

How should public health recommendations address Lp(a) measurement, a causative risk factor for cardiovascular disease (CVD)?

Alberico L. Catapano, Magdalena Daccord, Elaine Damato, Steve E. Humphries, R. Dermot G. Neely, Børge G. Nordestgaard, Michele Pistollato, Elisabeth Steinhagen-Thiessen

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Methodology	Benefits of measuring the Lp(a) concentration		
<p>1 A structured literature review</p> <p>2 An advisory board</p>	At-risk individuals and family members can be identified	Existing patients' risk can be re-classified	Identified patients can be provided with effective intervention to control modifiable ASCVD risk factors
	Reduction in clinical events through the introduction of better targeted preventive strategies	Development of up-to-date epidemiological data for more informed healthcare system decision-making	Reduction in healthcare inequalities as socioeconomic disparities are prominent in CVD

Barriers hindering the uptake of the Lp(a) concentration measure

					
Perception that the Lp(a) measure has limited clinical value	Lack of awareness on Lp(a)	Lack of standardisation of the Lp(a) measure	Lack of actionable recommendations on how physicians should manage a patient with elevated Lp(a)	Limited reimbursement of the measure of Lp(a) concentration	Lack of data on the CV benefit of reducing Lp(a)

Policy solutions to support a wider uptake of the Lp(a) concentration measure

Educational campaigns targeting physicians on the clinical and healthcare benefits of measuring Lp(a)	Educational campaigns targeting the public on the role of Lp(a) in ASCVD	Collaboration amongst stakeholders on the standardisation and validation of Lp(a) tests	Updating clinical guidelines to cover Lp(a) and recommend cascade screening	Increase awareness on the benefits of measuring Lp(a) amongst policymakers	Launch more studies on Lp(a) to collect more evidence and to support advocacy strategies
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