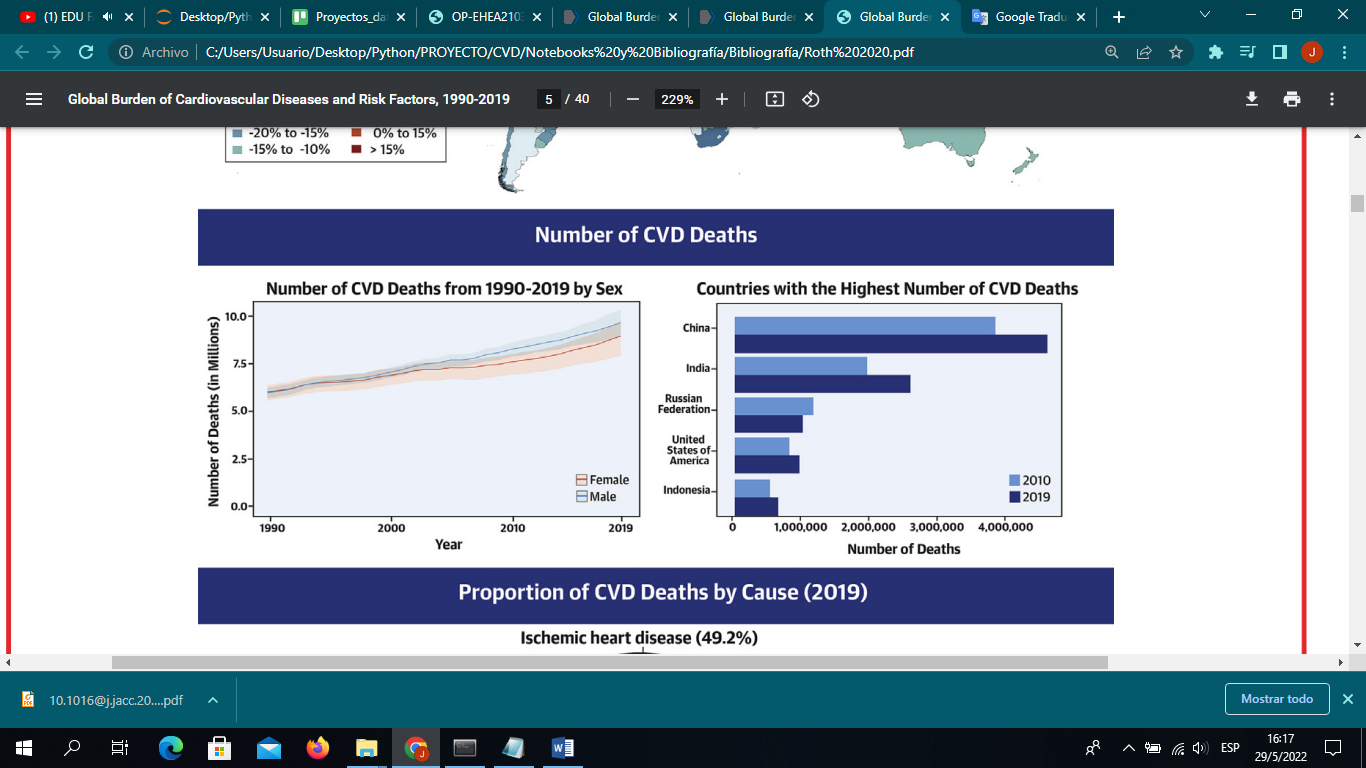
Cardiovascular diseases (CVD), defined as a general term for conditions affecting the heart or blood vessels, is one of the main causes of mortality and morbidity as well as healthcare costs. There is evidence that age, high blood pressure, smoking, dyslipidemia and diabetes are the main factors that improve risk of cardiovascular diseases.



Global Burden of Cardiovascular Diseases nearly doubled from 1990 (with 271 million) to 2019 (with 532 million). Likewise, the number of deaths increased from 12.1 million in 1990 to 18.6 million in 2019. China, India, Russia, the United States and Indonesia have currently the highest number of deaths from CVD. Cardiovascular diseases were estimated to cause about 32% of all deaths in Argentina in 2009.



Consistent, comparable, and systematic analysis of long-term trends and patterns in global CVD are essential to guide public policy and provide benchmarks for decision makers. Countries should invest in existing cost-effective public health programs and clinical interventions to target modifiable risks, promote healthy aging across the lifespan, and reduce disability and premature death due to CVD. The increase in healthcare costs entails a great burden, both for patients and for the general population. For example, CVD was estimated to cost the EU Euro 169 billion annually,

Since CVD are multifactorial, to estimate the risk of apparently healthy people experiencing a vascular event, it is necessary to monitor and act upon several different risk factors at the same time. Both the American Heart Association and Argentine Society of Cardiology recommend routinely evaluating cardiovascular risk factors and calculating the risk of CVD at 10 years (level of evidence IB), with the aim of identifying those people who should benefit most from preventive action.

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