Analysis: High-risk Americans who do not maintain cholesterol targets have 44% higher rate of cardiovascular events

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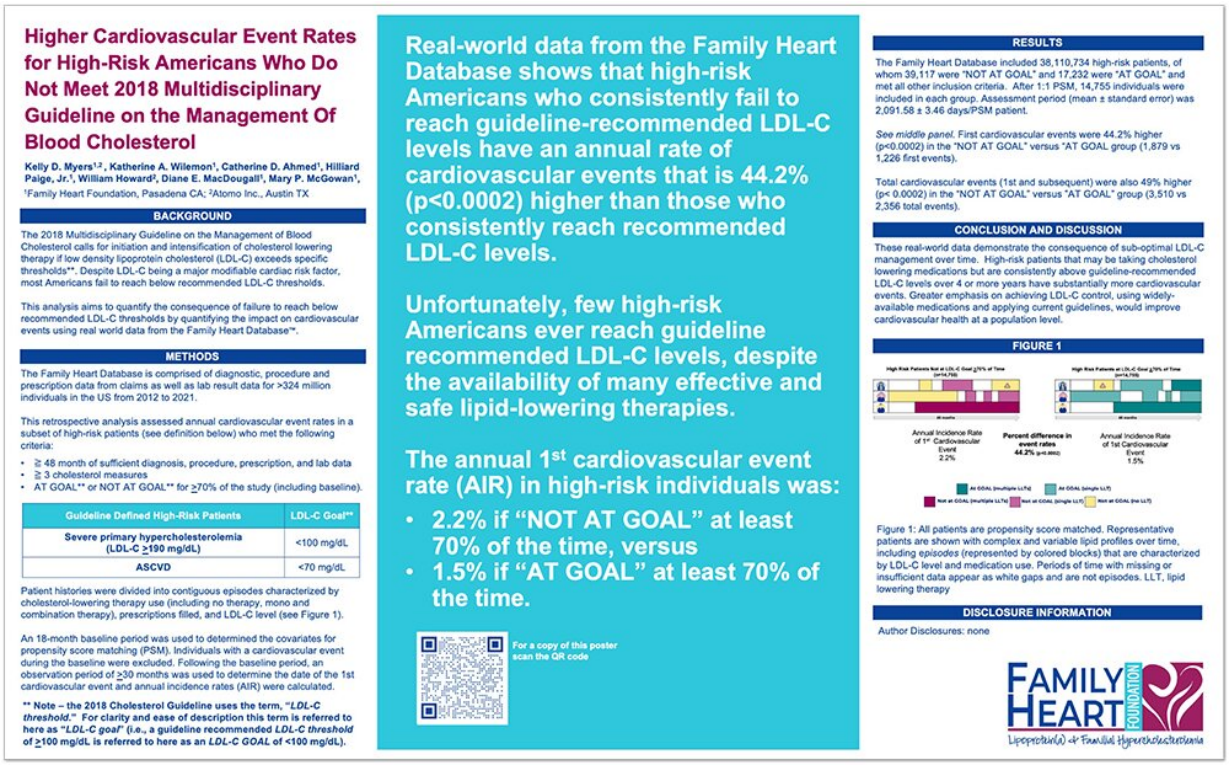

Credit: Family Heart Foundation

A real-world, retrospective analysis by the Family Heart Foundation, a leading non-profit research and advocacy organization, found that high-risk Americans who do not maintain levels of LDL-cholesterol (LDL-C)

recommended in the 2018 American College of Cardiology/American Heart Association cholesterol treatment guidelines, had a 44% higher rate of cardiovascular events compared to those who did achieve and maintained recommended LDL-C levels.

The study findings, which were based on data from the Family Heart Database of more than 300 million Americans, will be highlighted this week in a poster presentation at the Academy of Managed Care Pharmacy (AMCP) Conference at the Henry B. Gonzalez Convention Center in San Antonio.

"This real-world evaluation shows how important it is for people at high risk for cardiovascular events to get the care they need to reach guideline-recommended LDL-C levels and stay there over time," said Cat Davis Ahmed, vice president, Policy and Outreach, and co-author of the study.

"Often that means taking the right statin, sometimes it means taking more than one medication. No matter how a person gets there, this study shows that living in the 'safe zone' when it comes to LDL-C control means fewer cardiovascular events over time. And, understanding and overcoming barriers to LDL-C control at the patient, clinician, payer, and policy levels could improve cardiovascular health at a population level."

According to the 2018 Multidisciplinary Guideline on the Management of Blood Cholesterol, lipid-lowering therapy (LLT) is recommended if LDL-C levels exceed thresholds in patients who are at high or very high-risk of cardiovascular events. Despite LDL-C being a major modifiable risk factor for cardiovascular disease, most patients do not achieve guideline thresholds and even fewer maintain those levels even if they do achieve them.

The Family Heart Foundation's analysis, titled "Higher cardiovascular

event rates for high or very high-risk Americans who did not meet 2018 Multidisciplinary Guideline on the Management of Blood Cholesterol thresholds," compared high or very high-risk patients who maintained recommended LDL-C levels at least 70% of the time to those who did not and assessed annual cardiovascular event rates. The study included individuals who had at least 48 months of diagnosis, procedure, medication, and lab result data with at least three cholesterol-screening results. Patients were divided into either "AT GOAL" or "NOT AT GOAL" cohorts, with 14,755 in each after 1 to 1 propensity score matching.

Key findings showed:

- The annual rate of first cardiovascular events was 44.2% higher for the "NOT AT GOAL" group (2.2% and 1.5%, p
- Total cardiovascular events (first and subsequent) were also 49% higher (p

The Family Heart Database is comprised of real-world diagnostic, procedural, and prescription data from claims and/or laboratory information in the U.S. from 2012 to 2021.

The poster will be presented on Thursday, March 23 from 11:30 a.m. to 1 p.m. CDT and will be available for viewing throughout the conference in The EXPO. In addition, the Family Heart Foundation will be hosting a workshop—"Opportunities to Reduce the Rising Tide of Cardiovascular Events through Better LDL-C Management"—in conjunction with the AMCP Conference on Wednesday, March 22 from 12–1 p.m. CDT. The workshop will be moderated by Cat Davis Ahmed, and include Kelly Myers, chief technology officer of the Family Heart Foundation; and Dr. Amit Khera, professor of Medicine and director of the Preventive Cardiology program at UT Southwestern in Dallas.

More information: Research poster: familyheart.org/high-cardiovas … -high-risk-americans

Provided by Family Heart Foundation