

# THE FOUR PILLARS TO HEALTH & WELLNESS

EXERCISE + NUTRITION + SPIRITUALITY + HEALTH

## HEALTH

### The Latest Guidelines on Cholesterol Management

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In November 2013, the American College of Cardiology (ACC) and American Heart Association (AHA) together published new guidelines for the treatment of blood cholesterol to reduce atherosclerotic cardiovascular risk in adults.



They basically shifted the paradigm from just treating cholesterol levels per se to identifying the 4 high risk groups for atherosclerotic cardiovascular (ASCVD) risk and treating them with cholesterol lowering drugs, particularly HMG Co-A reductase inhibitors, also known as statins. These 4 groups include:

1. Individuals with already established ASCVD such as prior heart attacks, strokes, TIAs (transient ischemic attacks), those with cardiac stents or bypass surgeries, peripheral arterial disease.
2. Persons aged 21 and above with LDL (low density lipoprotein) cholesterol levels of  $\geq$  190 mg/dL
3. Individuals 40-75 years of age with diabetes and with LDL 70-189 mg/dL
4. Persons 40-75 years of age with LDL 70-189 mg/dL and a 10-year ASCVD risk score of 7.5% or higher.

For this 4th group, the 10-yr ASCVD risk score is calculated based on a person's age, gender, race, smoking status, systolic blood pressure reading, total cholesterol and

HDL (high density lipoprotein) cholesterol levels.

Over the past 5 years, we have seen the practice of a more aggressive approach by physicians in deciding when to place patients on a cholesterol lowering medication (particularly a statin). This is especially true for patients who belong to the first 3 groups. On the other hand, we have also seen patients in the 4th group who now have now more compelling reasons not to be placed on cholesterol medications when their ASCVD risk score is less than 7.5% despite having moderately high LDL levels.

Lastly, the guidelines also state that lifestyle modifications for patients with elevated LDL cholesterol levels are still a critical component of ASCVD risk reduction. These include measures such as:

- Emphasize intake of vegetables, fruits and whole grains
- Include poultry, fish, legumes, non-tropical vegetable oils and nuts in diet
- Limit intake of sweets, sugar-sweetened beverages and red meat
- Avoid tobacco products
- Engage in aerobic physical activity of moderate to vigorous intensity averaging 40 minutes duration 3-4X/week

Thus, Benjamin Franklin's axiom "**an ounce of prevention**



**is worth a pound of cure**" is as true today as it was when Franklin made the quote.

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