



- Guidance documents**
- [AAC National Lipid Pathway](#)
  - [Statin Intolerance Pathway](#)
  - Ezetimibe ([NICE TA385](#))
  - Bempedoic acid ([NICE TA694](#))
  - PCSK9 inhibitors ([NICE TA393](#) and [NICE TA394](#))
  - Inclisiran ([NICE TA733](#))
  - Icosapent ethyl ([NICE TA805](#))

**Calculated LDL:** Use either a non-fasting or fasting sample, but fasting sample is recommended if levels are within 0.2mmol/l of treatment cut off levels.

**Direct LDL:** Use a non-fasting sample only, 0.2mmol/l recommendation not applicable

**\*\***

Use **LDL-C > 3.5mmol/L** if the patient is at **very high risk** of cardiovascular disease (Recurrent CV events or CV events in more than 1 vascular bed (polyvascular disease))

Use **LDL-C > 4.0mmol/L** if the patient is at **high risk** of cardiovascular disease (History of any of the following: ACS; coronary or other arterial revascularisation procedures; CHD, ischaemic stroke; PAD)

**\*\*\*** To be reviewed after long-term study outcome data published

Refer patients to lipid clinics if:

- Triglycerides more than 20 mmol/L once or more than 10 mmol/L twice
- Complex cases with multiple morbidities (e.g. liver/ kidney disease)
- Total cholesterol >7.5mmol/l and also if a non-HDL-C comes back at >7.5mmol/l
- LDL-C > 1.04 and ≤ 2.6mmol/L and triglycerides 1.7- 5.63 mmol/L consider icosapent ethyl †. fasting blood test required. Seek advice and guidance from lipid clinic.