# Unawareness Risk for Stroke and Cardiovascular Disease among Normal Weight Hypertension with and without Metabolic Syndrome Results from Primary Care Settings in a Developing Country 

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Metabolic syndrome (MetS) is a common complex risk of cardiovascular disease. In Thailand health care context, a term "abdominal obesity" has been used interchangeably "MetS". Hypertension and overweight are 2 among 5 components of MetS. Obese hypertensions are seemly recognized their risk, in contrast, non-obese has less awareness their risk.

In fact, abdominal obesity is not MetS, and MetS can be found in both obese and non-obese person.[1] However, none of the previous studied address CVD risk awareness in non-obes hypertension. Thus, we explored whether non-obese hypertension (BMI < 23.0 $\mathrm{kg} / \mathrm{m}^{2}$ ) with MetS and non-MetS had differences in CVD risk awareness.

## Methods

We analyzed data from 571 non-obese hypertensions treated at 11 primary care units. MetS was defined according to NCEP-ATP III criteria.[2] Weight circumference (WC) was defined based on WHO-APR criteria.

A-4 item questionnaires was used to assess patient's risk awareness. They were asked "how would you say about your risk for developing stroke?" (DM, CKD, and CHD). Respondence method was 4-rating scales from very low risk, to very high risk. A total score was calculated to determine overall CVD risk awareness. score on each item was classified into less and high awareness by using median values.

Mann-Whitney test, Chi-square, and odds ratio were used to compare risk awareness.

## Results

MetS was diagnosed in $54.5 \%$ of patients. MetS were more likely had high awareness of stroke ( $p=0.077$ ), and overall CVD ( $p=0.074$ ). Both groups had not differences in awareness of DM, CKD, and CHD. Rates of high risk awareness were in stroke 30\%, CKD 28\%, DM $27 \%$, CHD $27 \%$, and overall CVD $40 \%$.


| Cardiovascular risk awareness score among Mets and non-MetS hypertension |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Risk Awareness for Developing | Mets |  | Non-Mets | U-test | p |
| CHD (score 4) | 2.05(.79) |  | 1.88(.77) | 1.58 | 0.113 |
| Stroke (score 4) | 2.12(.76) |  | 1.97(.86) | 1.77 | 0.077 |
| CKD (score 4) | 2.06(.78) |  | 1.93(.85) | 1.45 | 0.148 |
| Diabetes (score 4) | 2.03(.85) |  | 1.91 (.85) | 1.11 | 0.267 |
| CVD-Overall (score 16) | 8.26(2.59) |  | 7.68(2.69) | 1.79 | 0.074 |
| CKD, chronic kidney disease; CHD, coronary heart disease; CVD, cardiovascular disease; MetS, metabolic syndrome |  |  |  |  |  |
| Cardiovascular risk awareness levels among MetS and Non-MetS hypertension |  |  |  |  |  |
| Level of Awareness(\%) | MetS | NonMetS | - p | OR(95\%CI) |  |
| CHD |  |  |  |  |  |
| High awareness | 26.9 | 22.1 | 0.399 | 1.29(0.71-2.37) |  |
| Low awareness | 73.1 | 77.9 |  |  |  |
| Stroke |  |  |  |  |  |
| High awareness | 30.1 | 23.3 | 0.242 | 1.42(0.79-2.56) |  |
| Low awareness | 69.9 | 76.7 |  |  |  |
| CKD |  |  |  |  |  |
| High awareness | 28.0 | 23.3 | 0.414 | 1.28(0.71-2.32) |  |
| Low awareness | 72.0 | 76.7 |  |  |  |
| Diabetes |  |  |  |  |  |
| High awareness Low awareness | $\begin{aligned} & 27.4 \\ & 72.6 \end{aligned}$ | 24.4 | 0.602 | 1.17(0.65-2.10) |  | CKD, chronic kidney disease; CHD, coronary heart disease; CVD, cardiovascular disease;

MetS, metabolic syndrome
Risk awareness levels in MetS and non-Mets were not differences, for CHD (OR 1.29, 95\%CI 0.71-2.37), stroke (OR $1.42,95 \% \mathrm{Cl} 0.79-2.56$ ), CKD (OR $1.28,95 \% \mathrm{Cl} 0.71-2.32$ ), DM (OR $1.17,95 \% \mathrm{Cl} 0.65-2.10$ ), and overall CVD (OR $1.33,95 \% \mathrm{Cl}$ 0.78-2.27).

## Conclusions

Non-obese hypertension with MetS had less awareness on risk for CVD. Unawareness of CVD risk may a leading cause of inappropriate treatment, poor selfcare, and adverse outcomes.

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[^0]:    REFERRENCES
    [1] Bradshaw PT, Monda KL, stevens J. Metabolic syndrome in health obese, overweight and normal weight individuals: the Atherosclerosis Risk in Community Study. Obesity 2013;21 (1):203-9.
    [2] Grundy SM, Cleeman JI, Daniels SR, Donato KA, Eckel RH, Franklin BA, et al. Diagnosis and management of the metabolic syndrome: an American Heart Association/National Heart, Lung, and Blood Institute Scientific Statement. Circulation 2005;112:2735-52.

