



# Clinical Practice Guideline for the Management of Hyperlipidemia in Patients with Cardiovascular Disease

## General Guidelines

- Counsel all patients on lifestyle modification, the cornerstone of cardiovascular disease prevention.
- Treat all patients with coronary or other atherosclerotic disease or diabetes to reach an LDL goal of <100 mg/dl; consider an LDL goal of <70 mg/dl for very high-risk patients.
- Prescribe statins to lower LDL and reduce cardiovascular events and mortality by at least 30%

## Lipid Goals in Patients With Atherosclerotic Disease or Diabetes

LDL* cholesterol	<100 mg/dl
	<70 mg/dl (option in very high-risk patients)
Total Cholesterol	<200 mg/dl
HDL cholesterol	>40 mg/dl (men)
	>50 mg/dl (women)
Triglycerides	<150 mg/dl

\*Lipid panels typically use a calculated LDL. The calculated LDL = [Total cholesterol – (Triglycerides/5)] – HDL. This formula is applicable only when Triglycerides are <400 mg/dl.

## Very High-Risk patients include those with cardiovascular disease plus any of the following:

- Recent acute coronary syndrome
- Multiple major CVD risk factors (especially diabetes)
- Severe and poorly controlled risk factors (especially cigarette smoking)
- Multiple risk factors of the metabolic syndrome (a condition associated with increased risk of CVD and diabetes), especially with high triglycerides (>200 mg/dl) and low high-density lipoprotein (HDL) cholesterol (<40 mg/dl)

## LDL Management in Patients With Atherosclerotic Disease or Diabetes

Initial LDL Level	Lifestyle Modification	Initiation of Drug Therapy
>130 mg/dl	Yes	Start statin therapy simultaneously with lifestyle modification.
100-129 mg/dl	Yes	Consider starting statin therapy simultaneously with lifestyle modification. Definitely start statin therapy if still >100 mg/dl after 3 months of lifestyle modification.** In patients hospitalized with an acute cardiovascular or coronary event, initiate statin therapy prior to discharge.
<100 mg/dl	Yes	Statin therapy is not required, but may further lower risk in some patients. Lowering to <70 mg/dl in very high-risk patients is an option.

\*\* In people younger than 40 years with diabetes but without CVD, lifestyle modification alone may be sufficient; however, data for this subpopulation are limited. Use clinical judgment based on other cardiovascular risk factors to guide whether or when to start drug therapy if the LDL goal of <100 mg/dl is not met by lifestyle modification alone.

## Lifestyle Modification to Manage Cholesterol

Healthy Diet	Limit saturated fat and cholesterol intake, increase fiber. Avoid all trans fat.
Weight Management	Even modest weight loss is beneficial. Lose weight gradually, aiming for 1 to 2 lbs/week.
Physical Activity	Get at least 30 minutes of moderate physical activity (such as a brisk walk) at least 5 times/week.
Smoking Cessation	Set a quit date and make a plan to quit.

### To increase medication adherence, make sure your patients:

- use a pill box
- carry a list of all medications (Note: Each and every office visit should include a reconciliation of the medications currently being used)
- understand that their lipid-lowering medication(s) should be taken EVERY DAY – even when feeling well.
- are aware that adverse effects such as muscle soreness, tenderness or pain, headache or dyspepsia can occur and should immediately be reported to their healthcare provider.
- appreciate that a lipid-lowering medication and treatment regimen is typically lifelong and multifaceted, including:
  - Diet
  - Lifestyle modification
  - Medication(s)

Before prescribing a cholesterol lowering medication for your WellCare members, providers should review WellCare's Preferred Drug List (PDL) for formulary choices.

If you wish to prescribe a non-preferred medication, please fax a completed Drug Evaluation Review (DER) to WellCare Pharmacy at (866) 388 – 1517 or call Pharmacy Services at (877) 647- 7473. A downloadable copy of the DER form may be obtained at [www.wellcare.com](http://www.wellcare.com) under provider resources/Provider Manual/ Forms.

Providers can access the Medicare formulary at the following website:  
[http://www.wellcare.com/medicare2008/medicare\\_medicationguide](http://www.wellcare.com/medicare2008/medicare_medicationguide)

## References

U.S. Preventive Services Task Force. Screening for lipid disorders in adults: U.S. Preventive Services Task Force recommendation statement. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2008 Jun.

Berger DK, Silver L, Bassett MT. Lipid Control: Preventing Cardiovascular Events in Patients With Atherosclerotic Disease or Diabetes. City Health Information. 2006; 25 (5):33-40. Modified from: The New York City Department of Health and Mental Hygiene.

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Version: 6/2008, 6/2009