

Directions and perspectives for primary care preventive measures – pro- and anti-health behaviors of patients.

ABSTRACT

Health behaviors are among the major determinants of non-communicable diseases, particularly cardiovascular diseases, whose development and progression are strongly influenced by lifestyle-related factors. In this context, primary health care (PHC) plays a crucial role in prevention, early identification of risk factors, and health education, constituting a key pillar of the Polish healthcare system. The aim of this dissertation was to provide a multifaceted assessment of health-promoting and health-risk behaviors, examine their relationship with the risk of chronic diseases, and evaluate the role of PHC and preventive programmes in reducing cardiovascular risk.

This dissertation adopts a multi-module approach. It combines an analysis of national and international documents on health prevention with an empirical investigation conducted among individuals receiving care within the PHC setting. The study encompassed the assessment of health behaviors, selected anthropometric and biochemical parameters, cardiovascular risk factors, and opinions on the functioning of the healthcare system. Descriptive and inferential statistical methods were applied, including logistic regression models to identify independent predictors of high cardiovascular risk.

The findings demonstrate that the effectiveness of preventive programmes in Poland is constrained by low participation rates, organisational barriers, and inequalities in access to healthcare services. The studied population was characterized by a high prevalence of adverse health behaviors and cardiometabolic abnormalities, including central obesity, dyslipidaemia, and impaired glycaemia. The most important independent predictors of elevated cardiovascular risk were older age, male sex, obesity, and smoking. Cardiovascular risk also increased with the accumulation of multiple risk factors, indicating a dose–response relationship. Furthermore, lower educational attainment was associated with a higher likelihood of elevated cardiovascular risk, underscoring the importance of social determinants of health. Negative evaluations of the healthcare system were primarily related to access to specialist care, service organisation, and diagnostic availability, whereas the role of PHC was assessed relatively more positively.

The dissertation concludes that preventive activities delivered within PHC should be strengthened, systematic cardiometabolic risk assessment should be expanded, and the organisation of healthcare services should be improved. Effective cardiovascular prevention requires an integrated approach that combines clinical risk assessment and monitoring with health education and interventions aimed at reducing systemic barriers to care.

Keywords: health behaviours, primary health care, cardiovascular diseases, risk factors, health prevention