



Abstracts from the World Congress of Cardiology/ Brazilian Congress of Cardiology 2022

ABSTRACT

THE EDITORIAL TEAM (ON BEHALF OF THE WORLD HEART FEDERATION)

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ABSTRACT

These are the abstracts from the combined 77th Brazilian Congress of Cardiology, together with the World Congress of Cardiology, held in October 2022. From 1950 to today, the World Heart Federation's World Congress of Cardiology (WCC) has been a key event on the cardiovascular calendar, offering a global perspective on cardiovascular health and bringing together thousands of cardiology professionals from all over the world with one common goal: to reduce the global burden of cardiovascular disease and help people live longer, healthier lives.

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PREVALENCE OF FOOD INSECURITY AND ITS ASSOCIATION WITH HEALTH OUTCOMES IN PATIENTS WITH CHRONIC CHAGAS DISEASE

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Introduction: Chagas disease (CD) is a neglected disease that infected 6 to 7 million people worldwide. Individuals with CD are usually from low socioeconomic status and, therefore, more prone to food insecurity (FI).

Objective: To assess the prevalence of FI in CD and its association with clinical forms, nutritional status (NS), comorbidities, and biomarkers.

Methods: This is a cross-sectional study including patients diagnosed with CD (confirmed by two serological tests), from both sexes. Patients diagnosed with diseases that affect the immune system, other infectious diseases during the data collection period, those using corticosteroids or anti-inflammatory drugs, cancer patients, pregnant women, and cognitive alterations were excluded. The FI was evaluated according to the Brazilian scale of FI (EBIA 2003). The classification of the clinical form of Chagas disease was obtained following the determinations of the Brazilian Consensus on CD (2016). Parameters established by the Brazilian Institute of Geography and Statistics were used to collect the socioeconomic variables. Anthropometric measurements (weight, height, waist circumference) were collected to assess NS. Biomarkers included lipid profile and plasma glucose. Descriptive statistics included mean (standard deviation for numerical) and percentage (frequency) for categorical variables. Comparisons between participants without and with FI were performed using t-test for numerical and chi-squared test for categorical variables. Linear and logistic regression models adjusted by age, sex, education level, and race were fitted to evaluate the association between FI status and clinical forms, NS comorbidities, and biomarkers.

Results: Three hundred sixty individuals (56.1% of women) were included in the study, with a mean age of 60.7 (10.8) years. Of those, 30.8% had FI. Participants with FI were more likely to be women, had a lower per capita income, a lower height, a greater percentage of illiterate/incomplete elementary education, and greater frequency of obesity (Table). No significant association was observed between FI and clinical forms of CD, NS, comorbidities, and biomarkers after adjustments for age, sex, education level, and race.

Conclusion: Despite the elevated prevalence of FI among patients with CD, no association was observed for health outcomes. Longitudinal studies examining the impact of FI on health parameters and mortality of individuals with CD are warranted.