

## **Cholesterol guidelines are based on strong, evidence-based science, AHA says**

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The American Heart Association and American College of Cardiology vigorously defend the recently published risk assessment and cholesterol guidelines despite recent media reports critical of the risk assessment calculator tool.

"We stand behind our guidelines, the process that was used to create them and the degree to which they were rigorously reviewed by experts," said Mariell Jessup, M.D., president of the American Heart Association.

The risk calculator provides an estimate of a patient's ten year risk of having a heart attack or stroke, and is one component that healthcare providers should use as they discuss whether or not a patient would benefit from a <u>statin drug</u>, a type of medication that lowers arteryclogging LDL cholesterol. The guidelines and risk assessment tool are developed from, and based on, the best evidence available as determined by the expert panel. Authors say the <u>risk assessment tool</u> is intended to spark a conversation between patients and their physician to help drive individualized care based on that patient's health profile.

"Clinical practice guidelines such as these should not take the place of sound clinical judgment. These guidelines should enable a discussion between a patient and their healthcare provider about the best way to prevent a heart attack or stroke, based on the patient's <u>personal health</u> profile and their preferences. The risk calculator score is part of that discussion, because it provides specific information to the patient about their personal health. A high score does not automatically mean a patient



should be taking a statin drug" said John Gordon Harold, M.D, president of the American College of Cardiology.

Harold adds the risk assessment is a significant improvement over the previous model. For the first time in a major guideline, it focuses on estimating risk for both heart attacks AND strokes, whereas previous guidelines only focused on <u>heart attack risk</u>. The guidelines also provide estimates applicable to African Americans for the first time ever.

One in three Americans die of cardiovascular diseases such as heart attacks, heart failure and stroke. Strong scientific evidence indicates that statins are a reasonable treatment approach for a large majority of patients, and can help people avoid a <u>heart attack</u> or stroke even if their risk is as low as five percent.

At the invitation of the National Heart, Lung, and Blood Institute (NHLBI), The American Heart Association and the American College of Cardiology assumed the joint governance, management and public distribution of four <u>clinical practice guidelines</u> focused on cardiovascular prevention. Other guidelines, published at the same time address obesity, healthy lifestyle and <u>risk assessment</u>.

The groups published the new guidelines November 12th in the American Heart Association's journal *Circulation* and the *Journal of the American College of Cardiology*.

Provided by American Heart Association

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