

# LIFESTYLE MANAGEMENT AND COMPLIANCE IN CORONARY PATIENTS: THE GENDER GAP. RESULTS FROM THE ESC EORP EUROASPIRE V SURVEY

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**AIM:** The aim of this study is to identify gender differences in lifestyle prescription and lifestyle compliance after a coronary event. **METHODS:** Analyses were carried out on the ESC EORP EUROASPIRE V survey data, including information from coronary patients recruited in 27 European countries. Consecutive patients were hospitalized for a CABG, PCI, acute myocardial infarction or acute myocardial ischaemia. Information on lifestyle management was obtained from standardized patient interviews (6 months to 2 years following hospital discharge). Logistic regression analyses adjusted for medical history (stroke, heart failure, and diabetes) were performed. **RESULTS:** Data was available for 8261 patients of which 25.8% were women. The mean (SD) age at interview was 62.9 (9.7) years for men and 65.4 (9.2) for women. Overall, no gender differences were observed in smoking cessation advice (85.2% vs. 84.5%;  $P=0.90$ ) and in smokers' attempts to quit smoking (62.6% vs. 63.9%;  $P=0.58$ ). Also, no gender differences were observed in dietary advice (85.5% vs. 84.9%;  $P=0.32$ ) and in attempts to adopt a healthier diet (87.1% vs. 88.4%;  $P=0.14$ ). In contrast, although no gender differences were seen in weight changes among obese patients (60.1% vs. 58.2%;  $P=0.49$ ), women were less likely to receive advice on losing weight (75.1% vs. 71.6%;  $P=0.02$ ). Furthermore, women were less likely to receive physical activity advice (63.8% vs. 59.6%;  $P<0.001$ ) and a lower proportion of them attempted to increase their physical activity levels (55.5% vs. 48.0%;  $P<0.001$ ). **CONCLUSION:** These findings suggest worse lifestyle prescription and lifestyle changes for physical activity in women. Further quantitative and qualitative research is needed to understand the gender gap in lifestyle management.