

2018 AHA/ACC Guideline on the Management of Blood Cholesterol

Sang-Hyun Kim MD, PhD

Department of Internal Medicine, Seoul Boramae Hospital

Seoul National University College of Medicine, Korea

2018 AHA/ACC Guideline on the Management of Blood Cholesterol endorsed by AHA/ACC/AACVPR/AAPA/ABC/ACPM/ADA/AGS/APHA/ASPC/NLA/PCNA was released in AHA scientific conference on Nov 10, 2018 and published in Circulation. It was the constellations of dramatic changes of recommendations to US doctors but not to doctors of other countries including Korea. 2018 AHA/ACC new guideline showed several important changes and persistently preserved principles.

Four groups for statin therapy, low-moderate-high intensity grade of statin treatment, 10 year ASCVD risk with pooled cohort equation and LDL-C centered approach were transferred and preserved in the new 2018 guideline from 2013 AHA/ACC guideline.

Very high risk ASCVD group, diabetes specific risk enhancer, LDL-C target 70 mg/dL, specific statement on non-statin therapy with ezetimibe and subsequent PCSK9 monoclonal antibody for very high risk ASCVD group, low-borderline-intermediate-high risk for primary prevention according to ASCVD risk, statin therapy according to coronary artery calcium score and primary prevention, brief statin on hypertriglyceridemia and specific subgroups (elderly, young age, children-adolescent, ethnicity, women, chronic kidney disease, chronic inflammatory disorders and HIV and cost-effectiveness of PCSK9 inhibitor therapy are new recommendations in 2018 AHA/ACC guideline. And 2018 AHA/ACC guideline presented top 10 take-home messages to reduce risk of ASCVD through cholesterol management.