Attainment of Goal and Normalized Lipid Levels With Lipid-Modifying Therapy in Malaysia.

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Abstract

BACKGROUND: Although LDL-C is the primary lipid target for coronary heart disease (CHD) risk reduction, HDL-C and triglycerides (TG) have also emerged as CHD risk factors.

OBJECTIVE: The objective of this study was to evaluate goal/normal lipid level attainment after lipid-modifying therapy (LMT) in an ethnically diverse sample of patients in Malaysia.

METHODS: Retrospective, longitudinal data were collected from the medical records of patients aged ≥35 years in whom LMT was initiated between January 2004 and December 2006. Eligible patients had records of full lipid panels 12 months before and after the start of therapy. LDL-C goals and normal levels of HDL-C and TG were defined as per the Clinical Practice Guidelines on Management of Dyslipidemia (4th edition), Malaysia. A subgroup of patients at high risk for CHD events (established CHD, diabetes but no CHD, or a 10-year history of Framingham risk score ≥20%) was also studied.

RESULTS: Among 607 eligible patients (mean age, 57.1 years; 40% male), 89% had elevated LDL-C, 37% had low HDL-C, 56% had elevated TG, and 62% had ≥2 abnormal lipid levels before LMT. Despite therapy (87% statins only), 60% had elevated LDL-C, 37% had low HDL-C, 40% had elevated TG, and 44% continued to have ≥2 abnormal lipid levels.

CONCLUSIONS: In this longitudinal study of Malaysian patients treated with lipid-modifying therapy, primarily using statins, attainment of LDL-C goal is suboptimal. Furthermore, a large proportion of patients do not achieve normal levels of HDL-C and TG. Therefore, patients may benefit from a more comprehensive approach to lipid management that treats all 3 lipid risk factors, as suggested in clinical guidelines.

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