Risk Factors of CVD in Different Ethnic Groups in Kyrgyzstan

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Abstract

Introduction. Cardiovascular disease (CVD) is the leading cause of mortality in Kyrgyzstan. The study aimed at exploring the CVD prevalence depending on various risk factors across diverse ethnic groups in Kyrgyzstan Materials and Methods. A crosssectional study was carried out among six ethnic groups in Kyrgyzstan, aged 18 years and above. The sample was stratified for age, education, family status, and income. We used a questionnaire with 47 questions to explore the health status, behaviour and lifestyle determinants and prevalence of CVD. We used Chi-Square Test to investigate differences between groups, and ANCOVA to determine differences between mean scores on analysed variable. Logistic regression was used to analyse the relationship between independent and dependent variables. Confounding variables were only included if they correlated with both the independent and dependent variables. Interaction analyses were conducted with logistic regression to investigate if there were any differences between the nationalities in the relationships between the independent and dependent variables. Results. Our study confirmed that the CVD prevalence across diverse ethnic groups can be significantly different: In Kyrgyzstan, the most disadvantaged group in this context were East European and the least - Western Asian. There was no difference between studied groups found in the ethnicity-stratified prevalence of such CVD risk factors as low fruit and vegetable consumption, alcohol intake, smoking, and BMI. There was no statistically significant association between educational attainment and CVD risk markers within the studied ethnic groups. The analysis of ethnicity-stratified prevalence of CVD risk markers resulted in a significant difference in physical activity across ethnicity groups. Conclusion. The study results provided an understanding of the ethnicity-stratified prevalence of CVD risk markers in the population in Kyrgyzstan. They could serve as instrumental in tailoring targeted public health interventions to address the burden of CVDs in specific subpopulations.

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