

Monthly newsletter-comment (December 2009)

Age-Neutral Guidelines for the Primary Prevention of Cardiovascular Disease.

The November 2009 issue of The Journal of Clinical Hypertension¹ contains an interesting commentary by Kostis and Kostis entitled "Age-Neutral Guidelines for the Primary Prevention of Cardiovascular Disease".

This alludes to a topic I raised in my May 2009 "Comment" in relation to the NZ Cardiovascular Risk Guideline;- that is that (for example) non-smoking women in their 40's have a low 5 or 10 year risk of cardiovascular events (<10%) despite marked elevations of blood pressure or cholesterol.

In the opinion of the authors (and this has always been my view), more benefit will accrue to society if we pay more attention to the treatment of younger individuals by removing age from risk algorithms used to make therapeutic decisions, and by using a lifetime global risk for this purpose. This would result in treating older and younger individuals of both sexes according to the degree of their modifiable risk factors. Lifelong low blood pressure and cholesterol may result in true ("primordial") prevention of atherosclerotic disease rather than therapy focussing on cardiovascular events.

This approach is going to be very difficult to test in clinical trials, but the majority of published trials and epidemiological evidence strongly suggest that benefits of treatment would extend to individuals at lower risk, and with lower LDL levels than current guidelines.

Objections to this approach include cost (although this will be less and less of a problems with cheap generics) and as-yet unidentified harmful effects of very long-term treatment with statins and antihypertensives.

1. J.Clin.Hypertens.2009;11:644-645