
CONFERENCE ABSTRACT

Kosovo Non-Communicable Disease Cohort (KOSCO): baseline results of a prospective primary healthcare user-based longitudinal study on the prevention and control of chronic diseases

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Introduction:

Globally, non-communicable diseases (NCD) are the greatest contributor to health loss. However, understanding the causes of morbidity in Kosovo, the Balkan country with lowest life expectancy, is challenging due to limited epidemiological evidence. The Accessible Quality Healthcare (AQH) implementation project, funded by the Swiss Agency for Development and Cooperation, is devoted to working with local stakeholders to improve the quality of primary healthcare (PHC), with a focus on prevention of NCDs. This study aims to contribute epidemiological evidence as the basis for policy and decision making regarding the prevention and control of NCDs in Kosovo.

Methods:

This prospective longitudinal study (n=805) recruited PHC patients consecutively exiting 12 Main Family Medicine Centers in Kosovo. Consenting participants aged 40 years and over were interviewed by a trained research nurse, followed by a health examination (blood pressure, height, weight, waist/hip/neck circumferences, peak expiratory flow and HbA1c measurements). Questionnaire modules included: social support, health, health system, lifestyle, and psychological factors. Biannual follow-ups will alternate between a telephone and face-to-face interview.

Results:

Of the 805 participants, hypertension was previously diagnosed in 62.7%, diabetes in 50.1%, cardiovascular disease in 16.8%, asthma in 2.6%, and chronic obstructive pulmonary disease in 5.4%. Among those with a previous diagnosis, the disease was controlled in only 44.2% for hypertension, 19.5% for diabetes, and 22.8% for chronic respiratory diseases. Undiagnosed cases among those never diagnosed represented 34.0% for hypertension, 22.1% for diabetes, and 38.5% for chronic respiratory disease. The prevalence of common risk factors for NCDs was 20.5% for smoking, and 6.3% for alcohol consumption. WHO guidelines were met in only 23.2% for physical activity, and 20.4% for fruits and vegetables consumption. Obesity prevalence was 56.0%.

Discussions:

To our knowledge, this is the first cohort conducted in Kosovo. Results show that hypertension, diabetes and chronic respiratory diseases among PHC users are highly prevalent, yet poorly controlled. Many cases also remain undiagnosed. However, the cross-sectional analysis is insufficient in determining the mediating factors of chronic diseases in the country. The longitudinal follow-up is therefore warranted for the improved management of NCDs.

Conclusions:

The study provides preliminary evidence on the prevalence, control and underdiagnosis of chronic diseases in Kosovo, which can be used by the AQH project and local stakeholders for decision making regarding setting priorities on the prevention and control of NCDs.

Lessons learned:

The study confirms high rates of hypertension and diabetes in Kosovo. Of particular concern are high rates of underdiagnoses and poor disease control.

Limitations: As participants were recruited in PHC facilities, the study is not population-based, thus limited in generalizability and may also overestimate prevalence of health conditions. However, patients visit PHC facilities for an array of conditions including general check-ups, thus healthy persons are also included in the study.

Suggestions for future research:

The relevance of the study, in the absence of not being entirely representative of the Kosovar population, lies in the longitudinal design. Therefore the continuity of the cohort is highly important, which also evaluates care, its perception and utilization of health service.