

Table 1 Treatment Recommendations		
Guideline	LDL Goal	Recommendation
ACC/AHA ⁷	No	<p>High-intensity statin (atorvastatin 40-80 mg daily, rosuvastatin 20-40 mg daily)</p> <ul style="list-style-type: none"> Age \leq 75 with clinical ASCVD; \leq 75 with LDL-C \geq190 mg/dL; diabetes with age 40-75, LDL-C 70-189 mg/dL, and ASCVD risk \geq 7.5%; age 40-75, LDL-C 70-189 mg/dL, and ASCVD risk \geq 7.5% <p>Moderate-intensity statin (atorvastatin 10 mg daily, rosuvastatin 10 mg daily, simvastatin 20-40 mg daily, pravastatin 40 mg daily, lovastatin 40 mg daily, fluvastatin 40 mg twice daily)</p> <ul style="list-style-type: none"> Clinical ASCVD and not a high-intensity statin candidate; LDL-C \geq190 mg/dL and not a high-intensity statin candidate; diabetes with age 40-75, LDL-C 70-189 mg/dL, and ASCVD risk $<$ 7.5%; age 40-75, LDL-C 70-189 mg/dL, and ASCVD risk 5-7.5% + a secondary risk factor
AACE ⁸	Yes	<ul style="list-style-type: none"> Statins are recommended as the primary lipid lowering agent with established treatment goals Extreme risk: progressive ASCVD, established clinical cardiovascular disease in patients with DM^a, CKD^b stage 3 or 4, or HeFH^c, history of premature ASCVD <ul style="list-style-type: none"> Goals: LDL-C $<$55, non-HDL-C $<$ 80, Apo B $<$70 Very high risk: established or recent hospitalization for ACS^d, carotid or peripheral vascular disease, 10-year risk $>$20%, DM or CKD stage 3 or 4 with \geq 1 risk factor^d, HeFH <ul style="list-style-type: none"> Goals: LDL-C $<$70, non-HDL-C $<$100, Apo B $<$80 High risk: \geq 2 risk factors and 10-year risk 10-20%, DM or CKD stage 3 or 4 with no other risk factors <ul style="list-style-type: none"> Goals: LDL-C $<$100, non-HDL-C $<$130, Apo B $<$90 Moderate risk: \leq 2 risk factors and 10 year risk $<$10% <ul style="list-style-type: none"> Goals: LDL-C $<$100, non-HDL-C $<$130, Apo B $<$90 Low risk: 0 risk factors <ul style="list-style-type: none"> Goals: LDL-C $<$130, non-HDL-C $<$160
NLA ⁹	Yes	<ul style="list-style-type: none"> Moderate or high-intensity statin therapy with established treatment goals Very high risk: ASCVD or DM with \geq 2 major ASCVD risk factors or evidence of end-organ damage <ul style="list-style-type: none"> Goals: LDL-C $<$70, non-HDL-C $<$100, Apo B $<$80 High risk: \geq3 major ASCVD risk factors^e, DM with 0-1 major ASCVD risk factors and no evidence of end-organ damage, CKD stage 3 or 4, LDL-C of \geq190 mg/dL, or quantitative risk score reaching the high-risk threshold <ul style="list-style-type: none"> Goals: LDL-C $<$100, non-HDL-C $<$130, Apo B $<$90 Moderate risk: 2 major ASCVD risk factors <ul style="list-style-type: none"> Goals: LDL-C $<$100, non-HDL-C $<$130, Apo B $<$90 Low risk: 0-1 major ASCVD risk factors <ul style="list-style-type: none"> Goals: LDL-C $<$100, non-HDL-C $<$130, Apo B $<$90
<p>^aDiabetes mellitus ^bChronic kidney disease ^cFamilial hypercholesterolemia ^dAACE ASCVD risk factors:⁸ Major: advancing age, increased total serum cholesterol level, increased non-HDL-C, increased LDL-C, low HDL-C, diabetes mellitus, hypertension, chronic kidney disease, cigarette smoking, family history of ASCVD; additional: obesity, abdominal obesity, family history of hyperlipidemia, increased small</p>		

dense LDL-C, increased apoB, increased LDL particle concentration, fasting/post-prandial hypertriglyceridemia, PCOS, dyslipidemic triad; nontraditional: increased lipoprotein, clotting factors, inflammation markers, homocysteine levels, uric acid, triglyceride-rich remnants, and apo E4 isoform
eNLA major ASCVD risk factors:⁹ Age (male \geq 45, female \geq 55), family history of early coronary heart disease (<55 in a male or <65 in a female first-degree relative), current cigarette smoking, high blood pressure (\geq 140/ \geq 90 mmHg, or on blood pressure medication), Low HDL-C (male <40 mg/dL, female <50 mg/dL)

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