

# Hypercholesterolemia Risk Stratification

In order to properly treat patients with hypercholesterolemia, one must take into account a patient's serum LDL levels in conjunction with their risk factors and 10-year risk of having a coronary heart disease (CHD)-related event, such as a myocardial infarction. The higher the number of risk factors a patient has, the lower their target LDL level must be to prevent future adverse events. Doctors may suggest lifestyle modifications or pharmacotherapy to lower LDL levels and a patient's risk of CHD-related events.



**PLAY PICMONIC** 

#### 0 - 1 Risk Factors

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In patients with 0-1 risk factors for coronary heart disease or in those with a calculated risk 10-year risk of CHD-related events <10%, target LDL is &lt; 160 mg/dL.

### < 160 mg/dl LDL goal

Less-than Sweet (16) Lard-Devil

Lifestyle modifications are recommended for those with LDL between 160 and 190 mg/dL; pharmacotherapy should be recommended in this population once LDL>190 mg/dL.

### greater or equal to 2 Risk Factors and 10-year Risk ≤ 20%

≥ (2) Tutu Risk at (10) Tin with ≤ (20) Dollar-bill

In patients with 2 or more risk factors for coronary heart disease or in those with a calculated 10-year risk of CHD-related events between 10 and 20%, target LDL is < 130 mg/dL.

### < 130 mg/dL LDL Goal

Less-than Friday the (13th) with Lard-Devil

Pharmacotherapy is recommended in this population to achieve the LDL goal of <130 mg/dL.

## Coronary Heart Disease OR >/= to 2 Risk Factors AND 10-Year Risk > 20%

Heart Diseased OR ≥ (2) Tutu Risk at (10) Tin with > (20) Dollar-bill

For patients with coronary heart disease or a risk-equivalent condition (peripheral vascular disease, diabetes mellitus, aortic stenosis, etc.) or 2 or more risk factors and a calculated 10-year risk of CHD-related events >20%, target LDL is < 100 mg/dL.

#### < 100 mg/dL LDL Goal

Less-than (100) Dollar-bill with Lard-Devil

Pharmacotherapy is necessary in this population to achieve the LDL goal of <100 mg/dL.