Method  We carried out the research by multi-steps random sampling through questionnaires. 1512 records had been completed for analysis. Indicators as smoking, age, education, occupation and income, etc., were calculated.

Results  The total smoking rate was 23.8%, 52.4% in male and 4.0% in female. The smoking rates of different education, occupation and income had statistical differences.

Conclusion  The smoking rate of Shougang district was lower than that of Beijing and the whole country. The smoking rate in male was significantly higher than that in female. It is very important to develop the health education and the smoking control in some special people.

Conclusions  There were statistical difference about the levels of the blood lipids between the Li and the Han nationality. The reason could be that the Li nationality living in the poor area who are under low living standard. The different Polymorphisms of blood lipid genes may be one of the causes.

Background  Sleep deprivation (SD) is a common phenomenon in emergency, especially during war time, conflict, natural disasters or disease crisis such as SARS, it can cause exhaustion in members of armed forces and non-combat casualty. In conditions of high-tech war, deprivation is becoming more serious and mandatory than ever before.

Objective  To study the impact of 24-h sleep deprivation on arrhythmia and heart rate variability (HRV).

Methods  Soldiers were used as research objects, they were divided into normal group and the sleep deprivation group. 1. Heart rate, atrial premature beat, ventricular premature beat and heart rate variability were observed by 24-h ambulatory ECG during sleep deprivation. 2. The changes of serum cortisol levels were detected during sleep deprivation.

Results  1. After 24 h sleep deprivation, HF, SDNN and RMSSD significantly reduced, LF significantly increased, LF /HF showed a significant increase. 2. Part of volunteers presented atrial premature beats and ventricular premature beats. 3. The level of serum cortisol significantly increased.

Conclusion  The underlying mechanism of alteration of arrhythmia and HRV after 24-h sleep deprivation would be ascribed to lower vagal activity and elevated sympathetic activity.

Context  Epidemiological studies have identified snoring as a risk factor for atherosclerotic cardiovascular diseases. However, there is little evidence on snoring and subclinical atherosclerosis.

Objective  To evaluate whether and to what extent snoring is associated with carotid atherosclerosis.

Methods  Population-based study was conducted at a community in Beijing on 1050 subjects aged 50~79 years who had an ultrasound examination of the carotid artery at age ranging from 45 to 74 years in 2002 and a carotid ultrasonic reexamination in 2007, as well as a cross-sectional survey including snoring information and cardiovascular risk factors from September to November 2007.

Main Outcome Measures  Carotid intima-media thickness (IMT) and plaque as two indexes of carotid atherosclerosis were diagnosed by B-mode ultrasonography. Association of snoring with increased IMT of common carotid artery (CCA) and plaque general were analysed by multivariable logistic regression models adjusted for cardiovascular risk factors.

Results  The prevalence of snoring was 64.3% in this population (71.4% in males and 58.4% in females). In multivariable models adjusted for traditional risk factors, snoring was significantly associated with increased IMT of common carotid artery (CCA) (OR, 1.38; 95% CI 1.04 to 1.82) and bifurcated carotid artery (BCC) (OR, 1.65; 95% CI 1.24 to 2.19), with having plaque of CCA (OR,
1.62, 95% CI 1.01 to 2.58) and BCA (OR, 2.39; 95% CI 1.79 to 3.18), with newly detected increased IMT of BCA (OR, 1.60; 95% CI 1.11 to 2.30), and with newly detected plaque of BCA (OR, 2.14; 95% CI 1.57 to 2.95).

Conclusions There were distinct associations between snoring and carotid atherosclerosis, which provides evidence for a relation between snoring and subclinical atherosclerosis.

Objective To provide the changing prevalence of carotid plaque in a Chinese elderly population from 2002 to 2007 and accordingly evaluate the predictive effect of baseline lipid levels of interest on the newly-identified carotid plaque.

Methods All study subjects were recruited from two cohorts, viz. the People's Republic of China/United States of America Collaborative Study (USA-PRC Study) and the Chinese Multi-provincial Cohort Study (CMCS). The baseline examination was taken in 2002 including CVD risk factors and B-mode ultrasound of carotid artery and the second examination was carried out in 2007. The carotid plaque was measured in a total of 2000 subjects aged 47–79 years (mean 63 years).

Results 1. During these 5 years, the prevalence of carotid plaque increased from 50.3% to 62.2% and from 21.5% to 51.5% for men and women, respectively. The newly-identified carotid plaque incidence reached 41.8% for men and 34.1% for women. 2. With the same groups by blood pressure. Plasma total cholesterol (TCH), high-density lipoprotein cholesterol (HDL-C) and TC/HDL-C was recognised as an independent factors of elevated carotid plaque. For example, at the normal levels of LDL-C and HDL-C, the plaque incidence was 23.3%, whereas the incidence indicated the existence of conjoint effects between LDL-C and HDL-C, LDL and TG, as well as between TG and HDL-C, on the elevated carotid plaque. 3. In multivariate logistic regression analysis of LDL-C, HDL-C and TC/HDL-C for carotid plaque incidence significantly increased in both sexes (p<0.05).

Conclusions The prevalence of carotid plaque increased rapidly in a Chinese elderly population. Elevated LDL-C, non-HDL-C and TC/HDL-C levels serve as predictor of carotid plaque incidence.

Objective To compare impact factors on Ankle Brachial Pulse Wave Velocity (baPWV) in Xinjiang Uygur and Han hospitalised patients and evaluate the clinical significance of baPWV.

Methods Using Colin-Noninvasive Atherosclerosis detector BP-203RFE II (VP-1000), baPWV was measured in 5000 Xinjiang Han and Uygur hospitalised patients from the first hospital of Xinjiang Medical University, including 2738 Han and 2262 Uygur. Patients were divided into baPWV≤1400 cm/s (1573Han, 1327 Uygur) and baPWV<1400 cm/s (1165Han, 935Uygur). Multivariable logistic regression analyses were performed to identify factors associated with baPWV.

Results In both Han and Uygur, Patients with baPWV<1400 cm/s were older than those baPWV>1400 cm/s, and more frequently had diabetes, stroke and hypertension. No significant differences in gender between two groups. Multiple regression analysis showed that baPWV was significantly associated with pulse pressure, age and hypertension. HDL-C might be protective factor for two ethnicities, Ca++ antagonist might be risk factor of baPWV for Uygur patients.

Conclusions In Xinjiang Uygur and Han hospitalised patients, higher baPWV was associated with generalised atherosclerosis. baPWV should be a routine measurement in hospitalised patients. Influenced factors were different in two nationalities, For Uygur patients, influencing of antihypertensives on baPWV should be under consideration.
e0266 Snoring is associated with subclinical carotid atherosclerosis in 1050 urban Chinese

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