

# LDL-C goals attainment in patients at very high cardiovascular risk: a multicentric RWE evaluation in Colombia

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## INTRODUCTION

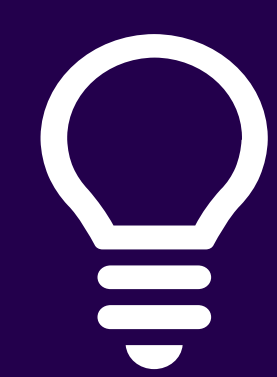
Cardiovascular disease is the leading cause of morbidity and mortality in Colombia, making the management of risk factors such as dyslipidemia crucial.

### OBJECTIVE

This study describes preliminary results of LDL-C goal attainment in very-high cardiovascular risk (VHR) patients in 2011, 2016, and 2021, in accordance with the ESC/EAS guidelines for the management of dyslipidemia<sup>1-3</sup>.

## METHODS

- Retrospective, descriptive, multicenter cohort study including patients from 9 hospitals in 7 Colombian regions with Coronary Artery Disease reported in coronary angiographies.
- Lipid-lowering therapy (LLT) information and lipid profile results at the time of CA and during a 12-month follow-up period were included.
- LDL-C goal attainment was evaluated based on the guidelines' thresholds for each year (2011: <70mg/dL, 2016: <70mg/dL, 2021: <55mg/dL), considering the available LLT.



**POSTER HIGHLIGHT:** The insufficient achievement of LDL-C targets and high use of statin monotherapy in VHR Colombian patients highlight the need for stricter monitoring and timely therapeutic escalation.

Figure 1. Distribution by gender and age group

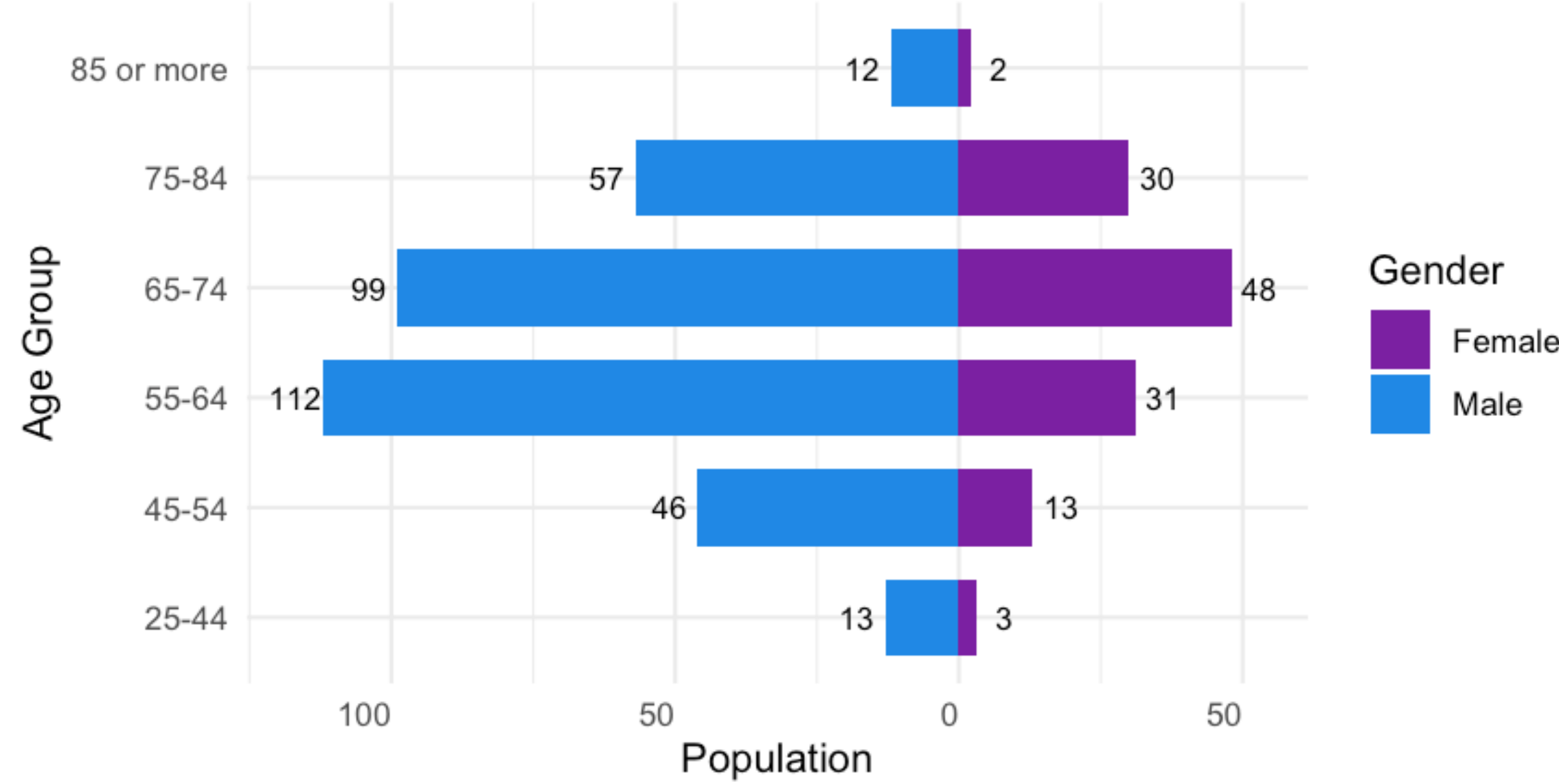


Figure 2. Indications for coronary angiographies

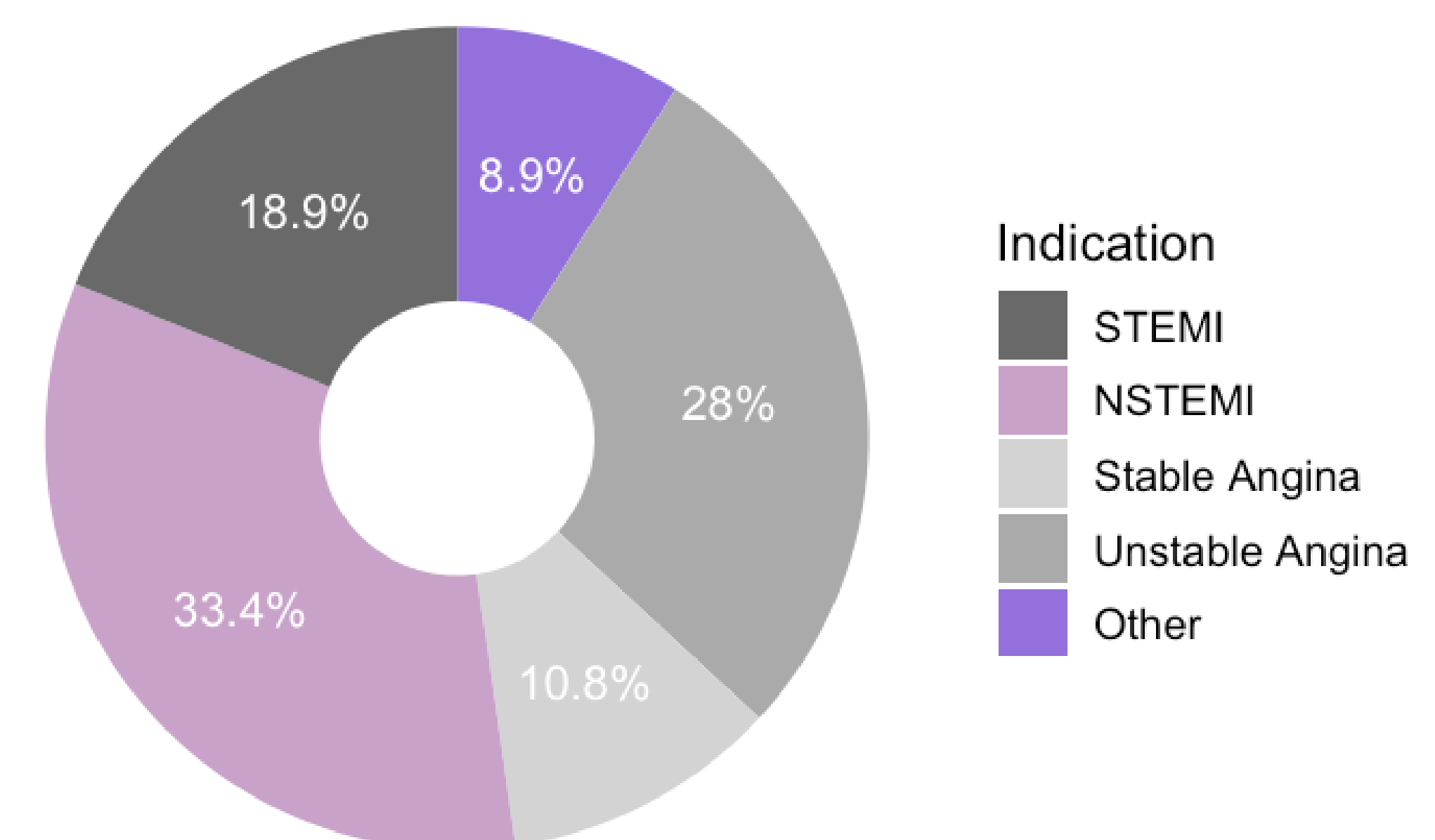


Figure 3. LDL-C goal attainment across years and quarters

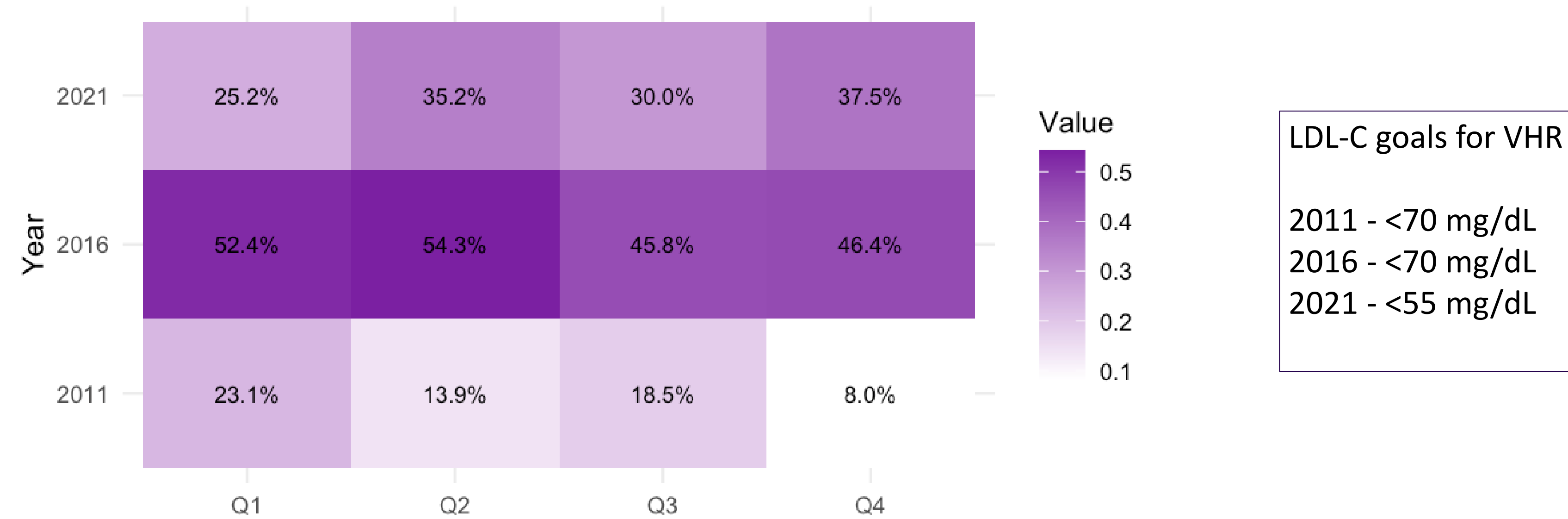
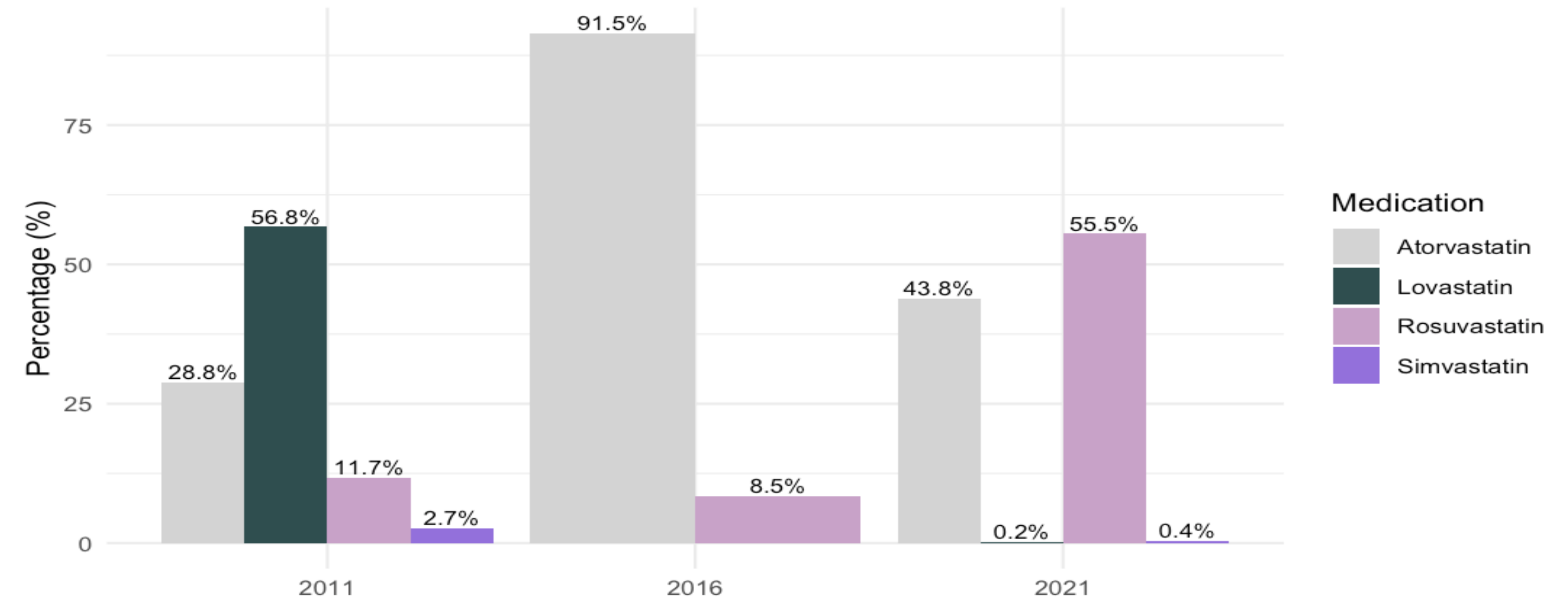


Figure 4. Statin prescription by year



## RESULTS

466 out of 780 patients were included. Mean age was 65 years, and 339 (72.7%) were men. Figure 1 displays the distribution by gender and age group. The principal indications for coronary angiographies (Figure 2) were non-ST-segment elevation myocardial infarction (33.4%) and unstable angina (28.0%). The distribution of patients across 2011, 2016, and 2021 was 78 (17%), 86 (18%), and 302 (65%), respectively. On average, the achievement of the LDL-C goal was observed in 15.9% of patients in 2011, 49.7% in 2016, and 32.0% in 2021 (Figure 3). Mean LDL-C among those who achieved goals was 51.96mg/dL in 2011, 51.87mg/dL in 2016 and 42.07mg/dL in 2021, reflecting average reductions of 25.8%, 25.9% and 23.5%, respectively.

The most prescribed medications (Figure 4) were lovastatin (56.8%) in 2011, atorvastatin (91.5%) in 2016, and rosuvastatin (55.5%) in 2021. Prescription of PCSK9 inhibitors was low (2.6%) during 2021.

## CONCLUSIONS

Preliminary results showed that achievement of LDL-C target was insufficient, and the rate of statin monotherapy prescription was high in patients at VHR. This suggests the importance of strict patient monitoring and timely medical education on therapeutic escalation considering options like PCSK9 inhibitors, to achieve optimal clinical outcomes.

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