

LETTER TO THE EDITOR

INCIDENCE AND PREVALENCE OF CIRCULATORY DISEASES IN LEBANON: A PHYSICIAN'S INQUIRY

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To the Editor:

Diseases of the circulatory system are the main causes of death and drivers of health care costs in Lebanon. However, no study has yet tried to assess the burden of such diseases in Lebanon. This study set out to estimate the incidence and prevalence of major diseases of the circulatory system by using physician-reported data. For this purpose, a sample of physicians treating such diseases (cardiologists, neurologists, and vascular surgeons) was selected, taking into consideration the relative distribution of physicians in the country. A questionnaire was used to collect data on the estimated prevalence and incidence of selected circulatory diseases and sociodemographic information about the patients.

Estimated projections to population-based prevalence and incidence were made with the latest demographic survey conducted in Lebanon in 2004 to acquire the total number of population at risk (aged ≥ 30 years) ($n=1,687,759$) because most ($>90\%$) of patients examined by the three specialties fell in this age category. Despite the limitations in the rigor of our estimates, they provide a crude assessment that should have valuable public health implications.

A total of 236,815 patients with circulatory diseases were examined by physicians belonging to the three specialties in 2005, which indicates an overall prevalence of 14%; cardiovascular and cerebrovascular diseases have prevalences of 6.8% and 5.2%, respectively, among persons aged ≥ 30 years. Compared with findings in Western data, we estimate relatively high rates of circulatory diseases in Lebanon. The prevalences of

myocardial infarction (2.4%) and stable (2.7%) and unstable (1.9%) angina are almost comparable to those in developed countries.¹ However, while the incidence of stroke did not exceed 1% in developed countries,^{2,3} it reached almost 1.6% in Lebanon. In addition, the prevalence of stroke (3.9%) and transient ischemic attacks (1.3%) was also higher in Lebanon as compared to other countries with similar demographic transitions.⁴ The prevalence of peripheral arterial disease (2.06%) is also worrisome because it is almost double the prevalence reported in Western countries.⁵

These figures are worrying and can be attributed to several factors. Knowledge about circulatory diseases is deficient in Lebanon, almost half of the Lebanese do not exercise regularly and more than two-thirds acknowledge not eating healthfully, and primary prevention programs are absent from the Lebanese health care system.⁶ Work on the driving causes is needed to prevent an increasing incidence of these diseases and a subsequent increase in healthcare costs.

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