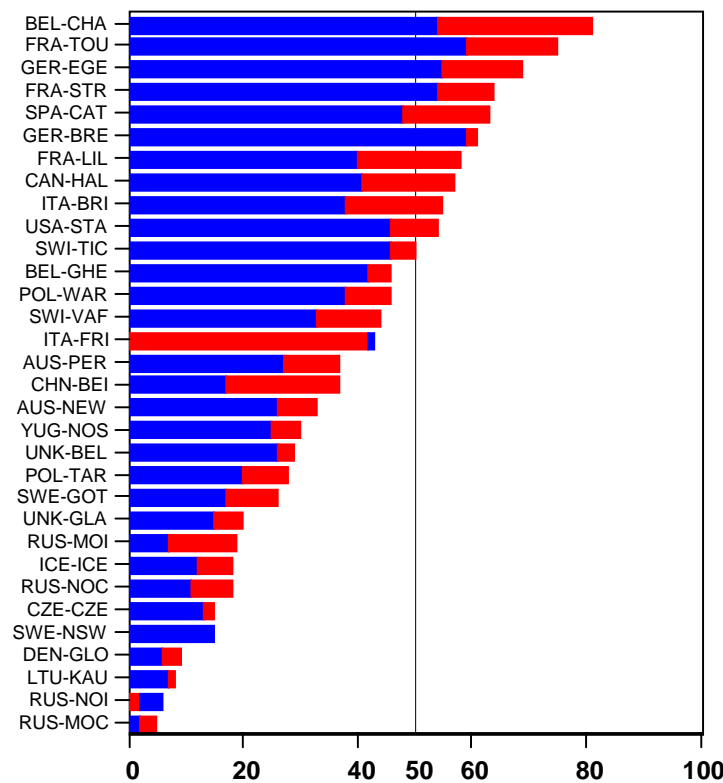
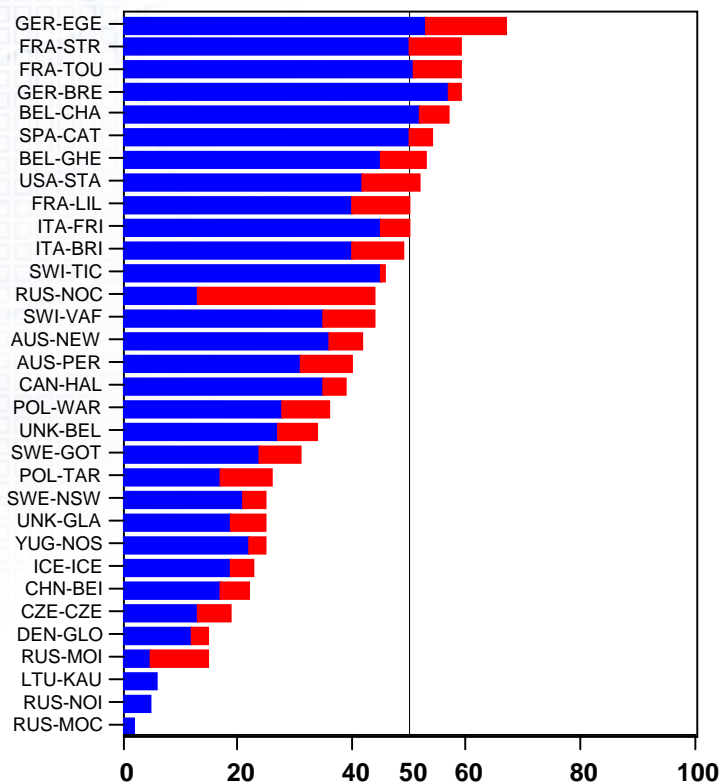


# Prevalence of cholesterol measurement frequency

(Cholesterol measured during the past year)

**Men**

**Women**



Prevalence (%)

Prevalence (%)

Entire population

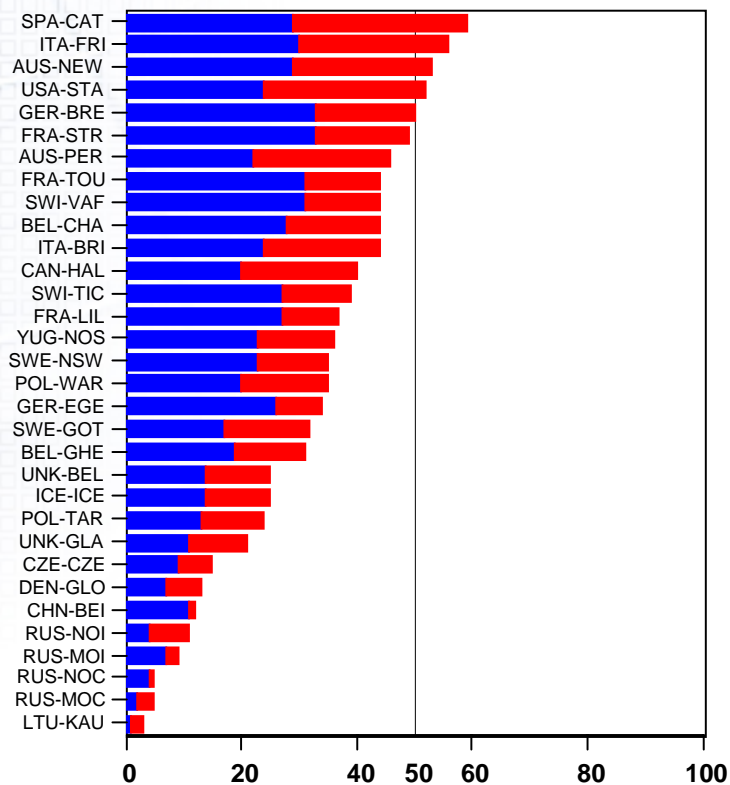
People with total cholesterol  $\geq 6.5$  mmol/l



# Prevalence of awareness

(A doctor or other health care worker had told the subject that he or she had elevated total cholesterol.)

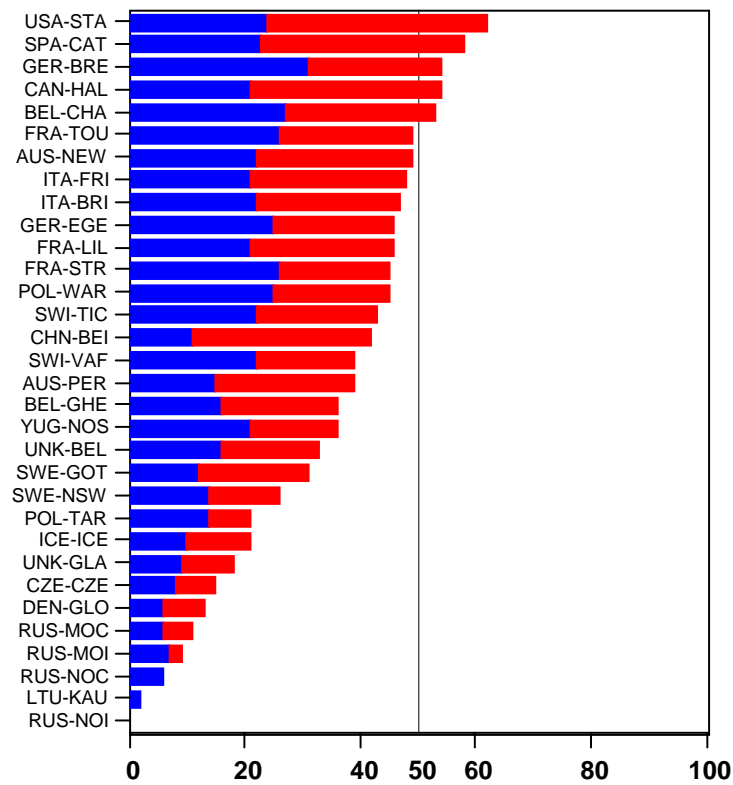
## Men



Prevalence (%)

Entire population

## Women



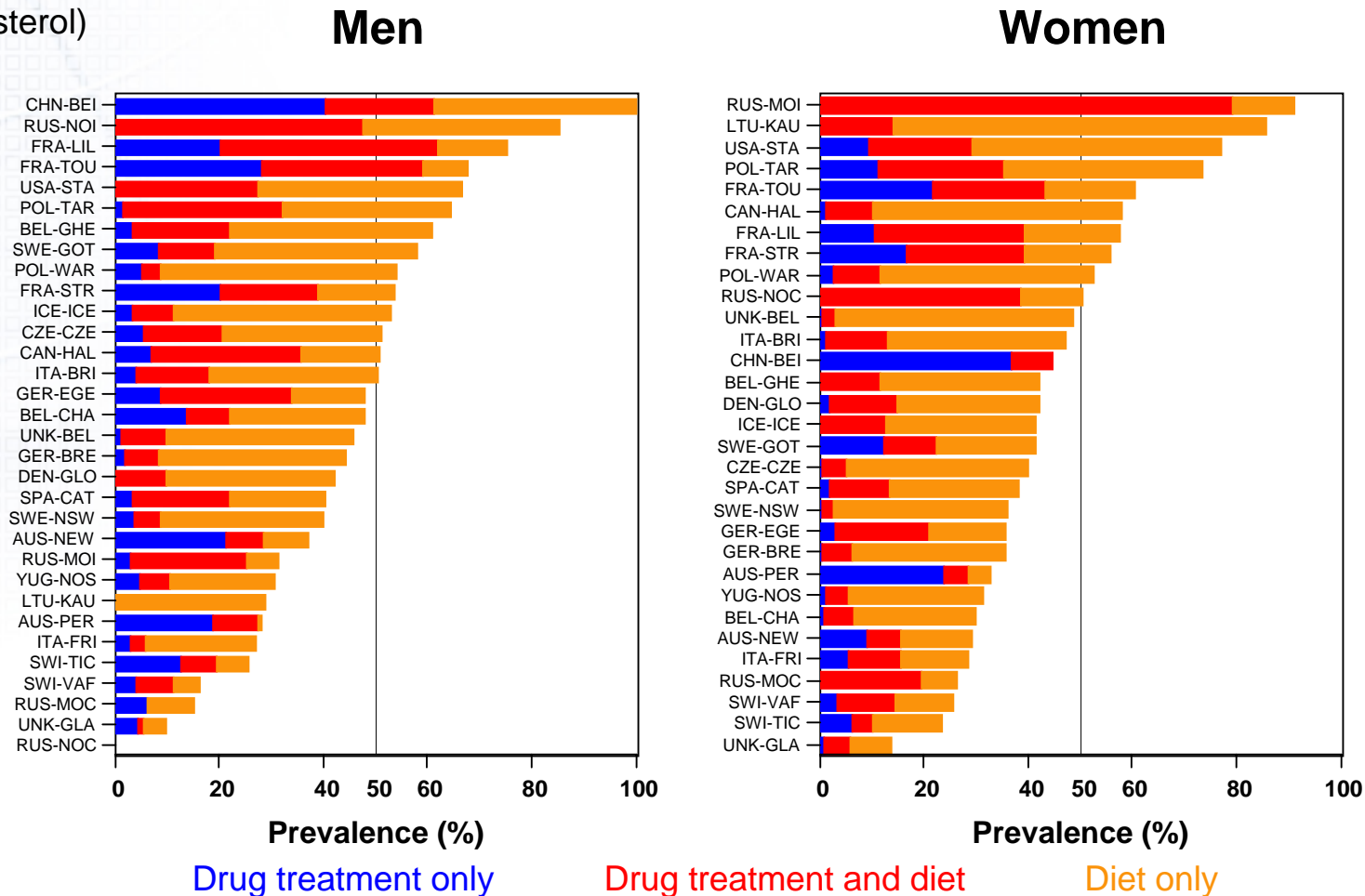
Prevalence (%)

People with total cholesterol  $\geq 6.5$  mmol/l



# Prevalence of treatment among hypercholesterolaemics

(Drug treatment: during the past 2 weeks had taken prescription medication to lower blood cholesterol;  
Diet treatment: were on the specific diet prescribed by a doctor or other health care worker to lower blood cholesterol)

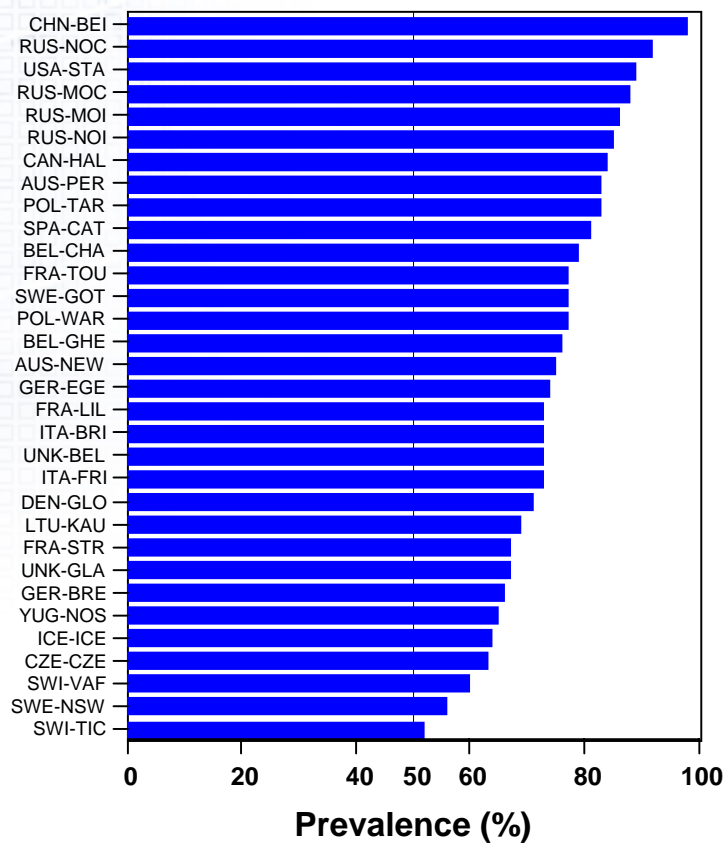




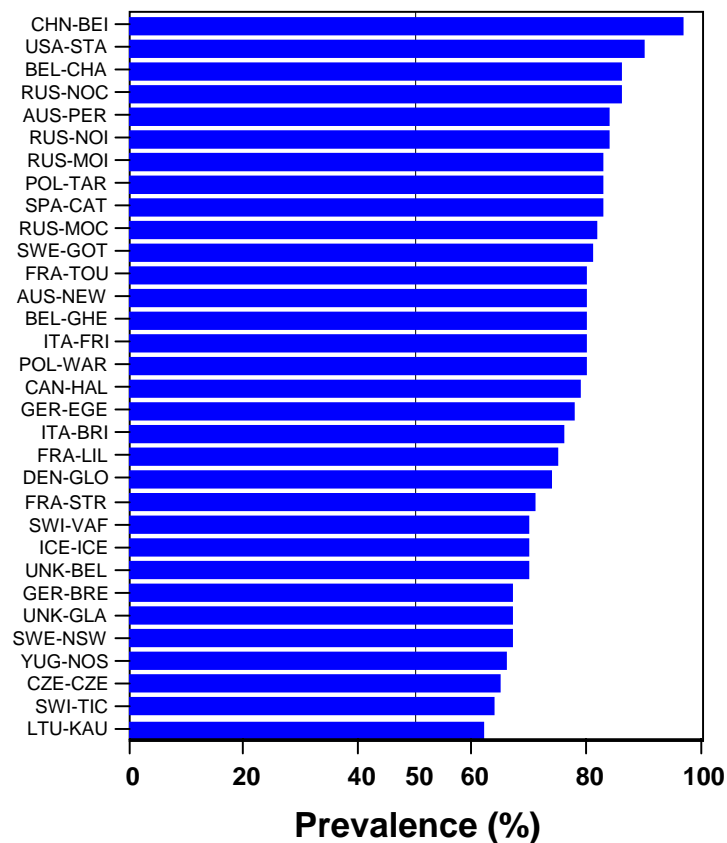
# Prevalence of controlled hypercholesterolaemia

(Using lipid-lowering drugs and had total cholesterol < 6.5 mmol/l.)

## Men



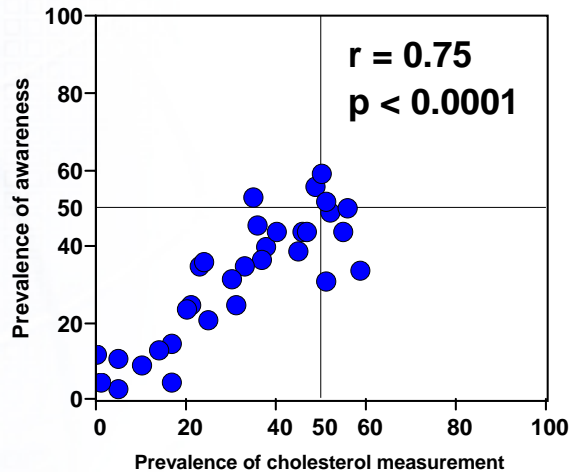
## Women



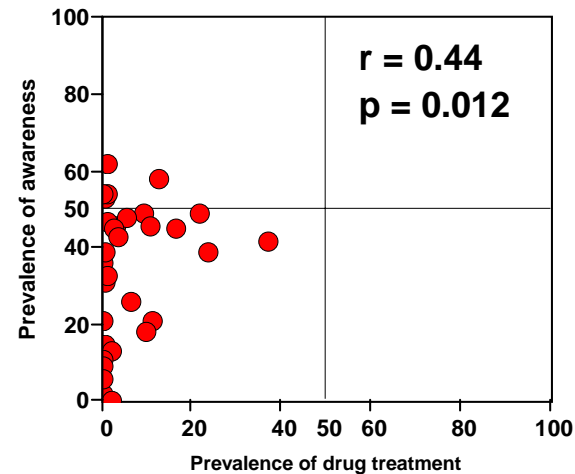
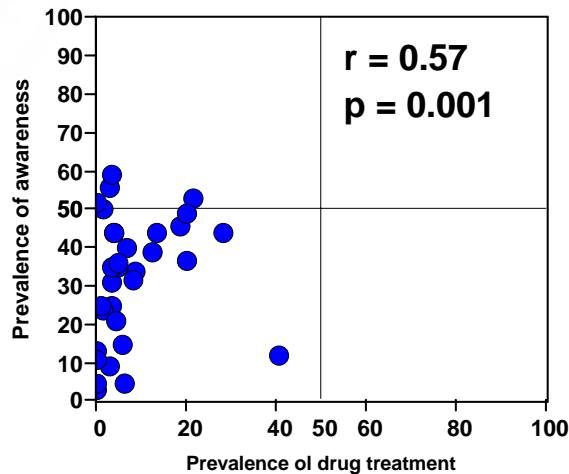
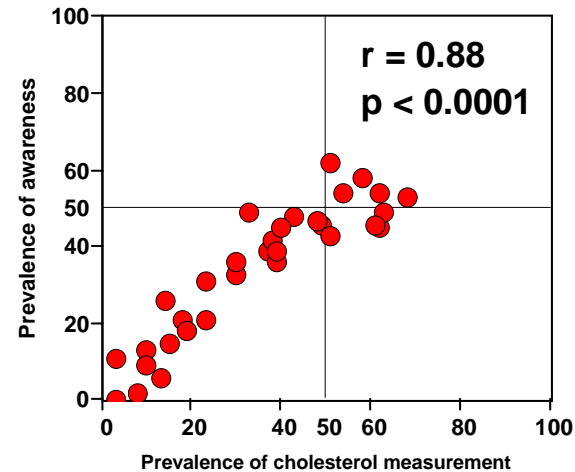


# Hypercholesterolaemia awareness vs. cholesterol measurement and drug treatment

Men



Women





# Conclusions

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- ❖ Wide variation between population in
  - ❖ the prevalence of hypercholesterolaemia
  - ❖ the awareness of high cholesterol
  - ❖ the treatment of hypercholesterolaemia
  
- ❖ Clear relationship between the awareness and screening frequency and drug treatment of hypercholesterolaemia
  
- ❖ For comparability of the results
  - ❖ standardized data collection methods, and
  - ❖ uniformly defined indicators

are essential