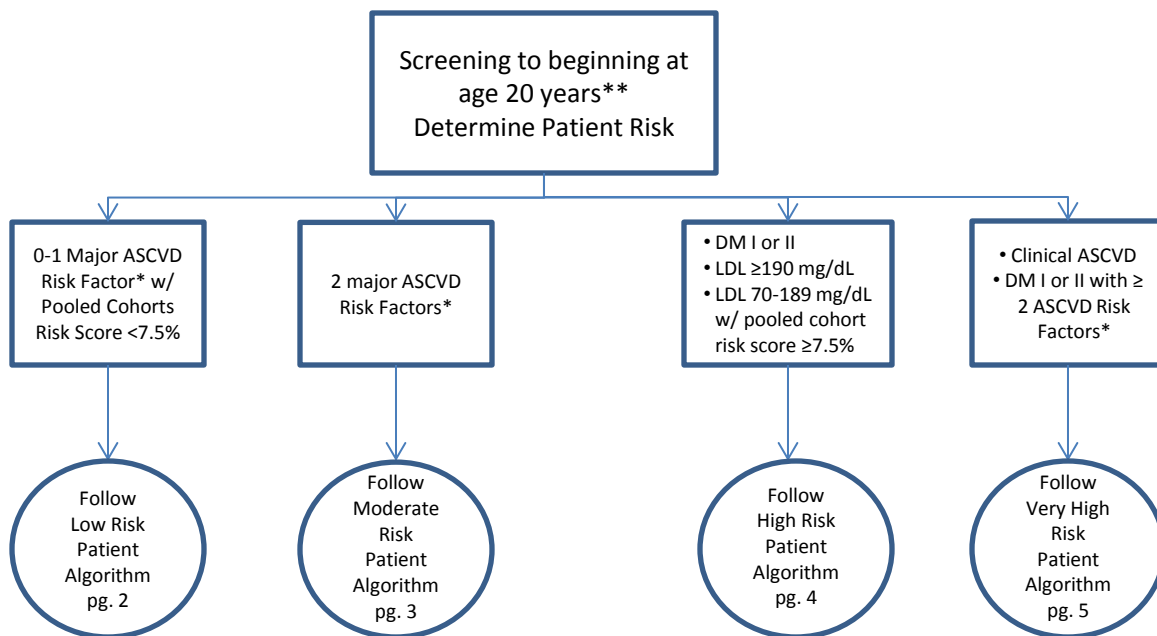


LGHealth Lipid Guidelines



Clinical Atherosclerotic cardiovascular disease (ASCVD)

Myocardial infarction or other Acute Coronary Syndrome
Coronary or other revascularization procedure
Transient ischemic attack
Ischemic stroke
Atherosclerotic peripheral arterial disease (includes ankle/brachial index <0.90)
Documented atherosclerotic diseases such as:

- Coronary atherosclerosis
- Renal atherosclerosis
- Aortic aneurysm secondary to atherosclerosis
- Carotid plaque, ≥ 50%

*ASCVD Risk Factors

Smoking
Hypertension
Low HDL (<40 mg/dL)
Family History of premature CHD (<55 years male relative; <65 years female relative)
Age (>45 years male; >55 years female)

**consider stopping screening at age 80 if clinically indicated

¹ **Primary target-Non-HDL (NHDL)**
Secondary target-LDL

Low Risk Patient Algorithm

0-1 Major ASCVD Risk Factor* w/ Pooled Cohorts Risk Score <7.5%

Therapeutic Lifestyle Changes (TLC) for 3 months

First Visit

NHDL <130
LDL <100[†]

Fam Hx premature CAD?
OR
Current Tobacco Smoking?

Discuss Treatment Plan:
1) Ongoing TLC
2) Consider statin therapy
3) Consider additional diagnostic testing**

Check lipid levels every 5 years

Maintain Levels with TLC

Intensify TLC for 3-12 months and repeat lipid levels

Check lipid levels in 3-12 months (dependent on use of statin)

Discuss Treatment Plan:
1) Ongoing TLC
2) Consider statin therapy
3) Consider additional diagnostic testing**

***ASCVD Risk Factors**
Smoking
Hypertension
Low HDL (<40 mg/dL)
Family History of premature CHD (<55 years male relative; <65 years female relative)
Age (>45 years male; >55 years female)

**** Additional Diagnostic Testing**

Test	Reference	Consider Treatment	Cost
hsCRP	Jupiter	≥ 2.0 mg/dL	\$
CT Ca Score	Mesa	≥ 300 Agastston Units or 75 th percentile for age, sex, and ethnicity	\$

[†]Primary target-NHDL
Secondary target-LDL

Cost Key:
\$ <\$100 \$\$ \$101-500 \$\$\$ \$501-1000 \$\$\$\$ >\$1000

Moderate Risk Patient Algorithm

2 major ASCVD Risk Factors*

Calculate pooled cohorts risk score

Risk Score >7.5%

Reclassify as High Risk

Follow High Risk Patient Algorithm pg. 4

***ASCVD Risk Factors**
 Smoking
 Hypertension
 Low HDL (<40 mg/dL)
 Family History of premature CHD (<55 years male relative; <65 years female relative)
 Age (>45 years male; >55 years female)

Therapeutic Lifestyle Changes (TLC) for 3 months

First Visit

NHDL <130
 LDL <100¹

Intensify TLC for another 3 months

Second Visit

Check lipid levels every 5 years

Maintain Levels with TLC

NHDL <130
 LDL <100¹

Third Visit

Discuss Treatment Plan:
 1) Consider statin therapy
 2) Consider additional diagnostic testing**

Fam Hx premature CAD?
 OR
 Current Tobacco Smoking?

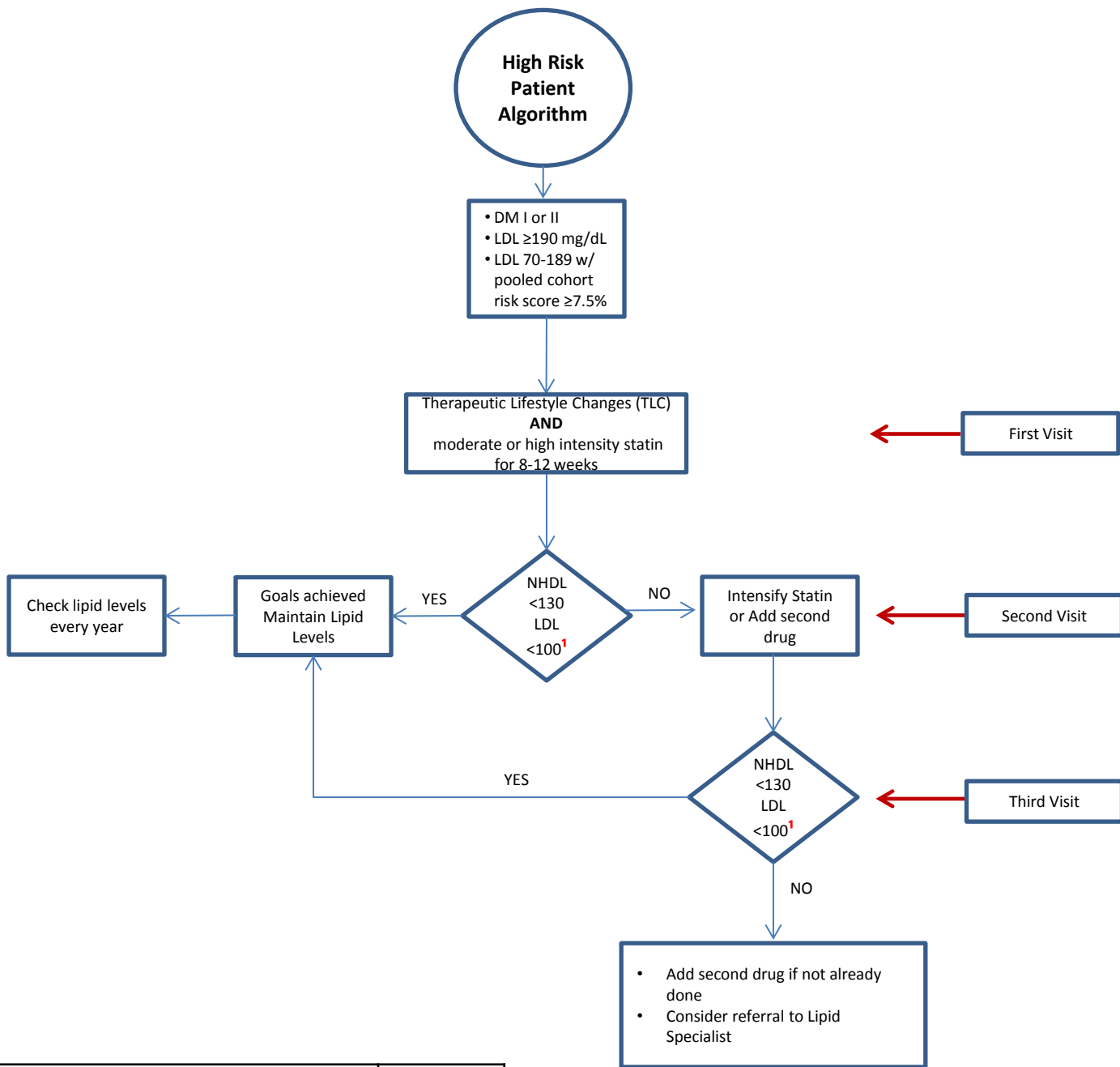
Discuss Treatment Plan:
 Start statin therapy and treat to goal

¹ Primary target-NHDL
 Secondary target-LDL

****Additional Diagnostic Testing**

Test	Reference	Consider Treatment	Cost
hsCRP	Jupiter	≥ 2.0 mg/dL	\$
CT Ca Score	Mesa	≥ 300 Agastston Units or 75 th percentile for age, sex, and ethnicity	\$

Cost Key:
 \$ <\$100 \$\$ \$101-500 \$\$\$ \$501-1000 \$\$\$\$ >\$1000



Statin Therapy		Cost
Moderate	Rosuvastatin 5-10mg	\$\$
	Atorvastatin 10-20mg	\$
	Pitavastatin 2-4mg	\$\$
	Simvastatin 20-40mg	\$
	Lovastatin 40mg	\$
	Pravastatin 40-80mg	\$
	Fluvastatin XL 80mg	\$
	Fluvastatin 40 mg BID	\$
High	Rosuvastatin 20-40mg	\$\$
	Atorvastatin 40-80mg	\$

Cost Key:
 \$ <\$100 \$\$ \$101-500

¹ Primary target-NHDL
 Secondary target-LDL

Clinical ASCVD

Myocardial infarction or other Acute Coronary Syndrome
 Coronary or other revascularization procedure
 Transient ischemic attack
 Ischemic stroke
 Atherosclerotic peripheral arterial disease (includes ankle/ brachial index <0.90)
 Documented atherosclerotic diseases such as:

- Coronary atherosclerosis
- Renal atherosclerosis
- Aortic aneurysm secondary to atherosclerosis
- Carotid plaque, ≥ 50%

*ASCVD Risk Factors

Smoking
 Hypertension
 Low HDL (<40 mg/dL)
 Family History of premature CHD (<55 years male relative; <65 years female relative)
 Age (>45 years male; >55 years female)

Very High Risk Patient Algorithm

- Clinical ASCVD
- DM I or II with ≥ 2 ASCVD Risk Factors*

Therapeutic Lifestyle Changes (TLC) and high intensity statin * for 8-12 weeks

First Visit
 *Provider choice whether to use moderate or high dose statin based on patient

Check lipid levels yearly

Goals achieved
 Maintain Lipid Levels

NHDL <100
 LDL <70¹

• Add second drug
 • Consider referral to lipid specialist

Second Visit

Recurrent clinical events despite
 NHDL <100
 LDL <70

NHDL <100
 LDL <70¹

Third Visit

Refer to Lipid Specialist for:

- 1) Additional drug therapy including novel drugs
- 2) Advance d lipid testing
- 3) Lipid apheresis if LDL ≥ 200 with CAD

Statin Therapy		Cost
Moderate	Rosuvastatin 5-10mg	\$\$
	Atorvastatin 10-20mg	\$
	Pitavastatin 2-4mg	\$\$
	Simvastatin 20-40mg	\$
	Lovastatin 40mg	\$
	Pravastatin 40-80mg	\$
	Fluvastatin XL 80mg Fluvastatin 40 mg BID	\$
High	Rosuvastatin 20-40mg	\$\$
	Atorvastatin 40-80mg	\$

¹ Primary target-NHDL
 Secondary target-LDL

Cost Key:
 \$ <\$100 \$\$ \$101-500