

Transcript Details

This is a transcript of an educational program accessible on the ReachMD network. Details about the program and additional media formats for the program are accessible by visiting:

<https://reachmd.com/programs/medical-industry-feature/ldl-c-reliable-measure-your-risk-patients/8389/>

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Is LDL-C a Reliable Measure in Your At-Risk Patients?

Announcer Introduction:

This is REACHMD. Welcome to this Medical Industry Feature entitled, "Is LDL-C a Reliable Measure in Your At-Risk Patients?" sponsored by LabCorp. This program is intended for physicians.

Dr. Cromwell:

I am Dr. William Cromwell, Medical Director for Cardiovascular Disease at LabCorp. The causal role of LDL particles in the development and progression of atherosclerotic cardiovascular disease has been known for decades. LDL cholesterol, due to its broad availability, has been adopted in clinical practice as the customary measure to estimate LDL quantity, and gauge LDL-related ASCVD risk. But, importantly, traditional LDL cholesterol measures, calculated or direct, only provide estimates of LDL quantity based on the amount of cholesterol contained within LDL particles. Cholesterol content of LDL particles varies widely among individuals and is often dependent upon existing metabolic conditions such as insulin resistance, metabolic syndrome, type 2 diabetes mellitus, as well as the presence of lipid-altering medications. This is an important consideration in these at-risk patients and traditional LDL cholesterol measures may be an unreliable gauge of their LDL-related ASCVD risk.

To clarify, cardiometabolic factors include:

- Age, men 45 years of age or older, women 55 years of age or older
- Elevated blood pressure, systolic 130 or higher, diastolic 85 or higher, or on antihypertensive medication
- Abdominal obesity, waist circumference in males 40 inches or more, in Asian males 35 inches or more, in females 35 inches or more, in Asian females 31 inches or more
- Elevated triglycerides, 150 or higher, low HDL cholesterol, in men 40 or less, in women 50 or less, or on drug treatment for elevated triglycerides or low HDL cholesterol
- Increased numbers of small, dense LDL particles, an elevated fasting glucose 100 or higher, and insulin resistance

There are two widely available, cost-effective, FDA cleared measures of LDL particle number to assist clinicians in managing ASCVD risk and neither relies on the variable cholesterol content within LDL particles. First, LDL particle number, by nuclear magnetic resonance, directly counts LDL particles. Second, apolipoprotein B which estimates LDL particles.

In our continuing episodes, we will cover the clinical utility of these alternate measures and then address treatment strategies. I look forward to having you join us.

Announcer Close:

This is REACHMD. The preceding program was sponsored by LabCorp. If you have missed any part of this discussion, visit ReachMD.com/ LDLQuantity. Thank you.