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PERSPECTIVES IN CARDIOLOGY

**Standardization of laboratory lipid profile assessment:  
A call for action with a special focus on the 2016  
ESC/EAS dyslipidemia guidelines – Executive summary  
A consensus endorsed by the Cardiovascular Risk  
and Prevention Group of the Portuguese Internal  
Medicine Society, the Portuguese Atherosclerosis  
Society, the Portuguese Society of Cardiology,  
the Portuguese Society of Laboratory Medicine,  
and the Portuguese Association of Clinical Chemistry**

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**Abstract** Even with improvements in lifestyle interventions, better control of cardiovascular (CV) risk factors, and improvements in CV outcomes, cardiovascular disease (CVD) remains the leading cause of morbidity and mortality in Portugal and Europe. Atherogenic dyslipidemias, particularly hypercholesterolemia, have a crucial causal role in the development of atherosclerotic CVD. The clinical approach to a patient with dyslipidemia requires an accurate diagnosis, based on harmonized and standardized lipid and lipoprotein laboratory assessments. Results and reports of these tests, together with assessment of total CV risk and the respective therapeutic targets, will help ensure that clinical guidelines and good clinical practices are followed,

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## PALAVRAS-CHAVE

Dislipidemia;  
Risco cardiovascular;  
Procedimentos  
laboratoriais;  
Relatórios  
laboratoriais;  
Harmonização;  
Padronização

increasing the reliability of screening for lipid disorders, producing more accurate diagnoses and CV risk stratification, and improving CV prevention. To this end, this consensus aims to provide clinicians with practical guidance for the harmonization and standardization of laboratory lipid tests, focusing on the most recent dyslipidemia management guidelines.

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## Padronização da avaliação laboratorial do perfil lipídico: um apelo à ação com foco especial nas recomendações europeias de dislipidemia da ESC/EAS de 2016 – sumário executivo

Um consenso endossado pelo Grupo de Prevenção e Risco Cardiovascular da Sociedade Portuguesa de Medicina Interna, Sociedade Portuguesa de Cardiologia, Sociedade Portuguesa de Medicina Laboratorial e Associação Portuguesa de Analistas Clínicos

**Resumo** Apesar da melhor intervenção nos estilos de vida, do melhor controlo dos fatores de risco cardiovascular (CV) e da melhoria dos resultados CV, a doença cardiovascular (DCV) continua a ser a principal causa de morbilidade e mortalidade em Portugal e na Europa. A dislipidemia aterogénica, nomeadamente a hipercolesterolemia, tem um papel causal no desenvolvimento de DCV aterosclerótica. A abordagem clínica de um doente com dislipidemia preceitua um diagnóstico atento, sustentado em procedimentos laboratoriais harmonizados e padronizados. Os resultados e relatórios dos testes de lípidios se ajuntarem o risco CV total e os respetivos alvos terapêuticos garantem que as diretrizes clínicas e as boas práticas clínicas estão a ser seguidas e respeitadas, o que aumenta a segurança no rastreio e no diagnóstico das alterações lipídicas e da estratificação de risco e melhora a prevenção CV. Nesse sentido, este consenso tem como objetivo fornecer aos clínicos orientações práticas para a harmonização e padronização dos testes laboratoriais lipídicos, com foco nas diretrizes mais recentes da abordagem das dislipidemias.

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Cardiovascular disease (CVD) remains one of the leading causes of morbidity and mortality worldwide.<sup>1,2</sup> In Portugal, diseases of the circulatory system accounted for 29.5% of deaths recorded in 2013, with a mortality of 54.6 per 100 000 for cerebrovascular disease and of 32.9 per 100 000 for ischemic heart disease.<sup>3</sup>

Atherogenic dyslipidemias, particularly hypercholesterolemia, play an unquestionable role in the development of atherosclerotic CVD. Accurate and timely diagnosis of dyslipidemia is of crucial importance. For this diagnosis, it is essential to obtain an accurate laboratory assessment of the patient's lipid profile. This information, combined with thorough clinical history collection and physical examination, can be used to determine the patient's CV risk, a key tool in therapeutic management.<sup>4</sup> The intensity of risk-reduction therapy should generally be adjusted to the patient's absolute risk for a CVD event. Appropriate screening, prevention, diagnosis, monitoring and treatment, combined with an accurate and standardized laboratory diagnosis, are essential to the management of dyslipidemias and CVD prevention in clinical practice.

In Portugal, a need has been identified to harmonize various aspects of laboratory lipid measurements. A

meeting with specialists in clinical pathology, laboratory medicine, clinical analysis, cardiology, internal medicine and endocrinology was held with the purpose of preparing nationwide recommendations for lipid profile assessment and reporting in adult patients, based on the latest guidelines for CVD prevention and treatment. The recommendations presented herein reflect the debate and consensus reached by this expert panel. This proposal reflects the most recent European guidelines on CVD prevention<sup>5</sup> and the management of dyslipidemias.<sup>4</sup> They should serve as a foundation for standardizing lipid assessment strategies, as well as laboratory lipid assessment reports, in all national clinical analysis laboratories. These recommendations are divided into four main topics: CVD prevention and treatment guidelines; dyslipidemia screening; lipid biomarker assessment; and reporting of laboratory lipid assessments.

## Cardiovascular disease prevention and treatment guidelines

There are various national and international guidelines on the prevention and treatment of CVD. This expert panel recommends adopting the recommendations of the Euro-

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