## Why are you getting this leaflet?

You are getting this leaflet because you are at increased risk of developing conditions such as heart disease and stroke or already have these conditions. Along with cholesterol levels and other risk factors, we can now calculate the likelihood of you developing cardiovascular disease within the next 10 years. Your risk score and what you can do about it are shown in this leaflet.

#### 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:

L	」 Age (being older)
	☐ Sex (being male)
	] Smoking
	High blood pressure
	Diabetes
	☐ Strong family history of heart disease
	Poor diet and excessive alcohol
	Lack of exercise
	Being overweight
	] Ethnic origin

Unfortunately, the more risk factors you have, the greater your risk of developing cardiovascular disease. If you already have cardiovascular disease or diabetes, then you should already be taking cholesterol lowering medication to reduce further risk.

### What does risk mean?

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, but this also means there will always be the opposite chance of something not happening
- Risk can never be completely removed. Life itself is always risky!

A risk score of 10% means that there is a one in ten chance of something like a stroke or heart attack in the next 10 years (or a 9 in 10 chance of not having a stroke or heart attack).

A risk score of 20% equates to a two in ten chance of having a stroke or heart attack.

A risk score of 30% is roughly a three in ten chance of having a stroke or heart attack.

What can you do to lower your risk? Whatever your risk, 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 family history, but there are *always* steps you can take to lower your risk in other ways. These include:

	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 diabetic control
$\overline{\Box}$	Good blood pressure control

Depending on your risk, cholesterol level and existing conditions, we may offer you medication to reduce your risk.

The decision of whether to start medication should consider additional factors such as personal preference, potential benefits from lifestyle changes, other illnesses, existing drugs, general frailty, life expectancy and side effects.

You are receiving this leaflet because we have assessed you at being at higher risk, and whether you decide to take medication or not, we feel you should know about them so that you can make an informed choice.

#### What are statins?

The commonest medications for lowering risk are called **statins**. They are effective at reducing levels of cholesterol and 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 for the rest of your life to be effective.

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 also grapefruit juice and are not suitable for people with liver disease, pregnant or breast-feeding women.

Even if it is considered that statins may be helpful for you in terms of reducing your overall risk, your medical history, current

medication and your own preferences all need to be taken into account to determine whether you should take statins or not.

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

There are other medications besides statins that lower cholesterol that may be offered if you don't want statins.

## Will medication work for you?

Taking cholesterol lowering medication is not a guarantee against a future heart attack or stroke. In fact, for most people, taking such medication will not make any make any difference at all to what happens to you in the future.

To give you an idea, consider <u>100</u> people with 20% risk but none of them is on medication. After 10 years, <u>20</u> people will have had a heart attack or stroke (equating to the two in 10 risk). The rest, <u>80</u> people, won't have had a heart attack or stroke.

Now consider the same <u>100</u> people with 20% risk, but this time we give them medication. After 10 years, we find that of the 20 people who would have had a heart attack or stroke, <u>15</u> have still had a heart attack or stroke, so the medication has made no difference to them. This means that <u>5</u> people would have been saved from having a heart attack or

stroke by taking the medication. The rest of the group, <u>80</u> people, would not have had a stroke or heart attack anyway so taking the medication has made no difference to them either

So, in this example of 20% risk, medication for 10 years helps 5 out of a 100 people and makes no difference to the other 95 people. Unfortunately, we cannot tell which group of people you are in, so that is why starting cholesterol lowering medication needs careful and individual consideration.

If, after reading this leaflet, you want to start medication, or have questions, please book a routine telephone appointment with the doctor. If we don't hear from you, we will take it that you don't want to consider extra medication at this time.

#### Other sources of information

British Heart Foundation 0300 330 3322 Information Leaflets patient.info

Live Life Better Derbyshire QUIT

0800 085 2299 0207 539 1700 livelifebetterderbyshire.org.uk quit.org.uk

Blood Pressure Assoc.

0845 241 0989

bloodpressureuk.org

British Dietetic Assoc.

0121 200 8080

bda.uk.com

Food Standards Agency Diabetes UK 020 7276 8829 020 7424 1000 diabetes.org.uk



Written by Dr M Wong © Sep 2023 v3.1

# Cardiovascular risk Existing conditions

A patient information leaflet

Patient name		
Your risk score		
Risk score not valid as you have existing cardiovascular disease or type 1 diabetes		
What you can do about this		
□ Read this leaflet		
☐ Consider lifestyle changes		
☐ Consider additional medication		
☐ See nurse for health advice		
Speak to Dr if you want medication		
Other		
Please bring this leaflet		

with you to any appointment