

To Study the Attitude to One's Health and the Risk Profile of Cardiovascular Diseases among the Population of Tashkent

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Abstract The present study analyzes awareness, attitude to health, its parameters and risk profile of cardiovascular diseases among participants of a preventive survey on cardiovascular diseases. The occurrence of arterial hypertension (AH), overweight, consumption of vegetables and fruits is discussed; factors associated with high self-esteem of health are studied. It was found that women participating in the survey had a high self-esteem of health and faith in the preventive capabilities of modern medicine more often than in the general population. The occurrence of the main CVD risk factors and other parameters of the attitude to health did not differ significantly from the general population indicators. The most important objective markers of high self-esteem of health were normal blood pressure (BP), the number of risk factors for cardiovascular diseases and body mass index <30 . The leading parameters of interest in the prevention of CVD were low self-esteem of health, obesity, the degree of awareness of elevated blood pressure and cholesterol.

Keywords Self-assessment of health, Attitude to health, Awareness, Preventive survey, Cardiovascular diseases, Obesity, Arterial hypertension

1. Introduction

Health, as defined by the World Health Organization (WHO), is a state of complete physical, mental and social well-being [3]. This is a voluminous concept that affects important areas of human life, and in order to call yourself healthy, it is not enough just the absence of diseases and physical defects. Health is an invaluable asset not only for every person, but also for the whole society, it is the main condition and guarantee of a full and happy life. Health helps to successfully solve life tasks, overcome difficulties, and achieve goals. Health, preserved and strengthened by a person, provides him with a long and active life. Therefore, health belongs to one of the basic human values. Along with this, human health is also considered as an indicator of the quality of life [1,2,3,7,9].

As you know, good health is the most important resource for the social and economic development of society. A sufficient level of medical literacy of the population contributes to the change of people's behavior towards a healthier lifestyle, the realization of a person's joint responsibility for their health [1,3,5,7]. The level of literacy, both in general and in health matters, has a significant impact on the state of human health, on the possibility of his cultural, social and personal development [8,9,10,11].

It should be noted that in modern approaches to the definition of the concept of "health" it is understood as a dynamic process due to the peculiarities of the interaction of an individual with the environment: both social and natural [4,6]. Therefore, the study of the problem of the population's attitude to their health is directly related to the ideas of a healthy lifestyle [9,10,11]. The relevance of maintaining a healthy lifestyle is due to high loads on the human body due to the complication of public life, an increase in the risks of man-made, environmental, psychological, political nature, provoking negative shifts in health status [1,4,8,11]. The attitude to health is a complex of medical and social aspects reflecting a subjective assessment of one's health, awareness of its components, the degree of involvement in the process of health promotion. Among these parameters, self-assessment of health is allocated to a separate category as an indicator that closely correlates with the physical health status of a person. In population studies, low self-esteem of health has shown itself as an independent prognostic factor of morbidity, mortality, disability, deterioration of functional status, and the need for medical services [5,9,10]. The study of self-assessment of health in the population makes it possible to form risk groups for chronic non-communicable diseases, indirectly identifying those respondents who have health abnormalities but do not go to doctors [4,11,12,13]. The attitude to one's health in various population groups has been studied in many foreign studies [2,3,4,7,9,10,11,12]. Self-assessment of health is most often discussed in the

context of awareness of risk factors for socially significant pathologies, in particular cardiovascular diseases (CVD) [12]. It should be noted that the problem of cardiovascular diseases is one of the most urgent for the health care of our republic and in particular the city of Tashkent. Thus, in 2018-2022, the incidence of cardiovascular pathologies among the population of the capital averaged 362.1 per 100,000 thousand population. Consequently, the study of the population's attitude to their health, the possibilities of preventive medicine, awareness of individual risk factors for CVD, is of scientific and practical interest.

Objective: to study awareness and attitude to health, its parameters and risk profile of cardiovascular diseases among the population of Tashkent based on the results of a preventive survey.

2. Material and Methods

In the course of the study, a survey of participants in a preventive survey on cardiovascular diseases was conducted using anonymous questionnaire technology, which allows to assess their attitude to their health, the preventive capabilities of modern medicine, as well as awareness of elevated cholesterol levels, self-assessment of blood pressure, the frequency of its measurement, self-assessment of body weight, physical activity level, consumption of vegetables and fruits. A modified WHO psychosocial questionnaire was used for the questionnaire. The survey participants were also measured height, weight, blood pressure, and a cardiologist's consultation was conducted at the request of the participant. The survey was attended by 986 respondents, residents of Tashkent aged 15-64 years, of which 214 (21.7%) were men and 772 (78.3%) women. The share of participants in the age categories 15-24, 25-34, 35-44, 45-54 and 55-64 years was 22, 12, 26, 29 and 11%, the share of men – 14, 37, 21, 8 and 20%, respectively. High self-esteem of health meant the answers “absolutely healthy”, “good health” or “healthy”. The criteria for arterial hypertension (AH) were the levels of systolic blood pressure (SAD) ≥ 140 mmHg and/or diastolic blood pressure (DAD) ≥ 90 mmHg.

3. Results and Discussions

When studying the respondents' attitude to health and preventive capabilities of modern medicine, a high self-esteem of health was revealed in 48.3% of respondents. 3.6% of respondents noted the answer “absolutely healthy”; 15.9% - “good health”; 24.5% of the surveyed rated themselves as “healthy”; 58.4% indicated that they were “not quite healthy”, 4.2% noted the answer “sick”. In the age group of 15-24 years, high self-esteem of health was revealed in 45.3% of respondents. Starting from the age of 25, the prevalence of high self-esteem of health decreased from 52.1% in the 25-34 age groups to 26.7% in 55-64-year-olds. In general, every second, every third and every fourth respondent in the age groups of 25-44, 45-54 and 55-64 years,

respectively, felt healthy. All male respondents and 98% of the surveyed women considered preventive health check to be useful. The answer “I care enough about my health” was most often noted in the age group of 55-64 years (18.8%) and did not occur under the age of 35. A third of respondents believed that they could take care of their health more. The occurrence of this response decreased from 46.2% in the age group of 15-24 years to 24.3% in people aged 55-64 years. Half of the participants indicated that they clearly do not take enough care of their health. Over 40% of respondents measured blood pressure no more than 1 time in 6 months. The largest proportion of respondents who do not measure blood pressure was in the age category of 35-44 years (43.4%). Every fourth respondent measured blood pressure several times a week, but the largest number of respondents doing this was observed at the age of 55-64 years (54.8%). Every third participant was previously measured total cholesterol. At the age of 25-54 years, the occurrence of this parameter was close to the average. At the ages of 15-24 and 55-64, cholesterol was measured in 9.7 and 63.8% of respondents, respectively ($p < 0.001$). Over 40% of respondents consumed less than 300g. Vegetables and fruits per day, while 500 or more grams per day were consumed by less than 10% of the participants. The respondents' consumption of vegetables and fruits did not vary depending on age. In general, women showed a tendency to consume more vegetables and fruits than men. In the course of the study, the awareness of the survey participants about the individual parameters of cardiovascular health was studied. None of the respondents aged 55-64 years did not rate their blood pressure as “normal”. The occurrence of “elevated blood pressure” responses increased with age from 12.7% in the 15-24-year-old group to 48.5% in the 55-64-year-old group. The occurrence of the answer “normal weight” did not show an association with age. Self-assessment of “overweight” was more often determined at the age of 45-54 years (53.4%) relative to persons in the age group of 15-24 years (26.3%). At the age of 35-44 years, women more often than men chose the answer option “normal weight” – 72.1 versus 15.4%, and men, respectively, more often noted “increased weight” – 74.8 versus 24.4%. The occurrence of the response “sufficient physical activity” was close to the average in the age range from 25 to 54 years. At the age of 15-24 years, men more often than women noted the option of “sufficient physical activity” – 74.1 versus 13.9% ($p = 0.02$). Less than 15% of respondents were informed about elevated cholesterol levels. In the course of the study, the awareness of the survey participants about the individual parameters of cardiovascular health was studied. None of the respondents aged 55-64 years did not rate their blood pressure as “normal”. The occurrence of “elevated blood pressure” responses increased with age from 12.7% in the 15-24-year-old group to 48.5% in the 55-64-year-old group. The occurrence of the answer “normal weight” did not show an association with age. Self-assessment of “overweight” was more often determined at the age of 45-54 years (53.4%) relative to persons in the age group of 15-24 years (26.3%). At the age

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Studying the attitude to the health of various categories of the population is important for planning and developing further preventive strategies. The data obtained showed that the attitude to health and the risk profile of CVD of the survey participants had much in common with similar population indicators. Common features include a high prevalence of overweight, obesity, lack of care for their health, unhealthy diet, a positive attitude to preventive health

checks. The peculiarities of the survey participants can be attributed to the tendency to a lower prevalence of hypertension in men, as well as to the higher frequency of high self-esteem of health and faith in the preventive capabilities of modern medicine, characteristic of women, compared with the corresponding indicators in the general population. The most important objective markers of high self-esteem of health were normal blood pressure, the number of CVD risk factors and BMI<30. Participants with responses “normal weight”, “normal blood pressure”, and “I care enough about my health”, “sufficient physical activity” had a high self-esteem of health more often than others. Low self-esteem of health was the strongest predictor of the need for these preventive services. Participants with obesity, elevated blood pressure and cholesterol levels also showed interest in awareness about the prevention of cardiovascular diseases. These factors, apparently, constitute the main range of problems that the population, motivated to promote health, hopes to solve within the framework of preventive measures carried out in the format of individual or group counseling.

4. Conclusions

The present study analyzes awareness, attitude to health, its parameters and risk profile of cardiovascular diseases among participants of a preventive survey on cardiovascular diseases. The occurrence of arterial hypertension (AH), overweight, consumption of vegetables and fruits is discussed; factors associated with high self-esteem of health are studied. It was found that women participating in the survey had a high self-esteem of health and faith in the preventive capabilities of modern medicine more often than in the general population. The occurrence of the main CVD risk factors and other parameters of the attitude to health did not differ significantly from the general population indicators. The most important objective markers of high self-esteem of health were normal blood pressure (BP), the number of risk factors for cardiovascular diseases and body mass index <30. The leading parameters of interest in the prevention of CVD were low self-esteem of health, obesity, the degree of awareness of elevated blood pressure and cholesterol levels.

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