

Original Contribution

National Lipid Association Annual Summary of Clinical Lipidology 2015



Harold E. Bays, MD, FTOS, FACC, FACE, FNLA*, Peter H. Jones, MD, FACP, FNLA, W. Virgil Brown, MD, FNLA, Terry A. Jacobson, MD, FACP, FNLA

Louisville Metabolic and Atherosclerosis Research Center, Louisville, KY, USA (Dr Bays); Baylor College of Medicine, Houston, TX, USA (Dr Jones); Emory University School of Medicine, Atlanta, GA, USA (Dr Brown); and Department of Medicine, Emory University, Atlanta, GA, USA (Dr Jacobson)

KEYWORDS:

Clinical Lipidology;
Dyslipidemia;
National Lipid Association;
Annual Summary;
Cholesterol;
Recommendations;
Guidelines

Abstract: The National Lipid Association (NLA) Annual Summary of Clinical Lipidology 2015 is a summary of principles important to the patient-centered evaluation, management, and care of patients with dyslipidemia. This summary is intended to be a “living document,” with future annual updates based on emerging science, clinical considerations, and new NLA Position and Consensus Statements. The goal is to provide clinicians an ongoing resource that translates the latest advances in medical science toward the evaluation and treatment of patients with dyslipidemia. The 2015 NLA Annual Summary of Clinical Lipidology was founded on the principles of evidence-based medicine and is generally consistent with established national and international lipid guidelines. Topics include a general discussion of the 2014 NLA Recommendations for Patient-Centered Management of Dyslipidemia, genetics, secondary causes of dyslipidemia, biomarkers and “advanced lipid testing,” medical nutrition, physical activity, obesity, pharmacotherapy, statin safety, lipid-altering drug interactions, lipoprotein apheresis, dyslipidemia in children and adolescence, dyslipidemia in older individuals, race/ethnicity, and women, health information technology and electronic medical records, as well as investigational lipid-altering drugs in development.
© 2014 National Lipid Association. All rights reserved.

Contents

I. INTRODUCTION

Principles S3

Bays HE, Jones PH, Brown VW, Jacobson TA. On behalf of the NLA Annual Summary of Clinical Lipidology 2015 Working Group: Apovian CM, Aspry KE, Ballantyne CM, Ferdinand KC, Foody JM, Goldberg AC, Goldberg RB, Gotto AM, Guyton JR, Ito MK, Kris-Etherton P, LaForge R, McKenney JM, Moriarty PM, Morris PB, Orringer CE, Rosenson RS, Ross JL, Saseen JJ, Thompson PD, Underberg JA, Wild RA, Willard KE, Wilson DP.

* Corresponding author. Louisville Metabolic and Atherosclerosis Research Center, 3288 Illinois Avenue, Louisville, KY 40213.

E-mail address: hbaysmd@aol.com

Submitted October 6, 2014. Accepted for publication October 6, 2014.

Appendix A Table and Figure Hyperlink Format S3
Review Board Charge 2015 S3
Review Board Members 2015 S3
II. 2014 NLA RECOMMENDATIONS FOR PATIENT-CENTERED MANAGEMENT OF DYSLIPIDEMIA PART 1.
Lipid evaluation and management principles S5
National Lipid Association (NLA) Officers and Editors 2015 S5
Lipid treatment targets. S5
 Non-high-density lipoprotein cholesterol (non-HDL-C). S5
 Low-density lipoprotein cholesterol (LDL-C). S6
 Apolipoprotein B (apo B) S6
 Triglycerides S6

High-density lipoprotein cholesterol (HDL-C)	S6	Weight management pharmacotherapy	S16
Lipid treatment goals	S6	Bariatric surgery	S16
Lipid screening	S7	VIII. LIPID PHARMACOTHERAPY	
Atherosclerotic cardiovascular disease (ASCVD) risk categories	S7	Statin Pharmacotherapy	S16
Atherosclerotic cardiovascular disease (ASCVD) risk assessment	S7	Non-statin Pharmacotherapy	S17
Very high ASCVD risk	S7	Combination Lipid-Altering Pharmacotherapy	S17
High ASCVD risk	S7	Statin Safety	S17
Moderate ASCVD risk	S8	Statin intolerance	S17
Low ASCVD risk	S8	Statin safety: muscle	S18
		Statin safety: liver	S18
		Statin safety: cognition	S18
		Statin safety: diabetes mellitus	S19
III. GENETICS AND CLASSIFICATION OF DYSLIPIDEMIA		IX. LIPID-ALTERING DRUG INTERACTIONS	
Hyperlipidemias	S8	Pharmacokinetics and pharmacodynamics	S19
Hypolipidemias	S8	Drug metabolism	S19
Clinical role of genetic testing for dyslipidemia	S8	Transporters	S19
Illustrative examples of genetic dyslipidemias	S9	Statin drug interactions	S19
EVALUATION AND MANAGEMENT OF FAMILIAL HYPERCHOLESTEROLEMIA	S9	X. LIPOPROTEIN APHERESIS	
Genetics	S9	Definition	S20
Lipids	S9	Lipoprotein apheresis clinical considerations	S20
Diagnosis	S9	Lipoprotein apheresis systems	S21
Screening and genetic testing for familial hypercholesterolemia	S10	Dextran Sulfate Apo B Lipoprotein Adsorption System (Liposorber)	S21
Treatment priorities	S10	Heparin extracorporeal LDL apheresis (HELP)	S21
Lipid-altering pharmacotherapies specifically for familial hypercholesterolemia: general principles	S10	Conventional plasmapheresis (plasma exchange)	S21
Treatment options specific for heterozygous FH	S10	Evidence for clinical benefit of lipoprotein apheresis	S21
Treatment options specific for homozygous FH	S10	XI. DYSLIPIDEMIA IN CHILDREN AND ADOLESCENTS	
IV. SECONDARY CAUSES OF DYSLIPIDEMIA		ASCVD risk for children, adolescents, and young adults <21 years of age	S21
V. ADDITIONAL LIPID PARAMETERS		Lipid screening for children, adolescents, and young adults <21 years of age	S22
High-density lipoprotein cholesterol	S11	ASCVD risk assessment in children, adolescents, and young adults <21 years of age	S22
Low-density lipoprotein particle number	S11	Management of dyslipidemia in children, adolescents, and young adults <21 years of age	S22
Lipoprotein (a)	S12	Statin therapy in children, adolescents, and young adults with dyslipidemia <21 years of age	S22
VI. BIOMARKERS AND “ADVANCED LIPID TESTING”		Non-statin therapy for children, adolescents, and young adults with dyslipidemia <21 years of age	S22
Biomarkers as initial assessment of ASCVD risk	S12	XII. DYSLIPIDEMIA IN SELECT POPULATIONS	
Biomarkers for on-treatment assessment of ASCVD therapy	S12	Dyslipidemia and older individuals	S23
VII. NUTRITION, PHYSICAL ACTIVITY, OBESITY		Dyslipidemia and race/ethnicity	S23
Medical nutrition therapy	S13	Dyslipidemia and women	S24
Triglyceride-induced pancreatitis	S13	XIII. HEALTH INFORMATION TECHNOLOGY AND ELECTRONIC MEDICAL RECORDS: LIPID MANAGEMENT AND VALUE-BASED HEALTH CARE	
Medical nutrition therapy for dyslipidemia	S13	Overview	S26
Adherence to nutrition therapy	S14	Quality aims and priorities related to lipid management	S26
Physical activity	S14		
Effects of physical activity on lipid levels	S14		
Physical activity, lipids, and weight loss	S15		
Obesity, adiposopathy, metabolic syndrome, and diabetes mellitus	S15		
Obesity as a disease	S15		
Adiposopathic dyslipidemia	S15		
Adiposopathy and the metabolic syndrome	S15		
Adiposopathy and Non-HDL-C	S15		
Clinical management of obesity, adiposopathy, metabolic syndrome, and diabetes mellitus	S16		

Download English Version:

<https://daneshyari.com/en/article/2965836>

Download Persian Version:

<https://daneshyari.com/article/2965836>

[Daneshyari.com](https://daneshyari.com)