Västerbotten Intervention Programme - Experiences and implications for population health

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The Västerbotten Intervention Programme (VIP) was launched in 1985 as a response to the highest regional cardiovascular disease (CVD) mortality rates in Sweden (1). VIP was initially piloted in a small municipality, Norsjö, and then gradually introduced throughout the county and it reached the entire middle-aged population by 1992. VIP combines population-based health promotion strategies with annual invitation to primary care for inhabitants turning 40, 50, or 60 years to attend a health assessment for systematic CVD risk factor screening and individual counseling by trained nurses to promote CVD prevention. Until 2013, 65,000 individuals have participated once and over 40,000 at least twice, generating data from over 150,000 health examinations including conventional cardiovascular risk factors and information about lifestyle, socioeconomic situation, quality of life, working conditions and psychosocial stress.

The structure of VIP, the well-defined VIP population and data collection provides possibilities for research with cross-sectional studies (2), nested case-referent studies and cohort studies, and enables evaluations of prevalence, incidence, trends over time and longitudinal associations. Moreover, linkage with local, regional and national databases and registers provide opportunities for interdisciplinary research and assessment of demographic and socioeconomic conditions in the population and subpopulations as well as evaluation of societal and health care interventions (3). VIP data are also used in international collaborations including several cohorts.

In this presentation some examples on results based on VIP data will presented including effect of the VIP on total and CVD mortality in the target population in Västerbotten.

References

