CARDIOVASCULAR RISK FACTOR PROFILE ACROSS NON MEXICAN HISPANIC SUBGROUPS IN MIAMI, FLORIDA

Introduction
Hispanics represent the largest ethnic minority in the US; Mexican Americans are the segment of the Hispanic population whose cardiovascular risk has been well studied. Hispanics represent an ethnic group with diverse ancestries that vary genetically, culturally and socially, yet little is known about the differences and variation in cardiovascular risk factors among Non Mexican Hispanic subgroups.

Methods
The sample included 4696 Non-Mexican Hispanics who received free cardiovascular screening at Florida Heart Research Institute and were categorized into 3 subgroups: South American (SA), Central American (CA), and Caribbean (CB). Demographic and behavioral data were gathered using a structured questionnaire. Cardiovascular risk data gathered included BMI, blood pressure, fasting lipid profile, glucose and hs-CRP. Differences among and between Hispanic subgroups were assessed using Chi-square analysis. The Bonferroni Correction was used to adjust for multiple comparisons; p =.002, across subgroups, p=.001 between subgroups.

Results
Significant differences (p<.001) were seen across Hispanic subgroups. The majority of participants in each subgroup were women ranging from 57.5% among CB to 68.0% among CA; CB had the highest percentage (14.2%) of participants age >65. More than 80% of participants were uninsured; ranging from 94.4% for CA to 87.8% for CB. SA had the highest percentage (33.5%) of BMI <25 while CA showed the highest percentage (41.0%) with BMI ≥30 (p<.001). There were no significant differences in cholesterol (p=.010) and LDL (p=.009) levels across the subgroups. CA had lower percentage (13.6%) of HDL≥60 compared to SA (21.8%) and CB (22.6%) (p<.001). There were also significant differences in triglyceride levels across subgroups (p=.002). The prevalence of prediabetes and diabetes was significantly lower (p <.001) among SA (7.5%/5.8%) compared to CA (10.4%/11.1%) and CB (13.1%/10.7%). Prevalence of HTN was greater (p<.001) among CB (40.6%) than compared to CA (25.0%) and SA (21.5%).

Conclusions
Our study shows significant differences in cardiovascular risk factors between these Hispanic subgroups. CA group appears to have more of a metabolic phenotype- higher BMI, higher triglyceride and lower HDL- compared to other subgroups.
These data provide useful information that highlights the need for further research to account for these differences and may be important for targeting screening and the development of unique effective preventive interventions based on country of origin.