P02-178 - **BMI DIRECTLY RELATES TO GLYCAEMIA IN PATIENTS WITH SEVERE ENDURING MENTAL ILLNESS**

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Objectives: People with severe enduring mental illness (SMI) are at least twice as likely to die from cardiovascular disease (CVD) than the general population, with 60% of excess mortality rate attributable to physical illness.

Methods: We report implementation in primary care of screening and intervention for cardiometabolic risk factors in SMI in Cheshire, UK. Data search was performed through the EMIS software provider.

Results: 453 patients (55.8% male 44.2% female) on the SMI Register in Cheshire, UK were screened for dysglycaemia (screening rate 57.3 %) and dyslipidaemia (screening rate 36.2%). There were no differences in BMI by gender, but a greater proportion of women (25% vs 20%) were obese (BMI ≥ 30 kg/m2). Fasting glucose was in the impaired fasting glycaemia range (6.1-6.9mM) in 6.5% of those screened and at or above the threshold for type 2 diabetes (7.0mM) in 17.3% of the group. Fasting serum cholesterol was high at >5mmol/L in 62.8% of those screened for whom the mean cholesterol was 6.2±0.8 mmol/L). Despite high rates of dysglycaemia and dyslipidaemia, systolic blood pressure was greater than 140mmHg in only 13% of those examined. 61% were active smokers.

Multivariate linear regression analyses revealed a direct relation between fasting glucose levels and BMI (beta = 0.22, $p < 0.001$) independent of age, gender, systolic blood pressure and fasting cholesterol and triglycerides.

Conclusion: There is scope for cardiometabolic risk reduction in patients with severe mental illness. Measures to encourage weight reduction and smoking cessation would be vital in risk reduction strategies.

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