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Abstract

Background: Peripheral Artery Disease (PAD) is a real silent killer with a strong predictive value for cardiovascular cause mortality. We aim to assess the prevalence and factors associated with PAD among workers Cotonou city (BENIN).

Methods: It was a cross-sectional study from June to September 2013 conducted within three societies in Cotonou area. We have done a systematic recruitment among workers, aged 18 and over, who signed the consent document.

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these companies who participated to the annual checkup in 2013 where included.

The minimum sample size was estimated to 753 by using Schwartz formula $n = 1,962 p(1-p) / i^2$ where $p=4\%$ was the reported prevalence of PAD in general population [5] and $i=1\%$ was the error risk. The recruitment was systematic for all workers, aged 18 and over, who signed the consent sheet.

Data collection

A structured interview was used by a trained seventh year medical student to record details on hypertension, diabetes, smoking alcohol intake, and physical activity. Education was classified

bilateral in 40.4%. No case of severe obstruction was recorded. These data are detailed in Table 2

	Frequency	Percentage
Age range (years)		
40	129	13.0
41 to 59	755	76.4
6		

Yes	9(11.5)	69(88.5)
No	38(4.2)	873(95.8)

The prevalence of PAD grows with age. Our data confirmed this trend. According to Framingham study, age \geq 60 years was a great risk factor for PAD [16]. We noted that PAD was more prevalent in females and the difference was significant. There is consistent evidence to support an age-related increase in trend [18]. Literature reveals no consistent evidence to support differences in the prevalence of PAD between the sexes. Some studies have found a significant difference in the prevalence between males and females [18], while others have not [19]. This study showed positive association between PAD and diabetes. This association is common and epidemiological studies have confirmed an increased prevalence of PAD among diabetics [10,20]. The risk of PAD is markedly increased among individuals with diabetes, and ischemic event rates are higher in diabetic individuals with PAD than in comparable non-diabetic populations. Consequently, early diagnosis and treatment of PAD in patients with diabetes is critically important in order to reduce the risk of cardiovascular events, minimize the risk of long-term disability, and improve quality of life. We noted higher prevalence of PAD among patient with high level of glycemia the date of the survey. According to Selvin et al. the degree

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