



Guidance documents

- [AAC National Lipid Pathway](#)
- [Statin Intolerance Pathway](#)
- Ezetimibe ([NICE TA385](#))
- Bempedoic acid ([NICE TA694](#))
- PCSK9 mABs ([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 >7.5 mmol/l and also if a non-HDL-C comes back at >7.5 mmol/l

LDL-C > 1.04 and ≤ 2.6 mmol/L and triglycerides 1.7- 5.63 mmol/L consider icosapent ethyl* - fasting blood test required. Seek advice and guidance from lipid clinic