

High prevalence of obesity and cardiovascular risk factors in a Hispanic population without health insurance

Karen Del Rio BS¹; Juan Aguilera MD, MPH^{1,2}; Leah D. Whigham PHD, FTOS²; Joao Ferreira-Pinto PHD¹
¹Center for Interdisciplinary Health Research and Evaluation, ²Paso del Norte Institute for Healthy Living
 at the University of Texas at El Paso

BACKGROUND

- *Ventanillas de Salud* is a program offering free health screenings at the Mexican Consulate in El Paso, TX
- The objective of this study was to assess cardiovascular risk factors accordingly to current ACC/AHA guidelines for blood pressure and NCEP ATP III guidelines for lipids and waist circumference¹⁻²

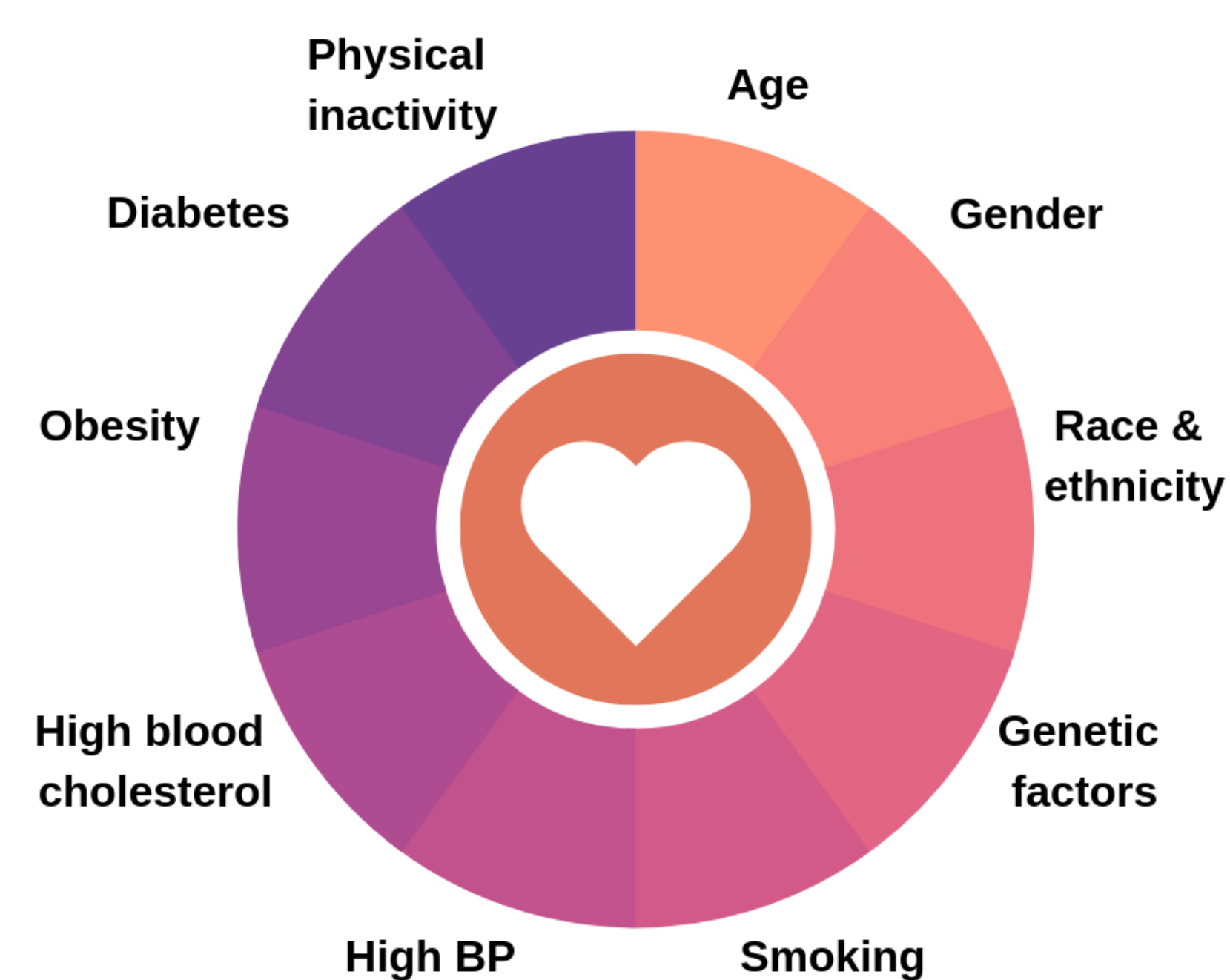


Fig. 1: Cardiovascular risk factors

METHODS

- From 2015-17, 676 uninsured Hispanics were screened
- The following data were collected:
 - Socio-demographic information (e.g. age, sex, income)
 - Biometric (BMI, waistline, and blood pressure)
 - Biochemical measurements (total cholesterol, HDL, LDL, and triglycerides)
- Regression analyses were used to investigate associations of age, sex, income, education, marital status, recent medical checkup, perceived health, and years in the US with overweight/obesity and other risk factors

RESULTS

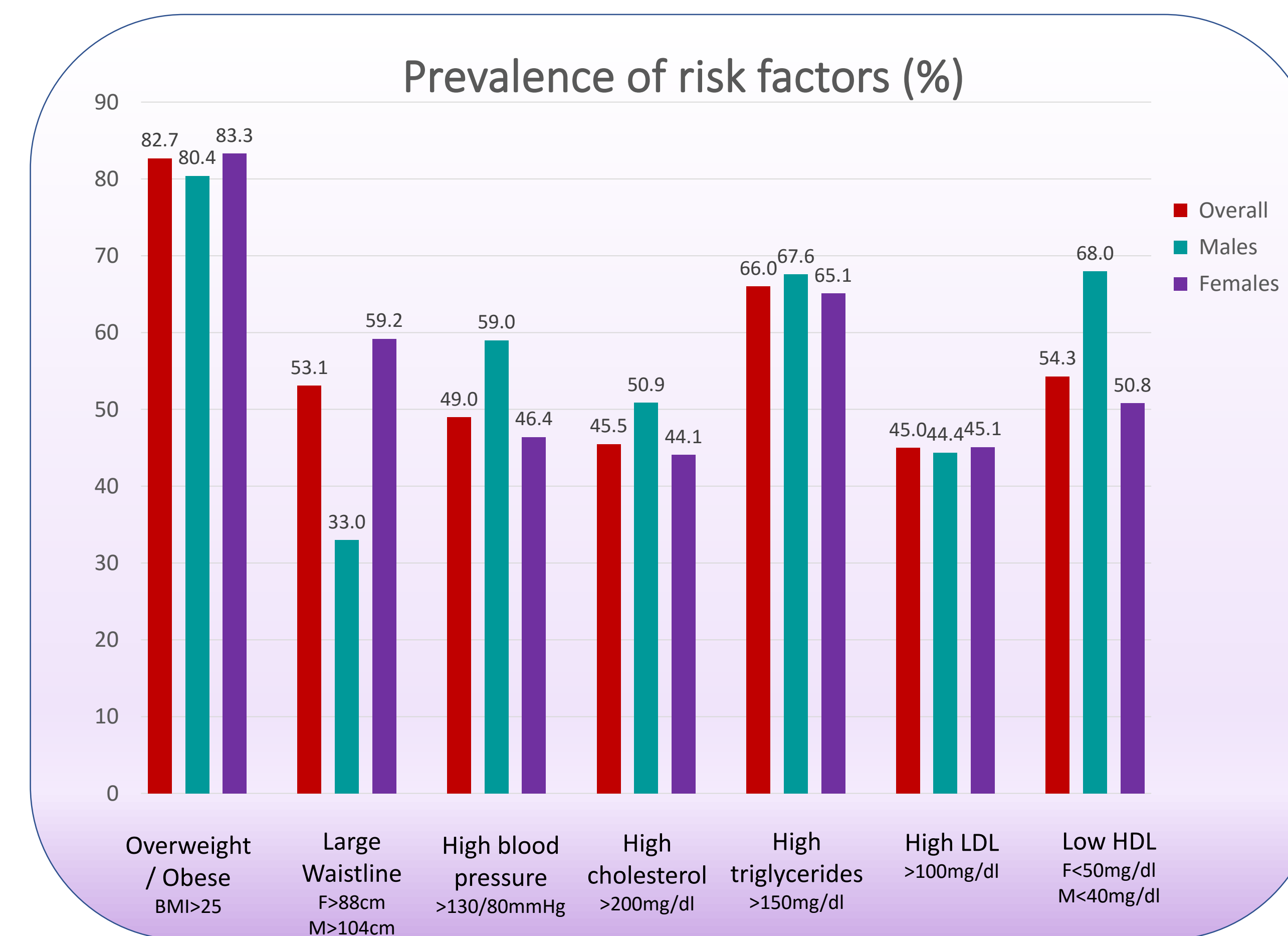


Fig. 2 : Prevalence of cardiovascular risk factors (overall and by sex)
 Mean age (SD) was 49(13) and BMI was 29.9(5.5)

Logistic regression after adjusting for socio-demographics showed:

Age was associated with all risk factors (OR~0.02-0.03 p<0.01)

Being overweight/obese was associated with (p<0.001)

- Large waist (OR=3.68 p<0.001)
- High triglycerides (OR=0.98 p=0.01)
- High blood pressure (OR=0.65 p=0.08)

High blood pressure was associated with (p<0.001)

- Being male (OR=0.71 p=0.01)
- Fair/poor perceived health (OR=0.49 p=0.04)

Large waistline was associated with (p<0.001)

- Being female (OR=1.13 p=0.03)

High total cholesterol was associated with (p<0.001)

- Income below \$20,000 (OR=0.56 p=0.03)

High triglycerides were associated with (p=0.001)

- Years in the US (OR=-0.20 p=0.03)
- Fair/poor perceived health (OR=0.62 p=0.01)

Models for HDL and LDL were not significant

CONCLUSIONS

- In this uninsured, Hispanic population, we found higher rates for overweight/obesity (83%), total cholesterol (44%), and high blood pressure (46%) compared to county, state, and national rates of adult populations³
- People without health insurance should be a priority group for interventions focused on preventing the development and the mitigation of risk factors.
- Results from this study could be used to make resource allocation decisions for health programs as part of the *Ventanillas de Salud*

REFERENCES

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ACKNOWLEDGEMENTS



Fig. 3 Data collection team at the Mexican Consulate at El Paso, TX

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