

Interim revisions to the UMHS Screening and Management of Lipids clinical guideline
7/9/2020

To: Family Medicine, General Internal Medicine, Geriatric Medicine, Cardiology, Ambulatory Pharmacy Services, Residents in Family Medicine and Internal Medicine CC: Hae Mi Choe

Subject: Interim revisions to the UMHS Screening and Management of Lipids clinical guideline

Background. UMHS clinical guidelines undergo periodic systematic updates, and occasionally new evidence and consensus about changes in clinical practice result in interim revisions to specific topics within a guideline.

Screening and Management of Lipids Guideline:

- Assess ASCVD risk. Table 3 has been updated with additional patient factors that may enhance risk for ASCVD or increase benefit from statin therapy.
- Continue to recommend a healthy lifestyle for all.
- Use statins as the first-line pharmacological treatment. Table 5 shows the four main groups of patients likely to benefit. Choose statin dosing based on % LDL-C reduction: high-intensity statin ($\geq 50\%$), moderate-intensity statin (30–49%).
- Non-statin treatment. If a patient is at very high-risk for ASCVD, on maximally tolerated statin, and LDL-C is ≥ 70 mg/dL, consider adding ezetimibe. If LDL-C remains ≥ 70 mg/dL, consider adding a PCSK9 inhibitor. Information about PCSK9 inhibitors has been added to Table 7.

The updated version of this guideline is now available at <http://www.uofmhealth.org/provider/clinical-care-guidelines>. The guidelines can also be accessed through the UMHS Clinical Home Page under Clinical References: FGP Guidelines: Ambulatory / Inpatient.

If you have questions about these revisions or other aspects of the UMHS Ambulatory Care Clinical Guidelines Program, please contact us via email ClinCareGuidelines@med.umich.edu or phone 734-936-9771.

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