



Suboptimal Achievement of Low-Density Lipoprotein Cholesterol Targets in High and Very High Risk Patients at the Cardiologist Office in a Developing Country (Mexico)

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Introduction. ACC/AHA guidelines have been a good reference regarding risk stratification and goals for lipid profile; nevertheless goals achievement is a major challenge. Guidelines implementation outside of USA could represent a major challenge. Our group is designed to evaluate real world data regarding cardiologist practice in Mexico.

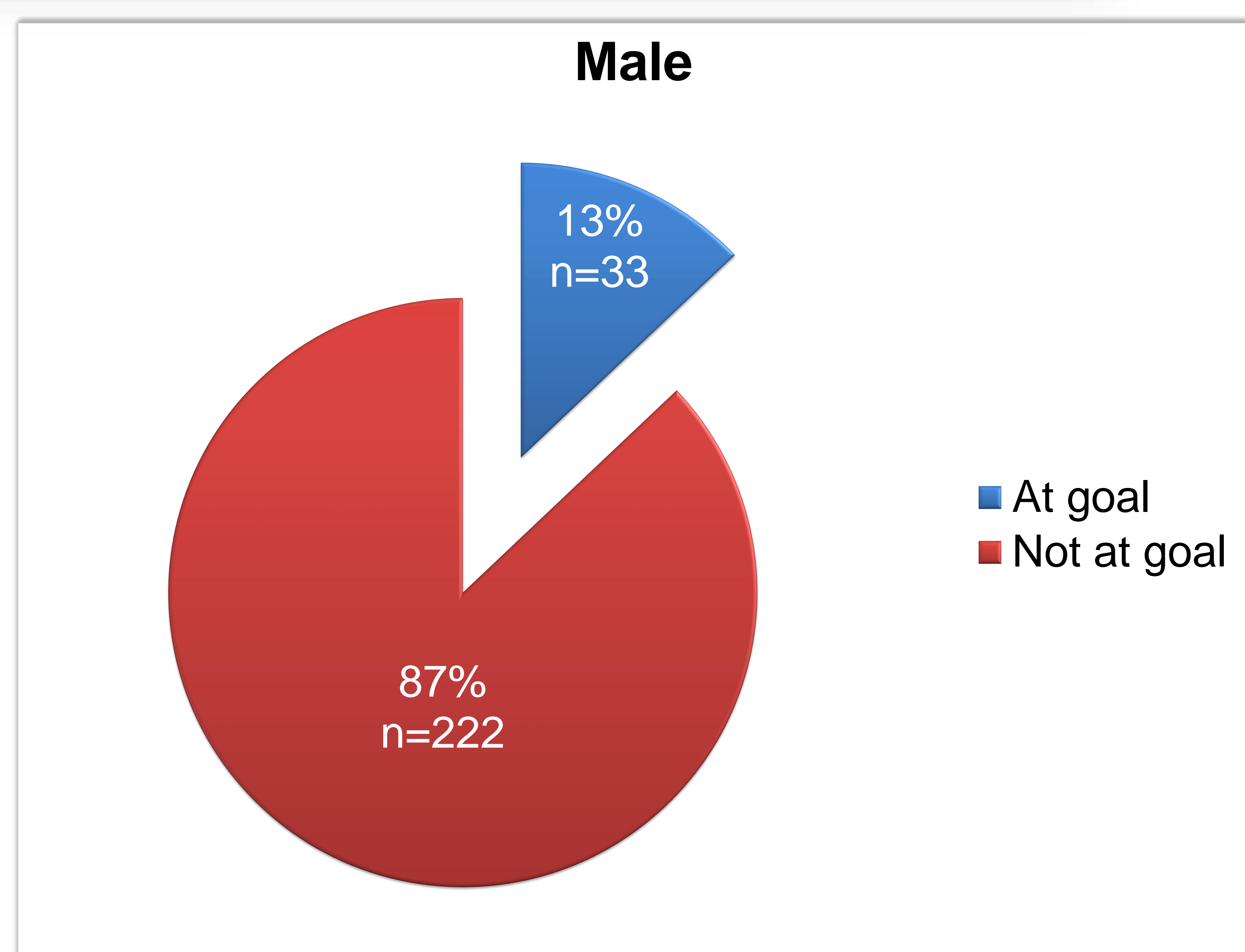
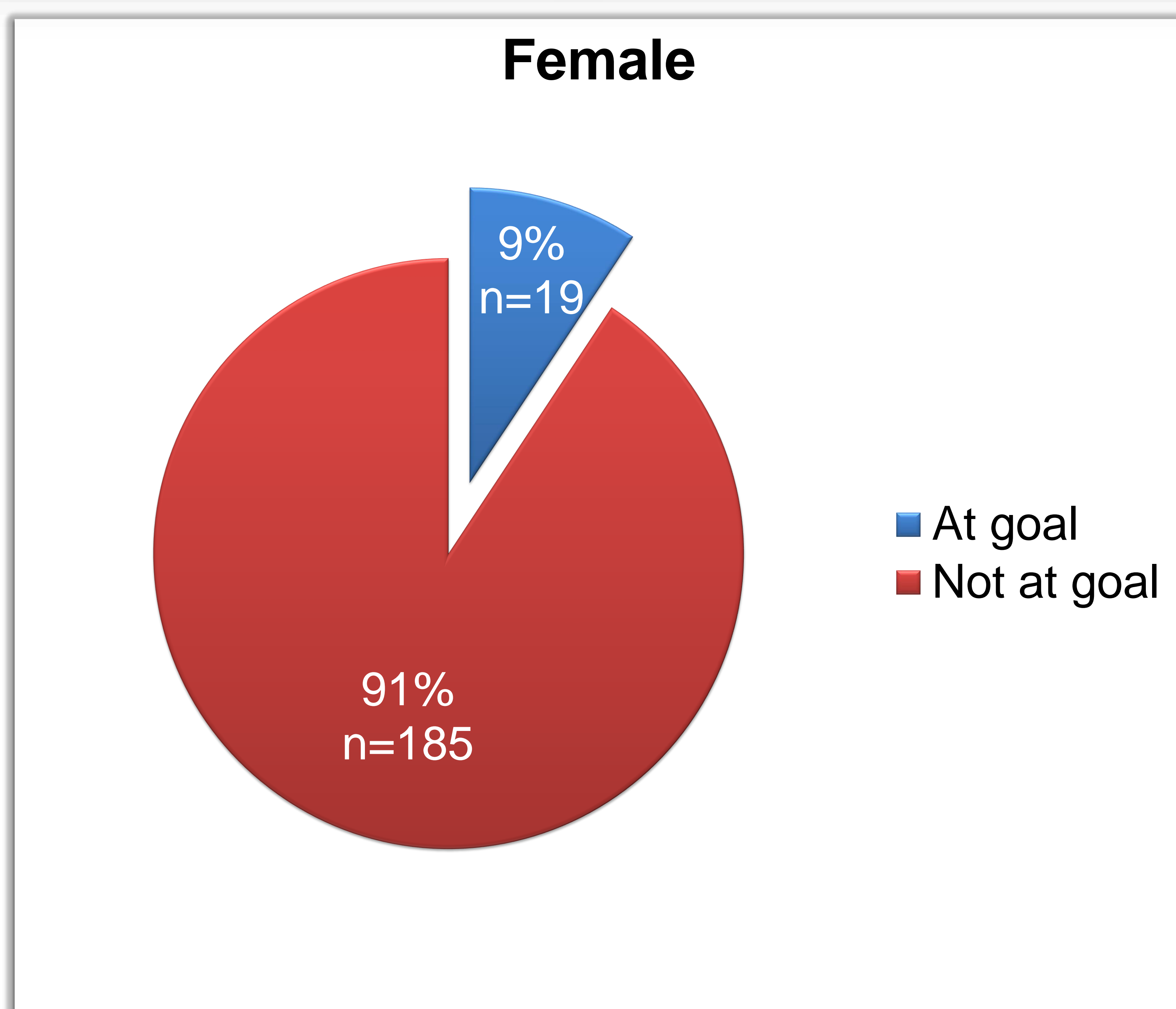
Objective. To evaluate LDL goal achievement on high risk population according of CV risk calculator, that attend cardiologists office in Mexico

Methods. Multicenter, prospective analysis. High risk patients that attend cardiologist's office in Mexico were evaluated. 26 physicians from 10 different major cities participated. Statistical descriptive analysis was applied.

Results. 459 patients, 56% male, average age 64 ± 10y were evaluated. 11 % achieved LDL ≤70mg/dL. 64% only received statins as dyslipidemia treatment. 11% of patients receiving statin monotherapy achieved therapeutic goal in the high risk group. No major differences between diabetic and non-diabetic, hypertensive and, normotensive groups. No differences between male and female groups.

Table1. Percentage of patients in LDL-C goals according to the gender

	At goal n(%)	Not at goal n(%)	Total
Female	19(4)	185(40)	204(44)
Male	33(7)	222(48)	255(56)
Total	52(11)	407(89)	459(100)



Conclusion. Only a very small percentage of patients at high risk achieved LDL goal. The presence of diabetes or others cardiovascular risks factors did not impact results. Achievement of the goals on high risk patients is not easy but, a major medical education plan and patient programs must be implemented.