

11 Risk factor: socioeconomic status

"Wealth is both an enemy and a friend."
Nepalese proverb

In developing countries, coronary heart disease has historically been more common in the more educated and higher socioeconomic groups, but this is beginning to change. In industrial countries, such as Canada, the United Kingdom, and the United States, there is a widening social class difference in the opposite direction.

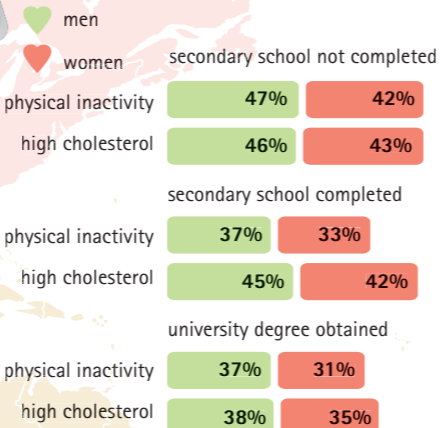
Studies in developed countries suggest that low income is associated with a higher incidence of coronary heart disease, and with higher mortality after a heart attack. The prevalence of risk factors for heart disease, such as high blood pressure, smoking and diabetes, is also higher. The use of medications is lower, especially of lipid-lowering agents and ACE inhibitors, as well as other treatments, such as cardiac catheterization.

The pathways by which socioeconomic status might affect cardiovascular disease include: lifestyle and behaviour patterns; ease of access to health care; and chronic stress.

In Canada, children from poor families are twice as likely to be obese as children from rich families.

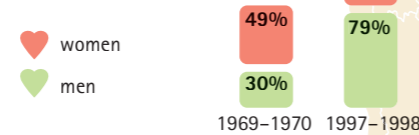
Prevalence of CVD risk factors by education in Canada

Percentage of people aged 18 to 74 years with high levels of physical inactivity and high cholesterol, by educational level, age standardized 1986-1992



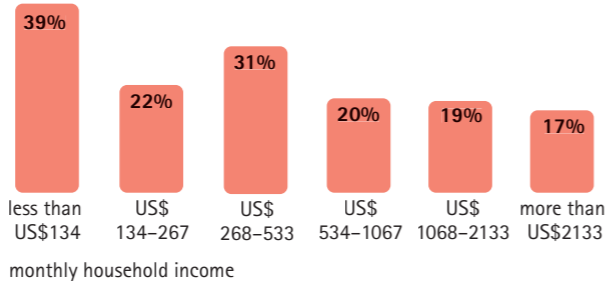
The CVD mortality gap in the USA

Percentage increased CVD mortality of lowest socioeconomic (SE) group over highest SE group, in people aged 25 to 64 years 1969-1998



Prevalence of high blood pressure by income in Trinidad and Tobago

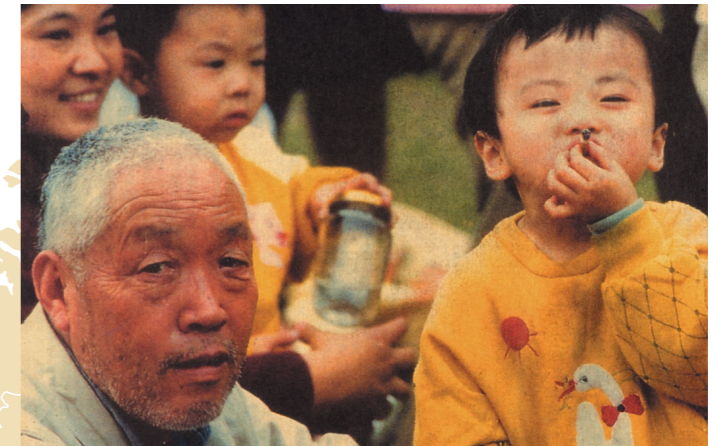
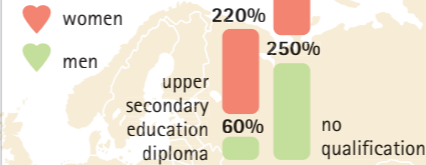
Percentage of women aged 24 to 85 years with blood pressure of 140/90 mmHg or above, or currently treated 2001



Low socioeconomic status is associated with increased risk of cardiovascular disease.

Educational level and obesity in Italy

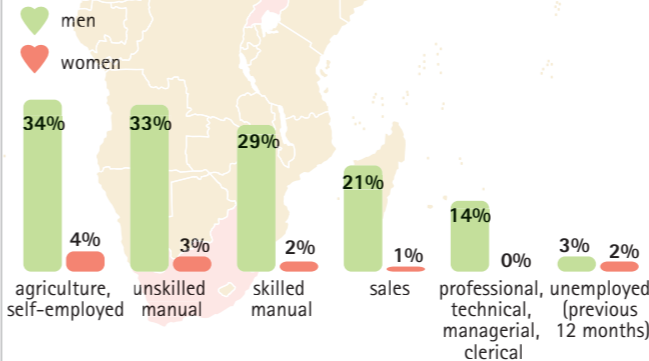
Percentage increased risk of obesity in people aged 35 to 74 years, in comparison with university graduates 1998



In China, years of education are more important than occupation, income or marital status in relation to cardiovascular risk factors, especially cigarette smoking.

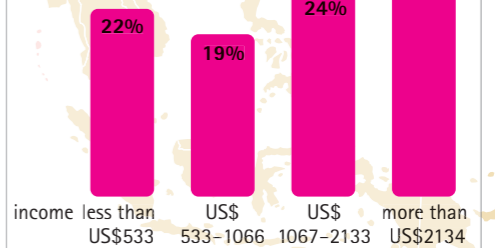
Smoking and occupation in Uganda

Percentage of women aged 15 to 54 years and men aged 15 to 59 years who currently smoke daily by category of work 2000-2001



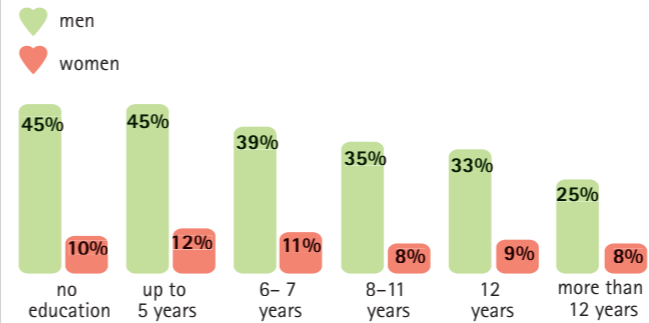
Income and obesity in Saudi Arabia

Percentage of people aged 20 years and above with Body Mass Index of more than 30 kg/m² 1990-1993



Smoking by years of education in South Africa

Percentage of people aged 15 years and above who currently smoke daily 1998



Prevalence of diabetes by income in India

Percentage of people aged 20 years and above with diabetes, by income level 2000

