

Older adults should be regularly screened for heart disease, diabetes risk

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Measuring waistline, blood pressure, cholesterol, blood fats, and blood sugar during doctor visits can detect heart disease and diabetes earlier, according to a <u>Clinical Practice Guideline</u> issued today by the Endocrine Society.

The guideline, titled "Primary Prevention of ASCVD and T2DM in Patients at Metabolic Risk: An Endocrine Society Clinical Practice Guideline," was published online and will appear in the September 2019 print issue of *The Journal of Clinical Endocrinology & Metabolism* (*JCEM*), a publication of the Endocrine Society.

The five <u>risk factors</u> for <u>heart disease</u> and diabetes are—large amount of abdominal body fat, low HDL ("good") cholesterol, high levels of fat in the blood known as triglycerides, high <u>blood pressure</u>, and high blood sugar. Patients with at least three of these factors are at metabolic risk (higher risk for heart disease and diabetes). The guideline recommends screening patients with three or more risk factors regularly and screening patients with one or two risk factors every three years. This is in addition to assessing risk factors for <u>cardiovascular disease</u> like "bad" cholesterol, smoking and family history.

The original Endocrine Society guideline on this topic was published in 2008. This revision takes a fresh look at metabolic risk and presents recommendations which reflect more recent trial data on blood pressure and lipids. The guideline prioritizes lifestyle and behavioral interventions and discusses new medical treatment options. The guideline focuses on



adults aged 40 to 75 but can be used to guide patients outside of this age range as well.

"Doctors haven't been doing enough to measure waist circumference, but it's essential to identifying patients at metabolic risk earlier and preventing more cases of heart disease and diabetes," said James L. Rosenzweig, M.D., of Hebrew Rehabilitation Hospital in Boston, Mass. Rosenzweig chaired the writing committee that developed the guideline. "We emphasize the importance of lifestyle, dietary and behavioral changes as the first line treatment. However, treatment with medication is appropriate if goals are not met with lifestyle changes alone."

Recommendations from the guideline include:

- Measuring <u>waist circumference</u> as a routine part of the clinical examination.
- Checking blood pressure annually, and, if elevated, at each subsequent visit.
- Prioritizing lifestyle modification as the first-line therapy.
- Aiming to lose five percent or more of initial body weight over the first year for individuals at metabolic risk with excess weight.
- Undergoing a 10-year global risk assessment for either coronary heart disease or atherosclerotic cardiovascular disease to guide the use of medical or pharmacological therapy.
- Prescribing lifestyle modification before drug therapy in patients with prediabetes to reduce <u>blood sugar</u> levels.

Provided by The Endocrine Society

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