CARDIOMETABOLIC RISK FACTORS AND CARDIOMETABOLIC RISK SCORES IN INDIVIDUALS WITH SCHIZOPHRENIA: ARE WE ACCURATELY PREDICTING RISK?

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Introduction:

Individuals with major mental illnesses (MMI) die significantly younger than the general population. Rates of Cardiovascular morbidity and mortality have fallen in the general population, due to effective primary prevention through the use of accurate cardiovascular risk assessment algorithms. This reduction has not occurred in individuals with MMI and there is evidence that the mortality gap is widening.

Objectives/Aims:

To determine the cardiometabolic risk profile and cardiovascular risk score in patients with schizophrenia compared to controls.

Methods:

1,977 individuals with schizophrenia or related psychoses were compared to 215,165 controls. Cardiometabolic risk factors including cholesterol, BMI, systolic blood pressure, smoking status and diabetes were compared. Mean age and sex adjusted 10 year cardiovascular risk prediction scores were generated and compared using the Joint British Societies Score (JBS2).

Results:

Rates of diabetes, smoking and obesity were significantly higher in both men and women with schizophrenia compared to controls. In men with schizophrenia mean JBS2 score was lower than controls (10.2% vs. 10.9%). Rates of individuals at high risk of cardiovascular disease (JBS2 >20%) were lower in men with schizophrenia (28.4% vs. 39.3%). In women with schizophrenia mean JBS2 scores were higher (8.3% vs. 7.9%) and the rate of individuals at high risk of cardiovascular disease was higher than in controls (13.4% vs. 11.8%).

Conclusions:

Despite high rates of cardiometabolic risk factors in men and women with schizophrenia across all age groups, cardiovascular risk algorithms may not adequately predict increased 10 year cardiovascular risk in men.