# CARDIOVASCULAR RISK FACTORS AMONG COLLEGE STUDENTS: KNOWLEDGE, PERCEPTION AND RISK ASSESSMENT 

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## Background

- Young adults unrealistic or uninformed about their health and eating habits.
- 1/3 of this population is unaware of risk
- Plaque formation begins in young adulthood
- Approximately $35 \%$ of college students are overweight or obese
- College students lack information on CVD.
- Why college students?
- Similar education background in a common setting
- Transition from home to college environment


## Purpose

To assess the general knowledge and perception (perceived susceptibility and perceived severity) among a college population of young adults regarding cardiovascular risk factors and to screen for individual cardiovascular risks


## Aims

1. To describe non-modifiable and modifiable CV risk factors in college students
2. To examine co-occurrence of CV risk factors in college students
3. To examine the relationships among knowledge, perceived susceptibility, perceived severity, and the 10-year and 30 -year CVD risk in college students

## Aims

4. To examine the influence of college students' characteristics on the risk assessments
5. To cluster subgroups of college students for CV risk based on socio-demographics, non-modifiable and modifiable risk factors

## Methods

- A cross-sectional, descriptive research study


## Recruitment

- University of Nebraska-Lincoln
- University Health Center
- Student Union


## Measures

- Socio-demographics
- Heart Disease Fact Questionnaire
- Health Beliefs Related to Cardiovascular Disease
- Biometrics (random blood glucose, lipid panels, height, weight, blood pressure)
- Risk assessment (Pooled Cohort risk equations \& 30-year CVD)


## Sample

- Convenience sampling
- Inclusion criteria: ages 19 to 39, enrolled at UNL
- Exclusion criteria: diagnosed with CVD such as myocardial infarction, stroke or CHD.


## Sample

- 158 participants completed the research for data analysis.
- Average age $24.33 \pm 4.61$ years old
- Majority were male ( $n=72,54.4 \%$ ), single ( $n=131,82.9 \%$ ), and had insurance coverage ( $n=146,93.0 \%$ ).
- Race/ethnic distribution:
- White 63.1\% ( $n=99$ ) ; Asian/Pacific Islander $13.4 \%(n=21)$
- African American 8.3\% ( $n=13$ ); Hispanic or Latino 7.6\% ( $n=12$ )
- Native American 1.3\% ( $n=2$ ) ; Other 6.4\% ( $n=10$ )


## Results Aim 1. To describe non-modifiable and modifiable CV risk factors in college students

## Reported

- 51 (32.3\%) Family history of heart disease
- 12 (7.6\%) Hypertension
- 11 (7.0\%) Current smokers
- 2 (1.3\%) Diabetes


## Measured

- 71 (44.9\%) Overweight/obese
- 20 (12.7\%) Hypertension
- 6 (3.8\%) Diabetes
- 5 (3.2\%) Hyperlipidemia


## Results Aim 1. To describe non-modifiable and modifiable CV risk factors in college students

- Average DBP, glucose, total cholesterol, LDL-C, HDL-C, and triglycerides were all within normal range.
- Average SBP in prehypertensive stage (122.9)
- Average BMI 25.7
- Average lifetime risk assessment 31.4\%
- Average 30-year CVD $4.8 \%$ (full) and $2.3 \%$ (hard)


## Results Aim 1. To describe non-modifiable and modifiable CV risk factors in college students

- Physical activity most frequently reported were moderate levels ( $n=65,41.1 \%$ )
- Most reported being active 3-5 times per week ( $n=81$, 51.3\%)
- Half ( $n=79,50.0 \%$ ) eat out occasionally (2-3 times per week)
- About $81 \%$ of the participants' drink sugary beverages
- 58 (36.7\%) reported occasionally eat red meats


## Aim 2. To examine co-occurrence of CV risk factors in college students

- 75 (47.5\%) no CV risk factors
- 57 (36.1\%) at least one risk factor
- 22 (13.9\%) two risk factors
- 4 (2.5\%) three risk factors.

Total 34 risk factors that co-occurrences, 30 of them involved being overweight/obese.

## Aim 2. To examine co-occurrence of CV risk factors in college students

## Co-Occurrence of Risk Factors

|  | N | \% of <br> sample |
| :--- | :---: | :---: |
| Overweight \& Hypertension | 17 | $10.76 \%$ |
| Overweight \& Smoking | 6 | $3.80 \%$ |
| Overweight \& Diabetes | 4 | $2.53 \%$ |
| Overweight \& Hyperlipidemia | 3 | $1.90 \%$ |
| Diabetes \& Hypertension | 2 | $1.27 \%$ |
| Hypertension \& Smoking | 1 | $0.63 \%$ |
| Diabetes \& Hyperlipidemia | 1 | $0.63 \%$ |
| Hypertension \& Hyperlipidemia | 0 |  |
| Hyperlipidemia \& Smoking | 0 |  |
| Diabetes \& Smoking | 0 |  |

[^0]
## Aim 3. To examine the relationships among knowledge, perception and risk assessments

- HDFQ mean score was 13.9 (median score 15.0) ranges from 6-16
- HBCVD mean score was 20.8 (median score 21.0) ranges from 13-33


## Aim 3. To examine the relationships among knowledge, perception and risk assessments

- Knowledge of CV risk factors and the lifetime risk assessment were positively associated ( $\rho=0.172, p=0.048$ )
- Perception of CV risk factors was positively association with the 30 -year full CV risk assessment ( $\rho=0.157, p=0.048$ )
- No significant relationships between knowledge and perception of CV risk factors ( $p=0.191$ )


## Aim 4. To examine the influence of college students' characteristics on the risk assessments

- Significant differences found in the 10-year and 30-year CV risk assessments between genders
- Family history of heart disease demonstrated a significant differences in the full 30-year CV risk assessment ( $p=0.022$ )
- No differences between White and non-White

Aim 5. To cluster subgroups of college students for CV risk based on socio-demographics, non-modifiable and modifiable risk factors.

|  | Cluster 1 | Cluster 2 | Cluster 3 | Cluster 4 | Cluster 5 | Cluster 6 | Cluster 7 | p -value |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | $n=65$ | $n=5$ | $n=54$ | $n=3$ | $n=15$ | $n=8$ | $n=1$ |  |
| Gender |  |  |  |  |  |  |  | <0.0001 |
| Male | 19 | 5 | 44 | 2 | 7 | 7 | 0 |  |
| Female | 46 | 0 | 10 | 1 | 8 | 1 | 1 |  |
| Race/Ethnicity |  |  |  |  |  |  |  | <0.0001 |
| White | 29 | 4 | 46 | 2 | 8 | 4 | 1 |  |
| Non-White | 36 | 1 | 8 | 1 | 7 | 4 | 0 |  |
| Marital status |  |  |  |  |  |  |  | 0.035 |
| Married/Living Together | 18 | 1 | 4 | 0 | 2 | 0 | 0 |  |
| Single/Divorced <br> Insurance (Yes) | 47 | 4 | 50 | 3 | 13 | 8 | 1 |  |
|  | 65 | 5 | 54 | 3 | 6 | 7 | 1 | <0.0001 |
| PMH - Heart Problems (Yes) | 0 | 0 | 0 | 3 | 0 | 0 | 0 | <0.0001 |
| PMH - Cancer (Yes) Family History of Heart Disease (Yes) | 0 | 0 | 0 | 01 | 0 | 0 | 1 | 0.061 |
|  | 19 |  | 22 |  | 3 | 3 | 0 |  |
| Taking BP Medication (Yes) | 0 | 5 | 0 | 0 | 0 | 0 | 0 | <0.0001 |
| Diabetic (Yes) | 0 | 0 | 0 | 0 | 0 | 5 | 0 | <0.0001 |
| Overweight/Obese (Yes) | 8 | 4 | 38 | 2 | 8 | 6 | 1 | <0.0001 |
| Hypertension (Yes) | 0 | 3 | 12 | 1 | 1 | 2 | 0 | <0.0001 |
| Hyperlipidemia (Yes) | 0 | 0 | 0 | 0 | 0 | 4 | 0 | <0.0001 |
| Current Smoker (Yes) | 0 | 0 | 1 | 0 | 10 | 0 | 0 | <0.0001 |
| Physical Activity |  | $M=3.60$ |  | $M=3.35$ |  |  |  | 0.05 |
| Eat Out |  |  |  |  |  |  |  | 0.079 |
| Drink Sugary Beverages |  |  |  |  |  |  |  | 0.198 |
| Eat Red Meat |  |  | $M=2.90$ |  |  | $M=2.60$ | $\mathrm{M}=3.00$ | 0.001 |

[^1]
## Conclusion

1. College students are a targeted population that could benefit from CV risk reduction since more than $50 \%$ of our study population had one or more CV risk factors and should be screened routinely.
2. The 30 -year CVD risk assessment versus the 10 -year CVD risk assessment should be used in college students because the 10year CVD risk assessment is limited in young adults and will only generates a 10-year risk estimates for individuals between the ages 40 to 79 .
3. High risk groups through clustering technique can be used to identify groups of college students to target for interventions.

## Implications/Recommendations

- This population is not being aggressively screened or treated
- Opportunity for health professional programs in Colleges to work with health centers and campus administration by instituting risk factors modification programs or events in this population


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Thank You!!!


[^0]:    Note: $\mathrm{N}=26$ had two or more risk factors.

[^1]:    Note: $\mathrm{PMH}=$ past medical history; $M=$ mean values from mean plot of ANOVA

