

# VA/DoD release guidelines for dyslipidemia management

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patients at highest risk.

"Cardiovascular disease is a major cause of morbidity and mortality in the United States and globally," the authors write. "Addressing cardiovascular disease is a priority area for the VA and the DoD."

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(HealthDay)—A joint clinical practice guideline for the management of dyslipidemia for cardiovascular disease risk reduction in adults has been summarized and published online June 22 in the *Annals of Internal Medicine*.

John R. Downs, M.D., from the South Texas Veterans Health Care System in San Antonio, and Patrick G. O'Malley, M.D., M.P.H., from the Uniformed Services University of the Health Sciences in Bethesda, Md., report the major recommendations of a joint [clinical practice guideline](#) for the management of dyslipidemia for [cardiovascular disease risk](#) reduction in adults.

The authors summarized key features of the guideline relating to elimination of treatment targets, additional tests for [risk prediction](#), primary and secondary prevention, and laboratory testing. According to the report, the U.S. Department of Veterans Affairs (VA) and the U.S. Department of Defense (DoD) recommend elimination of treatment targets. They recommend additional tests to refine risk prediction only when the rationale is clear. The VA/DoD recommends shared decision-making to determine the potential benefits and harms of each medication once the patient's 10-year risk has been determined. Patients should be treated with a moderate-dose statin first, which should be titrated to high dose in

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