

Lipid Disorders: Screening and Treatment

The US Preventive Services Task Force (USPSTF) has published updated recommendations on screening and treatment for lipid disorders in adults.

What Are Lipid Disorders?

Lipid disorders (**dyslipidemia**) refer to abnormal levels of cholesterol and/or fats in the blood. There are different types of cholesterol: **low-density lipoprotein (LDL-C** or "bad" cholesterol) and **high-density lipoprotein (HDL-C** or "good" cholesterol). Having high cholesterol generally refers to having high LDL-C levels. **Triglycerides**, a type of fat, are another "bad" substance in the blood. Common lipid disorders include high LDL-C, low HDL-C, and high triglyceride levels.

Lipid disorders increase the risk of plaque buildup inside blood vessels, called **atherosclerosis** or, more generally, **cardiovascular disease (CVD)**. When atherosclerosis occurs in the blood vessels of the heart or brain, it can lead to heart attacks and strokes. Lowering cholesterol with both lifestyle changes and medications has been shown to lower the risk of both developing and dying of CVD.

What Tests Are Used to Screen for Lipid Disorders?

Screening for lipid disorders is done via a blood test that checks the amount of cholesterol and triglycerides in the blood.

What Treatments Are Used for Lipid Disorders?

The most common group of medications used to lower cholesterol is **statins**. There are other medications available; however, this USPSTF recommendation applies only to statins.

What Is the Patient Population Under Consideration for Screening for and Treating Lipid Disorders?

This USPSTF recommendation applies to adults aged 40 years or older who (1) do not have known CVD; (2) have no symptoms of CVD; and (3) have 1 or more risk factors for CVD. Risk factors include dyslipidemia, diabetes, high blood pressure, and smoking.

What Are the Potential Benefits and Harms of Screening for and Treating Lipid Disorders?

The benefit of screening for and treating lipid disorders with statins is decreasing the chance of developing symptomatic CVD or having a heart attack or stroke in the future. Potential harms are related to the side effects of statins, which are likely to be small.

How Strong Is the Recommendation to Screen for and Treat Lipid Disorders?

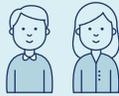
The USPSTF recommendation differs based on a person's **cardiovascular risk** (the risk of having symptoms of heart disease or a stroke) in the next 10 years. This number can be calculated by

a doctor based on various risk factors. The illustration shows the recommendations of the USPSTF in more detail.

It is important to know that no risk calculator is perfect, and the decision to start treatment with a statin should include other factors, such as individual tolerance of risk and willingness to take a life-long medication, and should be based on an individual decision made with your doctor.

Bottom Line: Current Recommendation for Screening and Treatment for Lipid Disorders

The USPSTF recommends screening for and treating lipid disorders in adults aged 40 to 75 years who have a 10-year cardiovascular risk of more than 10% (B statement) and recommends selectively offering treatment to those who have a 10-year cardiovascular risk of 7.5% to 10% (C statement).

| Statin Use for the Primary Prevention of Cardiovascular Disease in Adults | |
|---|---|
| Population | USPSTF recommendation grade |
|  <p>ADULTS Aged 40-75 years with no history of CVD and ≥ 1 CVD risk factors</p> | <p>B 10-year cardiovascular event risk $\geq 10\%$ Low- to moderate-dose statins recommended</p> <p>C 10-year cardiovascular event risk 7.5%-10% Recommendation depends on the patient's situation</p> |
|  <p>ADULTS Aged 76 years and older with no history of CVD</p> | <p>I Statement There is insufficient evidence to make a recommendation.</p> |

FOR MORE INFORMATION

www.uspreventiveservicestaskforce.org/Page/Document/draft-recommendation-statement175/statin-use-in-adults-preventive-medication1

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