

A.I.M. - Management using the NMR LipoProfile test

A I M Assess your patient's CVD risk

LDL-P (LDL particle number) _____ nmol/L

Write the LDL-P results on the line above. Check the corresponding LDL-P category on the right.

Even with adequate LDL cholesterol lowering, many patients on statin therapy have significant residual CVD risk.¹

Very-high: LDL-P > 2000

High: LDL-P 1600 - 2000

Borderline-high: LDL-P 1300 - 1599

Near Optimal: LDL-P 1000 - 1299

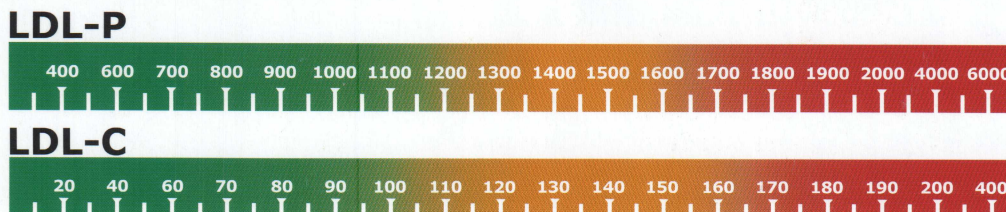
Optimal: LDL-P < 1000

A I M Identify goals

Choose the appropriate goals for this patient based on your overall CVD risk evaluation.

	LDL-P ²	LDL-C ³	Triglycerides	HDL-C
CVD Risk	Very-high	<1000 nmol/L	<100 mg/dl or <70 mg/dl	<150 mg/dl
	High	<1000 nmol/L	<100 mg/dl	Men >40 mg/dl Women >50 mg/dl
	Moderately-high	<1300 nmol/L	<130 mg/dl	<150 mg/dl

Chart your patient's LDL-P and LDL-C.



A I M Manage LDL-P

NMR LipoProfile test results can be used with clinical evaluation to aid in the management of lipoprotein disorders associated with cardiovascular disease.

Change in Laboratory Values

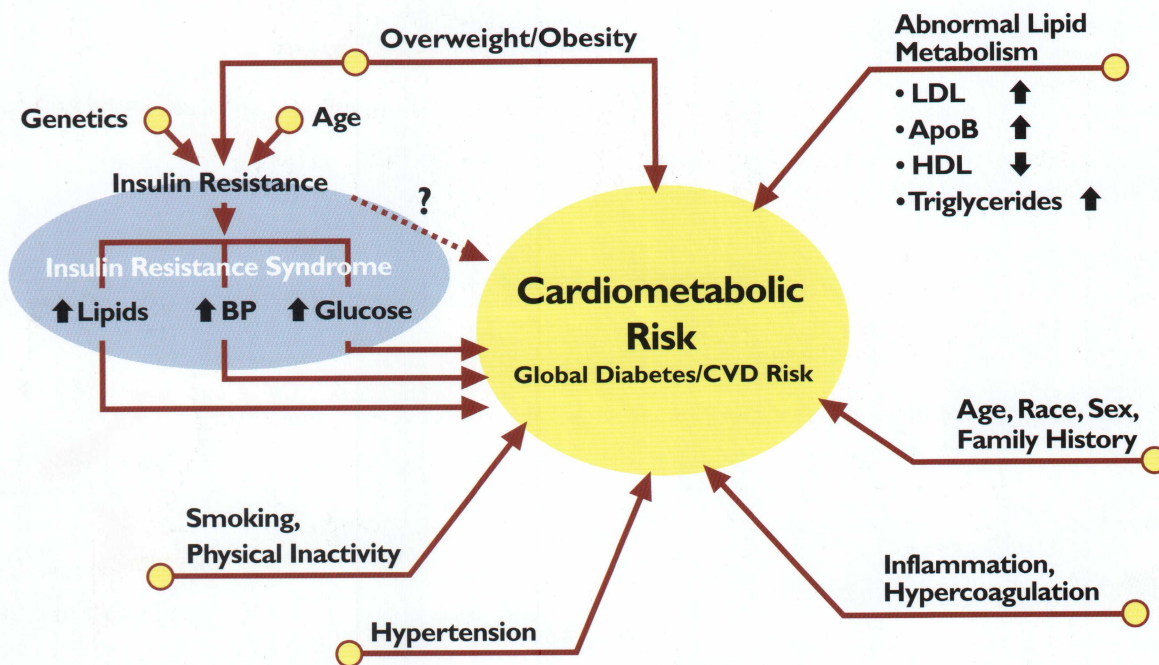
Adapted from *Therapeutic Lipidology*, 2006

Lipid-altering agent	LDL-P (%)	Triglyceride (%)	HDL-C (%)
Statins	18-55 ▼	07-30 ▼	05-15 ▲
Nicotinic acid (Niacin)	10-25 ▼	20-50 ▼	15-35 ▲
Fibric acids (Fibrates)	05-20 ▼	20-50 ▼	10-20 ▲
Ezetimibe	15-25 ▼	04-11 ▼	02-05 ▲
Bile acid sequestrants	15-30 ▼	No change/increase	03-05 ▲
Fish oils	Trials in progress	20-50 ▼	No change/increase
Phytosterols/phytostanols	Trials in progress	No change/decrease	No change/increase

Therapeutic lifestyle changes and pharmacologic interventions can be used to lower LDL particle number (LDL-P).

Clinical CVD Evaluation

Factors Contributing to Cardiometabolic Risk



Reprinted with permission from Brunzell JD, et al., Lipoprotein Management in Patients with Cardiometabolic Risk Consensus Statement from the American Diabetes Association and the American College of Cardiology Foundation. *JACC*. 2008;51:1513.

- Global cardiometabolic risk (CMR) is a multitude of risk factors which occur together or separately that increase risk for Type II Diabetes and Cardiovascular Disease (CVD).¹
- Many patients with CMR or diabetes have relatively normal levels of LDL cholesterol but may have increased LDL particle number (LDL-P).¹
- Even with adequate LDL cholesterol lowering, many patients on statin therapy have significant residual CVD risk.¹

Use the Framingham risk prediction score or other risk prediction models to determine a patient's risk.

Your Patient's Relative CVD Risk

- Very High
- High
- Moderately-High
- Low

1. Brunzell et al., *JACC*. 2008;51:1513. 2. Cromwell et al., *Am J Cardiol*. 2006;98:1599-1602. 3. Executive Summary NCEP ATP III Guidelines. *JAMA* 2001. 4. Adams et al., *Markers in Cardiology*. Blackwell Publishing. 2007. 5. Davidson et al. *Therapeutic Lipidology*. Humana Press 2007

