

Why am I getting this leaflet?

You are getting this leaflet because you have had a recent cholesterol blood test. As you may know cholesterol is only one **risk factor** for cardiovascular conditions such as heart disease and stroke. Along with other risk factors, we can now calculate the likelihood of you developing cardiovascular disease within the next 10 years. Your **risk score** is shown in on the front of this leaflet.

You will also see on the front of the leaflet what you can do about your risk.

What are the risk factors?

Risk factors are elements in your current health or family history that increase the risk of developing heart disease or stroke. The following is a list of some of those risk factors, and we have ticked those that may apply to you:

- Age (being older)
- Sex (being male)
- Smoking
- High blood pressure
- Diabetes
- Strong family history of heart disease
- Poor diet
- Excessive alcohol (more than weekly limits)
- Lack of exercise
- Being overweight (body mass index more than 30)
- Ethnic origin

Obviously the more risk factors you have, the greater your risk of developing cardiovascular disease.

What does risk mean to me?

Whilst it may be shocking to hear your risk of developing a serious condition in such stark terms as a percentage value, it is important to realise several things about risk:

- **Risk is never zero** in anybody, whether young or old
- **Risk naturally increases** as we get older, regardless of other risk factors
- **Risk is a chance** of something happening – conversely, there will always be a chance of that something **not** happening
- When aiming to reduce risk with lifestyle changes or medication, it is important to know that **risk can never be completely abolished**. Life itself is always risky!

A risk score of less than 10% (low risk) means that there is less than a one in ten chance of something like a stroke or heart attack occurring in the next 10 years.

A risk score of 20% or more (high risk) equates to at least a two in ten chance.

A risk score of 30% (very high risk) is roughly a three in ten chance.

Current evidence and guidance suggests that risk scores of 20% or more are viewed as high risk.

So what can I do about my risk?

Whatever your risk score, it is always sensible to try and lower your risk.

You will not be able to change things like your age, your ethnic background or your family history, but there are **always** steps you can take to lower your risk in other ways, including:

TICK

- Stopping smoking (this is the single most important step in reducing risk)
- Eating more healthily
- Cutting down on fats in the diet
- Taking more exercise
- Reducing salt intake
- Drinking less alcohol
- Losing weight
- Good control of diabetes (blood sugar)
- Good control of high blood pressure

What can **you** do to lower your risk?

Please tick any of the boxes above that may apply to you and your lifestyle.

If your overall risk score is high, we may offer you aspirin as well as a medication called a **statin** to lower your cholesterol levels and also reduce your risk.

What are statins?

These are a group of drugs that help to lower cholesterol levels. They are also effective at reducing levels of other harmful fats in the body and help to reduce the risk of heart attacks and strokes.

Statins need to be taken regularly every day. Although statins are generally safe, unwanted side effects may occur. These include headache, nausea, vomiting, diarrhoea, liver problems and rarely, but more seriously, inflammation of the muscles.

Statins can interact with some other drugs and grapefruit juice and additionally are not suitable for people with liver disease and pregnant or breast feeding women.

Even if it is considered that statins may be helpful for you in terms of reducing cholesterol levels or your overall risk, your medical history, current medication and your own concerns and preferences all need to be taken into account to determine whether or not it will be appropriate that you take statins.

It is important to say that even if statins are prescribed, they should not be used in isolation from other lifestyle changes and activities (mentioned above) that will also help to reduce your overall risk.

Will taking a statin work for me?

Taking a statin *is not a guarantee* against a future heart attack or stroke. In some people it won't work, or make any difference at all.

To give you an idea, consider 100 people with 20% risk. None of these people is taking a statin. After 10 years, 20 of them will have had a heart attack or stroke

(equating to the two in 10 risk). 80 of them won't have had a heart attack or stroke.

Now consider the same 100 people with 20% risk. We now put all of them on a statin for the next 10 years. After 10 years, we find that of the 20 people who would have had a heart attack or stroke, 15 have still had one within those 10 years, so the statin has **made no difference** to them. This means that 5 people would have been prevented from having a heart attack or stroke by taking the statin. The rest of the group, 80 people, wouldn't have had a stroke or heart attack anyway so taking the statin has **made no difference** to them either.

Unfortunately, we cannot tell which group of people you are in, so that is why starting a statin needs careful and individual consideration. If, after reading and thinking about this, you do want to start on a statin, or have questions, please book a routine appointment with the doctor.

Other sources of information

British Heart Foundation Patient UK
020 7935 0185 Information and leaflets
www.bhf.org.uk www.patient.co.uk

NHS Smoking Helpline QUIT
0800 169 0 169 Quitline: 0800 00 22 00
www.gosmokefree.co.uk www.quit.org.uk

Blood Pressure Assoc. British Dietetic Assoc.
020 8772 4994 0121 200 8080
www.bpassoc.org.uk www.bda.uk.com

Diabetes UK Food Standards Agency
Careline: 0845 120 2960 020 7276 8829
www.diabetes.org.uk www.food.gov.uk



Cardiovascular risk

A patient information leaflet

Patient name

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Your risk score

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What you can do about this

- Read this leaflet
- Consider lifestyle changes
- You may / do not need drug treatment
- Book an appointment with the nurse
- Book an appointment with the doctor
- Other

Bring this leaflet with you to any appointment