

# First joint ESC/EAS guidelines for the management of dyslipidaemias

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Cardiovascular disease (CVD), driven by the global pandemics of obesity and diabetes, poses a daunting challenge to clinicians in the 21st century. Despite progress, there is still much to be done to improve the control of dyslipidaemia, a key risk factor. In Europe, as many as one-half of patients are inadequately treated.<sup>1,2</sup> The first European guidelines specifically focused on managing dyslipidaemias offer new hope.<sup>3,4</sup> Experts from the European Atherosclerosis Society (EAS) and the European Society of Cardiology (ESC) worked together to develop these guidelines. The aim was to keep pace with emerging data and provide up to date treatment advice for a wide range of dyslipidaemias, including diabetes and metabolic syndrome.

ESC Chairperson of the Task Force, Professor Zeljko Reiner, Director, University Hospital Center Zagreb, Croatia said that prevention and treatment of dyslipidaemia should always be considered within the broader framework of CVD prevention and the individual's total CV risk. 'Lipids are a key contributor to total CV risk. In this guideline the SCORE system, based on European data, has been used to categorise patients as very high, high, moderate or low CV risk, as a basis for treatment decisions. The moderate risk group includes many middle-aged people who tend to move to higher risk categories over time. These people are likely to be the most valuable group for lifestyle advice and, where needed, drug therapy for controlling lipids.'

[Low-density lipoprotein](#) (LDL) cholesterol remains the primary priority in lipid management. However, the targets have been readdressed.

## Clinicians should aim for LDL cholesterol levels below

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