

Rolul interventiei dietetice si medicamentoase in controlul profilului lipidic in practica curenta

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Ghidurile ESC/ESH 2021

Regiuni cu risc privind rata mortalității cardiovasculare a Organizației Mondiale a Sănătății

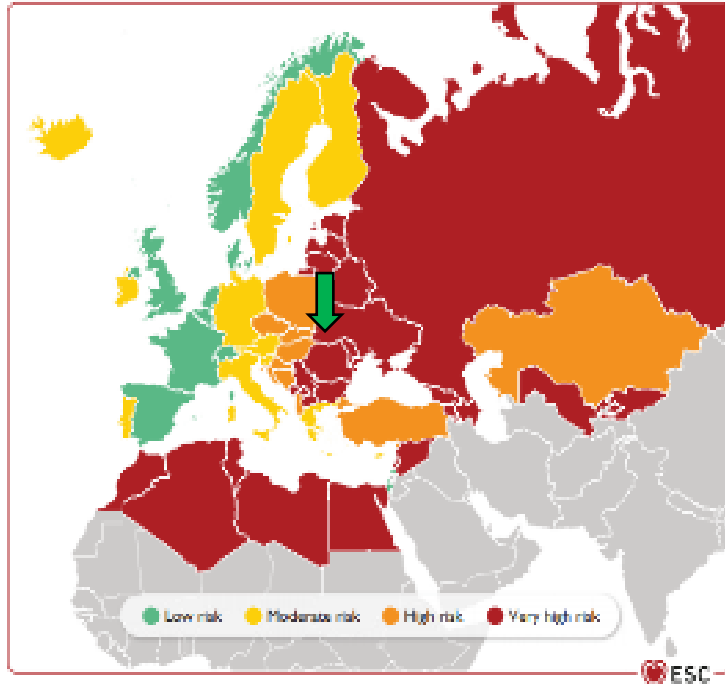
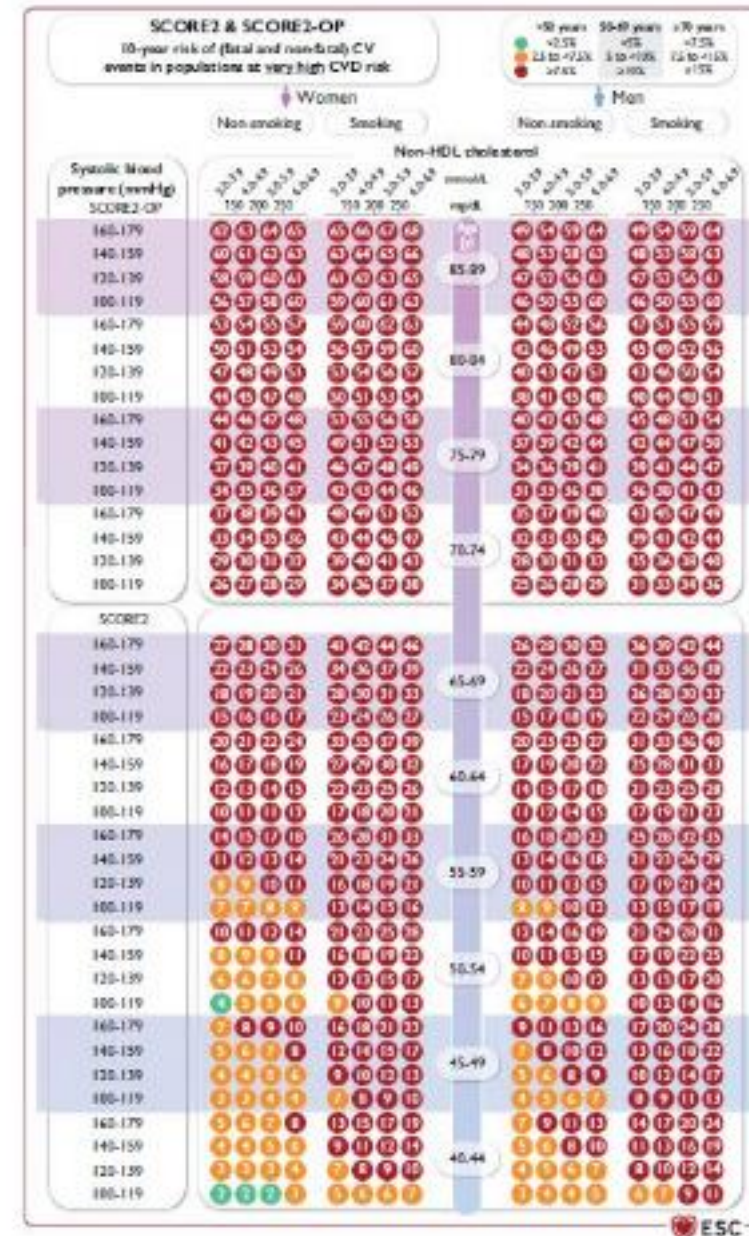


Figure 4 Risk regions based on World Health Organization cardiovascular mortality rates, 2011

SCORE2 & SCORE2-OP Harta de risc fatal sau non-fatal (infarct miocardic, boală aterosclerotică)



INTERVENȚIE TIMPURIE

Scăderea nivelului LDL-C mai devreme

- Previne/întârzie progresia aterosclerozei (1)



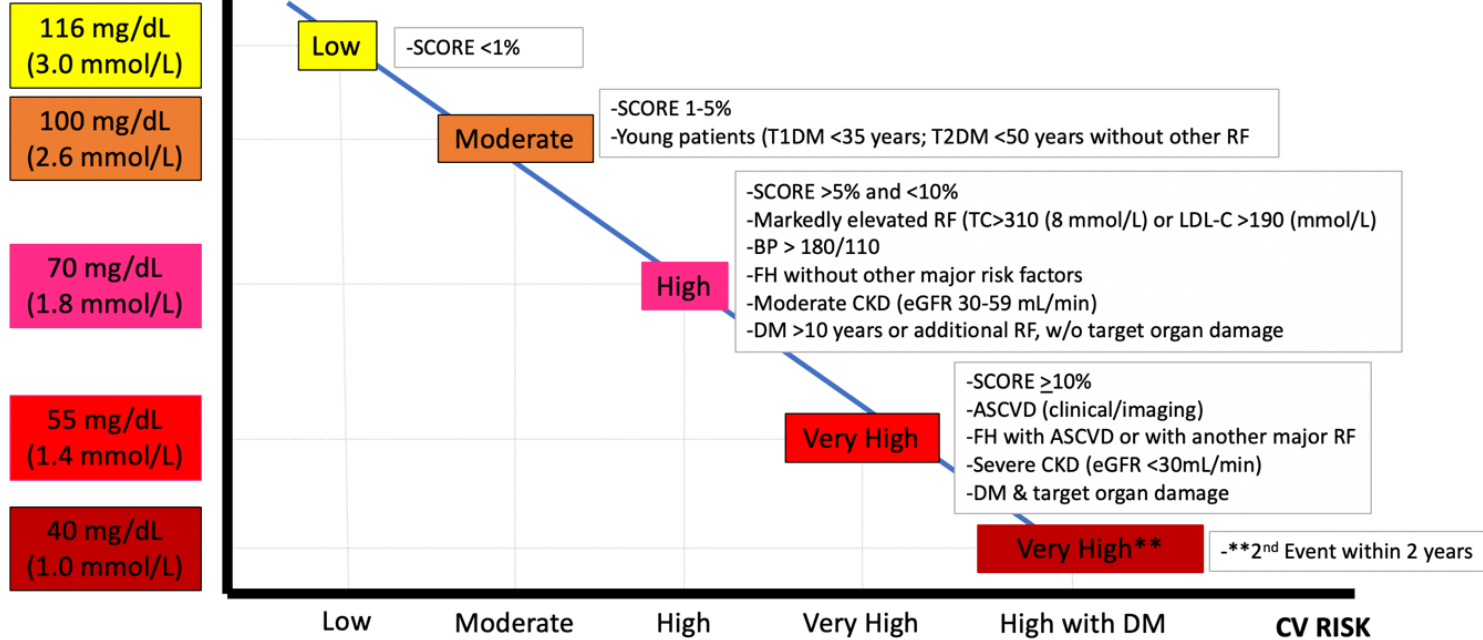
INTERVENȚIE TÂRZIE

Scăderea nivelului LDL-C mai târziu (ateroscleroza deja instalată)

- Stabilizează plăcile de aterom⁽¹⁾

European Treatment goals for LDL-C across categories of total cardiovascular disease risk*

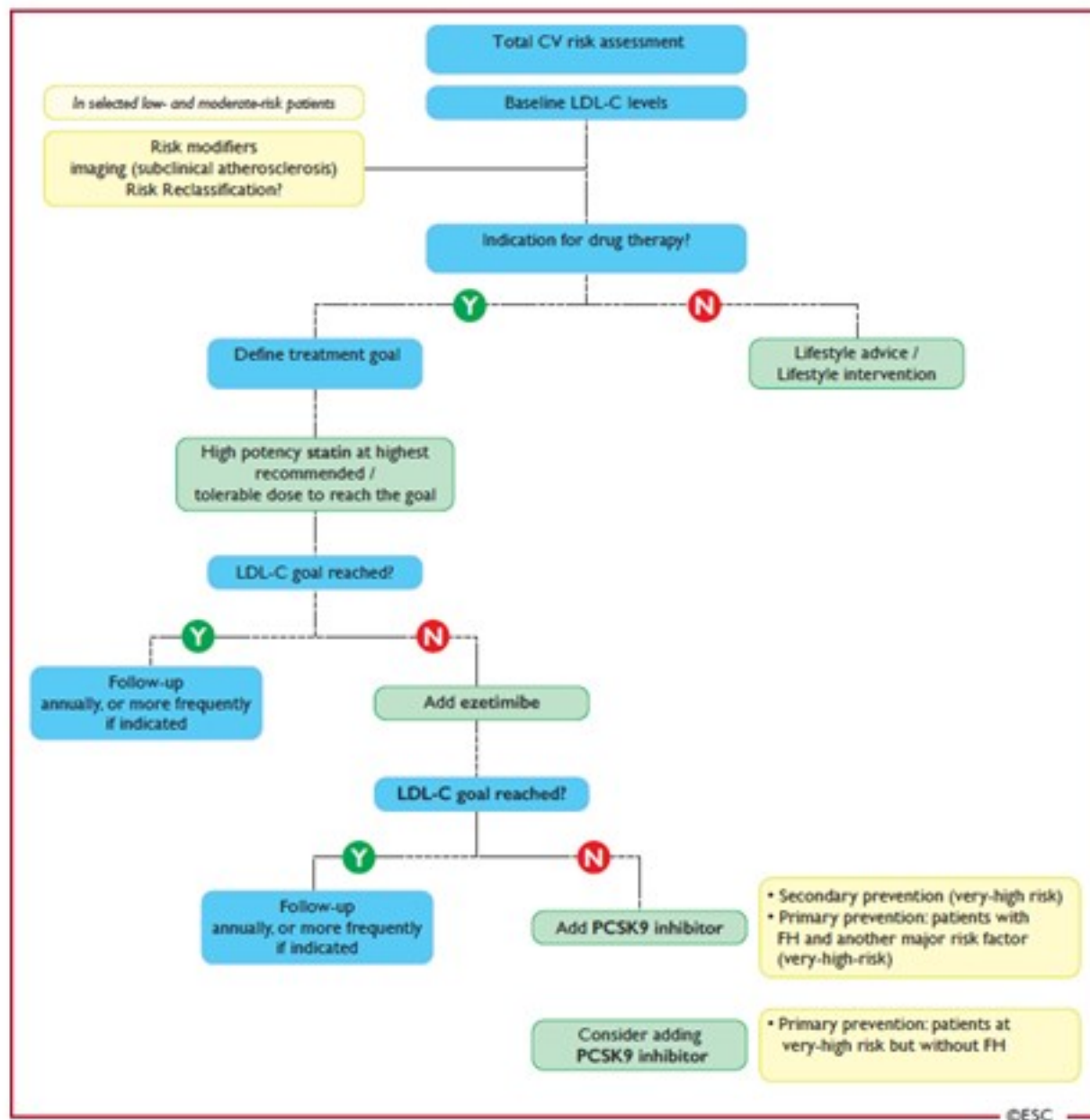
LDL-C goal + $\geq 50\%$ reduction from baseline



*Adapted from slideset available on www.escardio.org/guidelines which is from 2019 ESC/EAS Guidelines for the management of dyslipidaemias: lipid modification to reduce cardiovascular risk

Intervention strategies as a function of total cardiovascular risk and untreated low-density lipoprotein cholesterol levels

Total CV risk (SCORE) %		Untreated LDL-C levels					
		<1.4 mmol/L (55 mg/dL)	1.4 to <1.8 mmol/L (55 to <70 mg/dL)	1.8 to <2.6 mmol/L (70 to <100 mg/dL)	2.6 to <3.0 mmol/L (100 to <116 mg/dL)	3.0 to <4.9 mmol/L (116 to <190 mg/dL)	≥4.9 mmol/L (≥ 190 mg/dL)
Primary Prevention	<1 low-risk	Lifestyle advice	Lifestyle advice	Lifestyle advice	Lifestyle advice	Lifestyle intervention, consider adding drug if uncontrolled	Lifestyle intervention and concomitant drug intervention
	Class ^a /Level ^b	I/C	I/C	I/C	I/C	IIa/A	IIa/A
	≥1 to <5, or moderate risk	Lifestyle advice	Lifestyle advice	Lifestyle advice	Lifestyle intervention, consider adding drug if uncontrolled	Lifestyle intervention, consider adding drug if uncontrolled	Lifestyle intervention and concomitant drug intervention
	Class ^a /Level ^b	I/C	I/C	IIa/A	IIa/A	IIa/A	IIa/A
	≥5 to <10, or high-risk	Lifestyle advice	Lifestyle advice	Lifestyle intervention, consider adding drug if uncontrolled	Lifestyle intervention and concomitant drug intervention	Lifestyle intervention and concomitant drug intervention	Lifestyle intervention and concomitant drug intervention
	Class ^a /Level ^b	IIa/A	IIa/A	IIa/A	I/A	I/A	I/A
≥10, or at very-high risk due to a risk condition	Lifestyle advice	Lifestyle intervention, consider adding drug if uncontrolled	Lifestyle intervention and concomitant drug intervention	Lifestyle intervention and concomitant drug intervention	Lifestyle intervention and concomitant drug intervention	Lifestyle intervention and concomitant drug intervention	
Class ^a /Level ^b	IIa/B	IIa/A	I/A	I/A	I/A	I/A	
Secondary Prevention	Very-high risk	Lifestyle intervention, consider adding drug if uncontrolled	Lifestyle intervention and concomitant drug intervention	Lifestyle intervention and concomitant drug intervention	Lifestyle intervention and concomitant drug intervention	Lifestyle intervention and concomitant drug intervention	Lifestyle intervention and concomitant drug intervention
	Class ^a /Level ^b	IIa/A	I/A	I/A	I/A	I/A	I/A



Central Illustration Lower panel: Treatment algorithm for pharmacological LDL-C lowering

LDL

	Magnitude of the effect
Lifestyle interventions to reduce TC and LDL-C levels	
Avoid dietary trans fats	++
Reduce dietary saturated fats	++
Increase dietary fibre	++
Use functional foods enriched with phytosterols	++
Use red yeast rice nutraceuticals	++
Reduce excessive body weight	++
Reduce dietary cholesterol	+
Increase habitual physical activity	+

Non LDL

Lifestyle interventions to reduce TG-rich lipoprotein levels	
Reduce excessive body weight	+
Reduce alcohol intake	+++
Increase habitual physical activity	++
Reduce total amount of dietary carbohydrates	++
Use supplements of n-3 polyunsaturated fats	++
Reduce intake of mono- and disaccharides	++
Replace saturated fats with mono- or polyunsaturated fats	+
Lifestyle interventions to increase HDL-C levels	
Avoid dietary trans fats	++
Increase habitual physical activity	+++
Reduce excessive body weight	++
Reduce dietary carbohydrates and replace them with unsaturated fats	++
Modest consumption in those who take alcohol may be continued	++
Quit smoking	+

Food choices to lower low-density lipoprotein cholesterol and improve the overall lipoprotein profile (1)

Food choices	To be preferred	To be used with moderation	To be chosen occasionally in limited amounts
Cereals	Whole grains	Refined bread, rice and pasta, biscuits, corn flakes	Pastries, muffins, pies, croissants
Vegetables	Raw and cooked vegetables	Potatoes	Vegetables prepared in butter or cream

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Food choices to lower low-density lipoprotein cholesterol and improve the overall lipoprotein profile (2)

Food choices	To be preferred	To be used with moderation	To be chosen occasionally in limited amounts
Legumes	Lentils, beans, fava beans, peas, chickpeas, soybean		
Fruit	Fresh or frozen fruit	Dried fruit, jelly, jam, canned fruit, sorbets, popsicles, fruit juice	
Sweets and sweeteners	Non-caloric sweeteners	Sucrose, honey, chocolate, candies	Cakes, ice creams, fructose, soft drinks

Food choices to lower low-density lipoprotein cholesterol and improve the overall lipoprotein profile (3)

Food choices	To be preferred	To be used with moderation	To be chosen occasionally in limited amounts
Meat and fish	Lean and oily fish, poultry without skin	Lean cuts of beef, lamb, pork or veal, seafood, shellfish	Sausages, salami, bacon, spare ribs, hot dogs, organ meats
Dairy food and eggs	Skim milk and yogurt	Low-fat milk, low-fat cheese and other milk products, eggs	Regular cheese, cream, whole milk and yogurt

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Food choices to lower low-density lipoprotein cholesterol and improve the overall lipoprotein profile (4)

Food choices	To be preferred	To be used with moderation	To be chosen occasionally in limited amounts
Cooking fat and dressings	Vinegar, mustard, fat-free dressings	Olive oil, non-tropical vegetable oils, soft margarines, salad dressing, mayonnaise, ketchup	Trans fats and hard margarines (better to avoid them), palm and coconut oils, butter, lard, bacon fat
Nuts/seeds		All, unsalted (except coconut)	Coconut
Cooking procedures	Grilling, boiling, steaming	Stir-frying, roasting	Frying

Summary of lifestyle measures and healthy food choices for managing total cardiovascular risk (1)

Dietary recommendations should always take into account local food habits; however, interest in healthy food choices from other cultures should be promoted.

A wide variety of foods should be eaten. Energy intake should be adjusted to prevent overweight and obesity.

Consumption of fruits, vegetables, legumes, nuts, wholegrain cereal foods and fish (especially oily) should be encouraged.

Foods rich in trans fatty acids should be avoided totally; foods rich in saturated fatty acids (SFAs) (tropical oils, fatty or processed meat, sweets, cream, butter, regular cheese) should be replaced with the above foods and with monounsaturated fat (extra virgin olive oil) and polyunsaturated fat (non-tropical vegetable oils) in order to keep SFA intake <10% (<7% in the presence of high plasma cholesterol values).

Summary of lifestyle measures and healthy food choices for managing total cardiovascular risk (2)

Salt intake should be reduced to <5 g/day by avoiding table salt and limiting salt in cooking, and by choosing fresh or frozen unsalted foods; many processed and convenience foods, including bread, are high in salt.

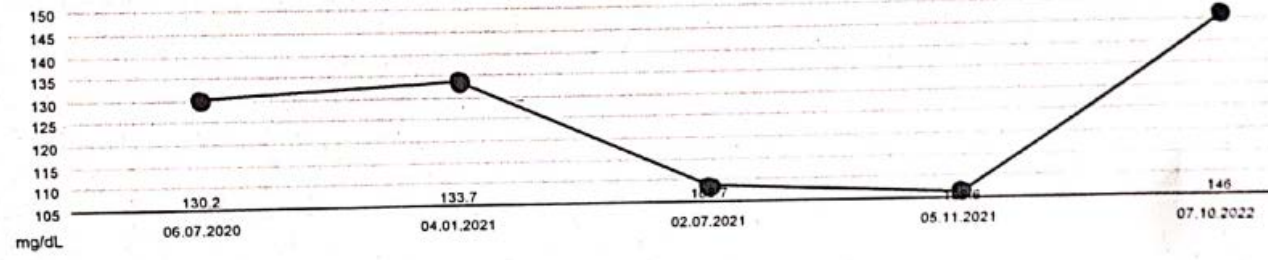
For those who drink alcoholic beverages, moderation should be advised (<10 g/day for women and for men) and patients with hypertriglyceridaemia should abstain.

The intake of beverages and foods with added sugars, particularly soft drinks, should be discouraged, especially for persons who are overweight, have hypertriglyceridaemia, metabolic syndrome or diabetes.

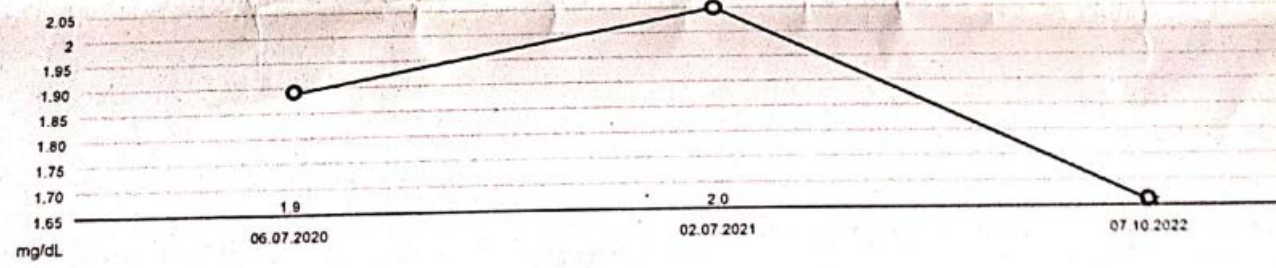
Physical activity should be encouraged, aiming at regular physical exercise for at least 30 min/day every day.

Use of and exposure to tobacco products should be avoided.

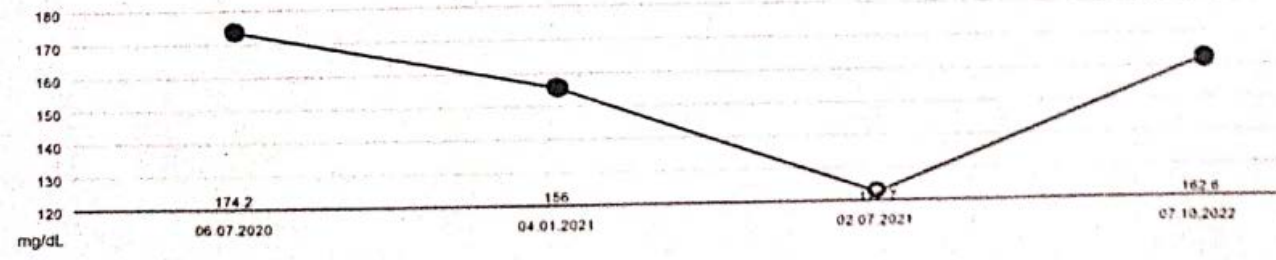
LDL COLESTEROL



MAGNEZIU SERIC



TRIGLICERIDE



Va multumesc!