



Izvješće o završetku prve faze znanstvenog projekta "Regionalna distribucija čimbenika rizika u hospitaliziranih koronarnih bolesnika"

Report of finalization of the first stage of the scientific project "Regional Distribution of Risk Factors in Hospitalized Coronary Patients"

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Sveseljem možemo objaviti da smo zajedničkim trudom u trinaest zdravstvenih centara Republike Hrvatske uspjeli prvesti kraju prvu fazu znanstvenog projekta Ministarstva znanosti, obrazovanja i športa (MZOŠ) broj 108-1080135-0126, pod nazivom "Regionalna distribucija čimbenika rizika u hospitaliziranih koronarnih bolesnika".

Uključivanje ispitanika u ovaj projekt počelo je u travnju 2007., a do zaključenja digitaliziranja podataka 25. siječnja 2010. godine uključeno je 1.298 ispitanika.

Projekt je zamišljen kao dio velikog programa od nekoliko znanstvenih projekata s ciljem sakupljanja novih spoznaja koje bi uvelike pomogle u prevenciji i liječenju koronarne bolesti srca (KBS) na način da bi ocrtale profil rizika za KBS u Republici Hrvatskoj i njegovu zemljopisnu raspodjelu, a bio bi vrlo vjerojatno primjenjiv i na druge zemlje ovog podneblja. Opći, a posebno zdravstveni, je interes svake države ustanoviti glavne čimbenike rizika za najčešće bolesti i uzroke smrti stanovništva specifičnog ispitivanog područja te tako pripremiti temelje za nacionalnu strategiju primarne i sekundarne prevencije.

Program pod nazivom "Regionalnost, dinamika srčanožilnih čimbenika rizika i zdravstvene intervencije" prihvaćen je od MZOŠ, a voditelj je prof. dr. sc. Mijo Bergovec. Uz već spomenuti projekt program obuhvaća još dva projekta, "Kardiovaskularni rizici u školske djece i mladih" — razvoj modela intervencije (108-1080135-0263), kojeg vodi prof. dr. sc. Vesna Jureša i "Regionalizam kardiovaskularnih bihevioralnih rizika" (108-1080135-0264) model intervencije kojim ravnava prof. dr. sc. Silvije Vuletić.

U izvedbu projekta uključeno je trinaest centara na kojima se izvodilo istraživanje (pet centara u priobalnom području i osam centara u kontinentalnom području; **Tablica 1**). U Zagrebu su uključene dvije bolnice: Klinička bolnica "Dubrava" i Klinička bolnica "Sv. Duh"; kontinentalni dio Hrvatske obuhvatilo je šest općih bolnica (OB), a priobalno područje pet ustanova (kontinentalne: OB Čakovec, OB Karlovac, OB Koprivnica, OB Varaždin, OB Slavonski Brod, OB Bjelovar; priobalne: Klinički bolnički centar Rijeka, OB Pula, OB Zadar, Klinički bolnički centar Split i OB Dubrovnik)

Potrebna veličina uzorka kako bi se postigla potrebna statistička snaga bila je unaprijed određena i iznosila je 1.290 ispitanika. Ispitanici su se regrutirali u centrima među hospitaliziranim bolesnicima zbog akutnog ili kronič-

We are happy to announce that owing to the joint effort of 13 medical centers of the Republic of Croatia, we managed to finish the first stage of the scientific project by the Ministry of Science, Education and Sport (MZOŠ) no. 108-1080135-0126 entitled "Regional distribution of the risk factors in hospitalized coronary patients".

The involvement of the examinees in this project started in April 2007 and some 1298 examinees were involved prior to finalization of digitalization of data on 25th January 2010.

The project is designed as a part of the large program consisting of several scientific projects with an aim of collecting new information that would greatly help in prevention and treatment of coronary heart disease (CHD) in the manner to define the risk profile for the CHD in the Republic of Croatia and its geographical distribution and it would be probably applicable to any other countries in this region. It is a general, especially medical interest of every country to determine main risk factors for the most frequent diseases and causes of death of citizens of the specific examined area and to prepare thus the foundations for the national strategy of the primary and secondary prevention.

The program entitled "Regional features, dynamic of cardiovascular risk factors and medical intervention" has been adopted by the MZOŠ led by Prof. Mijo Bergovec, PhD. Besides the project, that has already been mentioned, the program includes two additional projects "Cardiovascular risks in school children and young people" — the development of the intervention model ((108-1080135-0263) led by Prof. Vesna Jureša PhD and "Regionalism of cardiovascular behavioral risks" (108-1080135-0264) the model of intervention led by Prof. Silvije Vuletić, PhD.

The implementation of the project includes 13 centers where researches were conducted (5 centers in the coastal area and 8 centers in the continental area; **Table 1**). In Zagreb, two hospitals are involved: Clinical Hospital Dubrava and Clinical Hospital Sv. Duh; the continental part of Croatia included six general hospitals (GH), and the coastal region included five institutions (the continental ones: GH Čakovec, GH Karlovac, GH Koprivnica, GH Varaždin, GH Slavonski Brod, GH Bjelovar; coastal region: Clinical Hospital Centre Rijeka, GH Pula, GH Zadar, Clinical Hospital Centre Split and GH Dubrovnik)



Centre	N (%)
CH Dubrava Zagreb	316 (24.4%)
CH Sv. Duh Zagreb	48 (3.7%)
GH Bjelovar	8 (0.6%)
GH Čakovec	59 (4.6%)
GH Karlovac	61 (4.7%)
GH Koprivnica	26 (2.0%)
GH Slavonski Brod	127 (9.8%)
CHC Split	133 (10.3%)
CHC Rijeka	93 (7.2%)
GH Dubrovnik	166 (12.8%)
GH Pula	118 (9.1%)
GH Varaždin	115 (8.9%)
GH Zadar	28 (2.2%)
All	1298

*CH=Clinical Hospital; GH=General Hospital; CHC=Clinical Hospital Centre.

Table 1. Number of patients according to centre

nog oblika KBS. Liječnik je u razgovoru s bolesnikom ispunjavao opsežan upitnik od 20 stranica koji je sadržavao širok spektar podataka (opći podaci, laboratorijski nalazi, fizikalna i antropometrijska mjerenja, anamneza, analiza snimljenog 12-kanalnog elektrokardiograma pri dolasku i pri otpustu, način liječenja — terapija pri dolasku, tijekom hospitalizacije i pri otpustu, itd.)

Trenutačno se datoteka statistički obrađuje i možemo uskoro očekivati prve rezultate koji će nam potvrditi ili odbaciti dobro poznatu hipotezu da geografska raspodjela rizika za KBS uistinu postoji, a naša zemlja je zbog svojih geografskih specifičnosti idealna za istraživanje takve vrste.

Projekt se nastavlja i ulazi u sljedeću fazu, a to je praćenje dosad anketiranih hospitaliziranih bolesnika s KBS s ciljem da se ustanovi četverogodišnje preživljavanje, komplikacije, broj ponovnih hospitalizacija te način liječenja u pojedinim bolnicama u Hrvatskoj. Nadalje, utvrdit će se je li u razdoblju praćenja došlo do promjena pojavnosti ovih čimbenika rizika u hospitaliziranih koronarnih bolesnika.

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The required size of sample as to achieve necessary statistical power would be predetermined and the number of examinees is 1290. The examinees have been recruited in centers among hospitalized patients due to acute or chronic form of CHD. Talking to a patient, a doctor completed a comprehensive questionnaire consisting of 20 pages containing a wide range of data (general data, laboratory findings, physical and antropometric measurements, anamnesis, the analysis of recorded 12-lead electrocardiogram upon arrival and release from hospital, treatment method — therapy upon arrival, during the hospitalization and upon discharge etc.).

Currently, the data file is statistically processed and soon we can expect first results that will verify or reject the well known hypothesis that geographic risk distribution for the CHD really exists and our country is due to its geographic specific features ideal for the research of such type.

The project continues and enters the next stage and this is monitoring of previously questioned hospitalized patients with CHD with the aim to determine four-year survival, complications, a number of repeated hospitalizations and the manner of treatment in specific hospitals in Croatia. Besides, it will be determined whether during the period of monitoring any changes to occurrence of risk factors in hospitalized coronary patients have been made.