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Summary: Background: Definite evidence has been established, that coronary patients benefit from appropriate secondary prevention measures, as recommended by the European and National Guidelines. Euroaspiré I (1995) and Euroaspiré II (1999) were surveys aimed to evaluate the state of the implementation of guidelines into the every-day medical practice in several European countries, including Czech Republic. We wondered to what extent the practice in secondary prevention of Czech physicians, since the guidelines were published, changed during 5 years, to pursue the targets.

Methods: We compared two surveys, undertaken in the same geographical areas of the Czech Republic. Consecutive patients, males and females, less than 71 years of age were indentified following acute coronary event or revascularisation procedure and were interviewed and examined at least 6 months after hospitalization.

Results: The Czech surveys included 331 patients in Euroaspiré I and 410 in Euroaspiré II. In Euroaspiré II, the total number of smokers decreased in males, but increased in females. The patients were more obese, had higher glucose levels as well, while blood pressure, total and LDL cholesterol and triacylglycerols were lower, than in Euroaspiré I. Corresponding changes also occurred in the prevalence of hypertension and hyperlipidaemias by definitions. There was a significant increase in the use of betablockers, ACE inhibitors and hypolipidemic drugs, mainly statins. In conclusion, in spite that the compliance with the recommendations for secondary prevention improved, achievement of targets remained rather unsatisfactory, likewise in other European countries.

Key words: Euroaspiré I, II - secondary prevention-risk factor management

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