

SAND abstract No. 117 from the BEACH program 2007–08

Subject: Lipid management in patients with high-risk conditions

Organisations supporting this study: Merck, Sharp & Dohme (Australia) Pty Ltd and AstraZeneca Pty Ltd (Australia).

Issues: Prevalence of selected high-risk conditions among patients attending general practice; current lipid levels; whether target levels were met; lipid lowering management; proportion who had cholesterol test in conjunction with current encounter; proportion ever managed by a specialist for dyslipidaemia; type of specialist; future management plan.

Sample: 8,834 patients from 301 GPs; data collection period: 06/06/2006 – 14/08/2006, 05/06/2007 – 16/07/2007 and 30/10/2007 – 03/12/2007.

Method: Detailed in the paper entitled 'SAND Method 2007–08' on this website: <www.fmrc.org.au/publications/SAND_abstracts.htm>. High-risk conditions listed: coronary heart disease (CHD), diabetes, hypertension, familial hypercholesterolaemia, elevated cholesterol, family history of CHD and peripheral vascular disease. This abstract is an update of SAND abstract number 99, as additional data were collected in 2007–08.

Summary of results

The age and sex distributions of respondents were similar to the distributions for all BEACH encounters, with the majority (59.1%) of patients being female.

From the 8,834 encounters, 3,725 (42.2%, 95% CI: 40.2–44.1) patients had at least one of the listed high-risk conditions, the most common being hypertension and elevated cholesterol (24.6% and 18.1% respectively). Age-specific rates increased with age to 79.7% (95% CI: 77.0–82.5) among patients 75+ years. One-fifth of patients (21.7%) indicated they had only one of the listed high-risk conditions and 20.5% had two or more. The rest of these analyses are limited to the 3,725 encounters with patients with at least one listed high-risk condition.

Total cholesterol (TC) level was provided for 2,928 patients; the average TC level was 5.1 mmol/L. Female patients had a significantly higher average level (5.3, 95% CI: 5.2–5.3) than males (4.9, 95% CI: 4.9–5.0). GP opinion was 55.5% of 2,600 respondents had reached target TC levels. Average high density lipoprotein (HDL) level was 1.5 mmol/L (among 2,448 respondents), 82.8% (of 2,139 respondents) having reached target HDL level. Average low density lipoprotein (LDL) level was 2.9 mmol/L (among 2,367 respondents), 59.7% (of 2,069 respondents) having reached target level. Average triglyceride (TG) level was 1.7 mmol/L (among 2,783 respondents), 73.8% (of 2,364 respondents) having reached target TG level.

Of 3,410 patients for whom information on current lipid medication was available, 1,442 (42.3%) were currently taking 1,471 lipid medications. Atorvastatin accounted for 47.7%, simvastatin for 31.5% and pravastatin for 9.7% of these. Of 2,527 respondents, 57.7% indicated diet and/or exercise advice was a current lipid management strategy.

Of the 3,506 respondents to the question on cholesterol monitoring, 32.1% were tested in conjunction with the current consultation. Specialists had at some time managed 11.3% of 3,387 patients for dyslipidaemia, usually a cardiologist (63.1% of 287 patients for whom specialist type was recorded). Of the 3,462 respondents, changes to medication were planned for 15.1%: 2.9% to increase the dose of the same medication; 2.1% to add a new medication.

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AIHW Australian GP Statistics and Classification Centre, 2008. SAND abstract No.117 from the BEACH program: Lipid management in patients with high-risk conditions: AGPSCC University of Sydney. ISSN 1444-9072

PLEASE READ CAREFULLY

The shaded section of the following forms asks questions about **PATIENT LIPID LEVELS and MANAGEMENT.**
 You may tear out this page as a guide to completing the following section of forms.

INSTRUCTIONS

Ask **ALL** of the **next 30 PATIENTS** the following questions in the order in which the patients are seen.

Please **DO NOT** select patients to suit the topic being investigated.

FOR THE DOCTOR

Please use the tick boxes to indicate whether this patient has any of the listed **risk factors**.

Tick as many as apply.

If the patient has none of these conditions **please end the questions** here.

Cholesterol level

Please advise the patient's levels of -

- Total Cholesterol (TC)
- High Density Lipoprotein Cholesterol (HDLc)
- Low Density Lipoprotein Cholesterol (LDLc)
- Triglycerides (TG)

at the time of **most recent testing**.

Please circle an option to indicate whether, in your **clinical opinion, target lipid levels** have been reached for this patient.

Lipid-lowering therapy

Please write the **name, regimen and duration of usage** of the **lipid-lowering medication** taken by this patient e.g. **atorvastatin 10mg/day 6 mths.**

If **no medication** is currently being taken please tick the box labelled '**none**'.

Please write the **same details for the most recent previous lipid-lowering medication** (if medication has changed). If medication or regimen **has not changed** since treatment commenced, please write '**as above**' in the '**previous medication**' space. If **no medication** was previously taken please tick the box labelled '**none**'.

If the patient's lipid levels are managed through **diet and/or advice about exercise or lifestyle changes**, please use the tick boxes beside the **diet/advice** label to advise whether this is a **current** or **previous** management strategy. If not, please tick the box labelled '**none**'.

Referral

If this patient has **elevated cholesterol** please advise whether the **elevated cholesterol** has ever been **managed by a specialist**.

If '**Yes**' please specify the **type of specialist**.

Please also indicate the initial **reason for referral**. For example:- change of medication, up- or down-titration of dosage, side-effect(s) of medication, etc.

Cholesterol monitoring

Please advise whether the **patient's blood cholesterol** has been **tested in conjunction with this consultation** i.e. for **review** at this consultation, or **as a result** of this consultation.

Management plan

Please use the remaining tick boxes to advise your management plan for this patient.

<p>Does this patient have?</p> <input type="checkbox"/> Existing CHD <input type="checkbox"/> Diabetes mellitus <input type="checkbox"/> Hypertension <input type="checkbox"/> Familial hypercholesterolaemia <input type="checkbox"/> Elevated cholesterol <input type="checkbox"/> Family history of CHD <input type="checkbox"/> Peripher. vasc. disease <input type="checkbox"/> None of above → END	<p>If known, please advise the most recent lipid levels (in mmol/L):</p> <p>TC _____ HDLc _____ LDLc _____ TG _____</p>	<p>Have target levels been reached? (please circle)</p> <p>Yes / No Yes / No Yes / No Yes / No</p>	<p>Current lipid medication is- <input type="checkbox"/> None</p> <p><u>Name</u> <u>Dose</u> <u>Duration of use</u></p> <p>_____</p> <p>Previous lipid medication was- <input type="checkbox"/> None</p> <p><u>Name</u> <u>Dose</u> <u>Duration of use</u></p> <p>_____</p> <p>Diet/advice- <input type="checkbox"/> current <input type="checkbox"/> previous <input type="checkbox"/> None (tick either or both as applicable)</p>	<p>The patient's cholesterol has been tested for/will be tested as a result of this consultation?</p> <input type="checkbox"/> Yes <input type="checkbox"/> No	<p>Has this patient ever had their elevated cholesterol managed by a specialist?</p> <input type="checkbox"/> Yes - _____ (please specify type of specialist) Because of _____ <input type="checkbox"/> No	<p>The management plan for this patient is-</p> <input type="checkbox"/> No change <input type="checkbox"/> Same medication - Increase dose <input type="checkbox"/> Change medication _____ (name and dose) <input type="checkbox"/> Additional therapy _____ (name and dose) <input type="checkbox"/> Other _____ (please specify)
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