

The effect of a community-based coronary risk reduction: the Rockford CHIP

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Abstract

OBJECTIVE:

The aim of this study was to assess the clinical effects of a community-based lifestyle intervention program in reducing coronary risk, especially in a high risk group.

METHOD:

The 40-hour educational curriculum of the Coronary Health Improvement Project (CHIP) delivered over a 30-day period with clinical and nutritional assessments before and after was offered in the spring and fall of 2000 to 2002 through the Center for Complementary Medicine of the Swedish American Health System in Rockford, Illinois to its employees and the general public. The participants were instructed to optimize their diet, quit smoking and exercise daily (walking 30 min/day).

RESULTS:

The data of the 5 CHIP programs were pooled and analyzed. 544 men and 973 women (almost all Caucasian; mean age 55 years) were eligible for analysis. At the end of the 30-day intervention period, stratified analyses of total cholesterol, LDL, triglycerides, blood glucose, blood pressure and weight showed highly significant reductions with the greatest improvements among those at highest risk.

CONCLUSION:

Well-designed community-based intervention programs can improve lifestyle choices and health habits. They can also markedly and rather quickly reduce the level of coronary risk factors in a non-randomized population.