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11,9%, type D personality and low income -8,8%, stress and low income – 1,8%, depression and low income - 1,2%, type D personality and low educational level - 1.2 %.

Conclusions: In Kyrgyz Republic the prevalence of psycho-social clusters in patients with CHD is high. The most prevalent are two-component clusters (low educational and income levels). Taking into account Kyrgyz Republic has been affiliated to the very high-risk countries the further investigations of psycho-social clusters influence on CHD course and prognosis are necessary.

P491 | #604, E-POSTERS TOPIC: 3. DYSLIPIDEMIA AND RISK FACTORS | 3.09 EPIDEMIOLOGY OF SOCIOECONOMIC AND PSYCHOSOCIAL RISK FACTORS

COVID-19-RELATED QUARANTINE EFFECT ON DIETARY HABITS IN A NORTHERN ITALIAN RURAL POPULATION: DATA FROM THE BRISIGHELLA HEART STUDY

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Background and Aims: North of Italy was severely hit by COVID-19 (Coronavirus disease 19) pandemic. This induced the government to adopt severely restrictive measures to reduce the contagion risk, forcing the most part of the population to stop working and having leisure activities, and to remain at home for several weeks. Our study aimed to evaluate the effect of COVID-related quarantine on smoking and dietary habits of a well-characterized northern Italian rural population.

Methods: For this purpose, while lockdown restrictions were in place (February-April 2020), 359 subjects from the Brisighella Heart Study cohort underwent a phone interview about their lifestyle habit changes during COVID-19-related quarantine.

Results: Quarantine did not significantly modify smoking habit nor body mass index. Subjects significantly increased daily carbohydrates consumption, all fresh vegetables, healthy vegetable oils, milk and yogurt, alcoholic drinks, sugars and sweets, and coffee. The weekly consumption of low-fat meat, cured meat other than ham, cheeses, eggs, nuts and mixed seed oils significantly increased, while the weekly intake of fish, mussels, and legumes significantly decreased during lockdown. The Dietary Quality Index was reduced from 42.4 ± 4.1 to 37.8 ± 4.7 (p<0.03).

Conclusions: In accordance with our findings, COVID-19-related quarantine might worsen the quality of diet, also leading to an increased intake of almost all food categories.

P492 | #896, E-POSTERS TOPIC: 3. DYSLIPIDEMIA AND RISK FACTORS | 3.09 EPIDEMIOLOGY OF SOCIOECONOMIC AND PSYCHOSOCIAL RISK FACTORS.

OUTCOME OF DYSLIPIDEMIC COVID 19 PATIENTS IN INTENSIVE CARE UNIT SUBMITTED TO HEMODIALYSIS

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Background and Aims: Hyperlipidemia by itself without the concurrence of other major risk factors for cardiovascular disease, for it aggregates more inflammation to the process and thus leading higher probable cytokine storm. In rare cases of COVID 19 patients without these factors the outcome is better but the literature is scarce on the topic. The aim of this work is to look at the prevalence of outcomes in these patients with only hyperlipidemia and in cases in which only one risk factor is associated.

Methods: From January to December 2020, 758 COVID 19 patients admitted to the intensive care unit at a hospital in Sao Paulo and 315 had indication of hemodyalisis. COVID 19 patients were classified as to Dyslipidemia, Hypertension and Diabetes and sequentially reclassified as Hyperlipidemia (DLP) alone, DLP plus Hypertension and DLP plus Diabetes. **Results:** As of October the outcome of these patients were discharged was in May 2020 and December, respectively, for DLP of 2 and 20%; DLP plus Diabetes of 15 and 7%; DLP and Hypertension of 15 and 7% was 3.7% and in December the second wave brought it up to 8.3%. Association with Hypertension was in 230 cases. Diabetes coincided with lipid abnormalities in 169 cases. Outcome was better when only one factor coincided with only one more risk factor.

Conclusions: COVID 19 patients in ICU have better outcomes when submitted to Hemodialysis if the number of patients with only Diabetes or Hypertension be present risk factors associated to lipid disorders are less.

P493 | #806, E-POSTERS TOPIC: 3. DYSLIPIDEMIA AND RISK FACTORS | 3.10 COAGULATION.

ANTIPHOSPHOLIPID SYNDROME (APS) MARKERS AMONG MYOCARDIAL INFARCTION (MI) PATIENTS

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Background and Aims: APS is a cause of catastrophic events, especially MI in young and middle age patients (pts). **The aim** of this work is to study APS accepted markers incidences in different age MI pts.

Methods: The MI 33 pts in acute phase (1-5 day) were divided into 2 groups: Group I- young and middle age (<60 y old) n=18 pts and group II >60y old 15 pts. The blood simple were taken from each pts for appreciation (by ELIZA method, using "Demeditec" reagents, Germany) - APS markers: Lupus anticoagulant (LA screening-N=31-44"; LA confirm N=30-38";); anti-cardiolipin (aCL) ab IgG (N <7 MPL-U/ml) and IgM (N<10 GPL-U/ml); anti β2 GPI (N<10U/ml) Statistical analyze was provided by SPSS program.

Results: The data I group $(48.5\pm6.5 \text{ y old})$ and II group $(68.8\pm6.5 \text{ y old})$ patients is as follows: In the I group: LA(screening)= 43.6 ± 2.6 ; LA (confirm)= 38.1 ± 1.5 ; aCl IgM = 3.9 ± 4.5 ; aCl IgG = 2.8 ± 1.8 ; anti β 2 GPI= 4.2 ± 1.9 ; In the group II LA(screening)= 46.0 ± 4.9 ; LA (confirm)= 40.2 ± 4.3 ; aCl IgM = 6.8 ± 10.1 ; aCl IgG = 5.8 ± 4.9 ; anti β 2 GPI= 11.9 ± 9.5 The incidence of the APS markers through groups show accordingly I group vs II group: LA(screening)=15.8% vs 50% (P-0.1); LA (confirm)=21% vs 42.9% (P-0.09); aCl IgM -15.8%vs 28.6% (P-0.6); aCl IgG -5.3% vs 21.4% (P-0.04); anti β 2 GPI -5.3% vs 35.7% (P-0.01)

Conclusions: In case of MI APS markers may be increased more than in norm. In elderly pts this indices are more significant (especially ACL IgG and anti β 2 GPI; P<0.05) then in I group pts. This problem relation to thrombosis requires further study.

P494 | #1086, E-POSTERS TOPIC: 3. DYSLIPIDEMIA AND RISK FACTORS | 3.11 GUT MICROBIOME.

INDIVIDUAL DIET RELATES TO GUT MICROBIOTA FUNCTIONAL DYSBIOSIS SINCE SUBCLINICAL STAGES OF ATHEROSCLEROSIS

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