

4.4.6 DRUG THERAPY AND COUNSELLING FOR CVD RISK

Details on drug therapy and counselling services (including glycaemic control) to prevent heart attacks and stroke among adults aged between 40–69 years with a ten-year CVD risk of $\geq 30\%$ or those with existing CVD have been presented below.

Drug therapy has been defined as those on medication for raised blood glucose/diabetes, raised total cholesterol, or raised blood pressure, or taking aspirin or statins to prevent or treat heart disease.

Counselling has been defined as those who received advice from a healthcare professional to quit/not to start the use of tobacco, to reduce salt in diet, to eat at least five servings of fruit and/or vegetables per day, to reduce fat in diet, to start or increase physical activity and to maintain a healthy body weight or to lose weight.

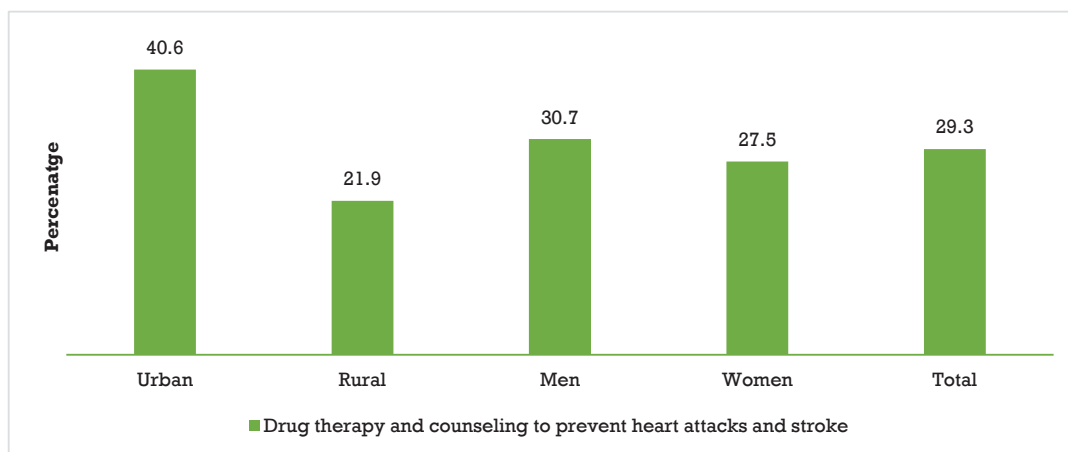


Figure 4.4.6.1 Adults aged 40–69 years with 10-year CVD risk of $\geq 30\%$ or with existing CVD received drug therapy and counselling to prevent heart attacks and stroke as defined by WHO, by area of residence and gender (Percentage)

Among those with ten-year CVD risk of $\geq 30\%$ or with existing CVD, 29.3% received drug therapy and counselling to prevent heart attacks and stroke, and a higher percentage were from the urban areas (40.6%) and were men (30.7%). (Figure 4.4.6.1)

The age group (40–49, 50–59 and 60–69 years) variations showed that 23.3%, 21.3% and 36.8% respectively received drug therapy or counselling for prevention of heart attacks and stroke. (Annexure table 4.4.6.1a)