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Disparities among Asians and Native Hawaiians and Pacific Islanders with ischemic stroke.

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Abstract

OBJECTIVES:

To evaluate disparities in cardiovascular risk factors among Asians and Native Hawaiians and other Pacific Islanders (NHPI) in Hawaii who are hospitalized with ischemic stroke.

METHODS:

We performed a retrospective study on consecutive patients hospitalized for ischemic stroke at a single tertiary center in Honolulu between 2004 and 2010. The prevalence of cardiovascular risk factors was compared for NHPI, Asians, and whites who were hospitalized for ischemic stroke.

RESULTS:

A total of 1,921 patients hospitalized for ischemic stroke were studied. NHPI were less likely to be older (odds ratio [OR] 0.95, 95% confidence interval [CI] 0.94-0.96), more likely to be female (OR 1.55, 95% CI 1.07-2.24), and more likely to have diabetes (OR 2.74, 95% CI 1.87-4.00), hypertension (OR 1.98, 95% CI 1.27-3.10), and obesity (OR 1.82, 95% CI 1.25-2.65) than whites. NHPI had higher low-density lipoprotein levels (114 ± 50 mg/dL vs 103 ± 45 mg/dL, p = 0.001) and lower high-density lipoprotein levels (38 ± 11 mg/dL vs 45 ± 15 mg/dL, p < 0.0001) than whites. Compared with Asians, NHPI were less likely to be older (OR 0.95, 95% CI 0.94-0.97) and more likely to have diabetes (OR 1.88, 95% CI 1.35-2.61), previous stroke or TIA (OR 1.57, 95% CI 1.09-2.25), and obesity (OR 6.05, 95% CI 4.31-8.48).

CONCLUSIONS:

Asians, NHPI, and whites with ischemic stroke have substantially different cardiovascular risk factors. Targeted secondary prevention will be important in reducing disparities among these racial groups.

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