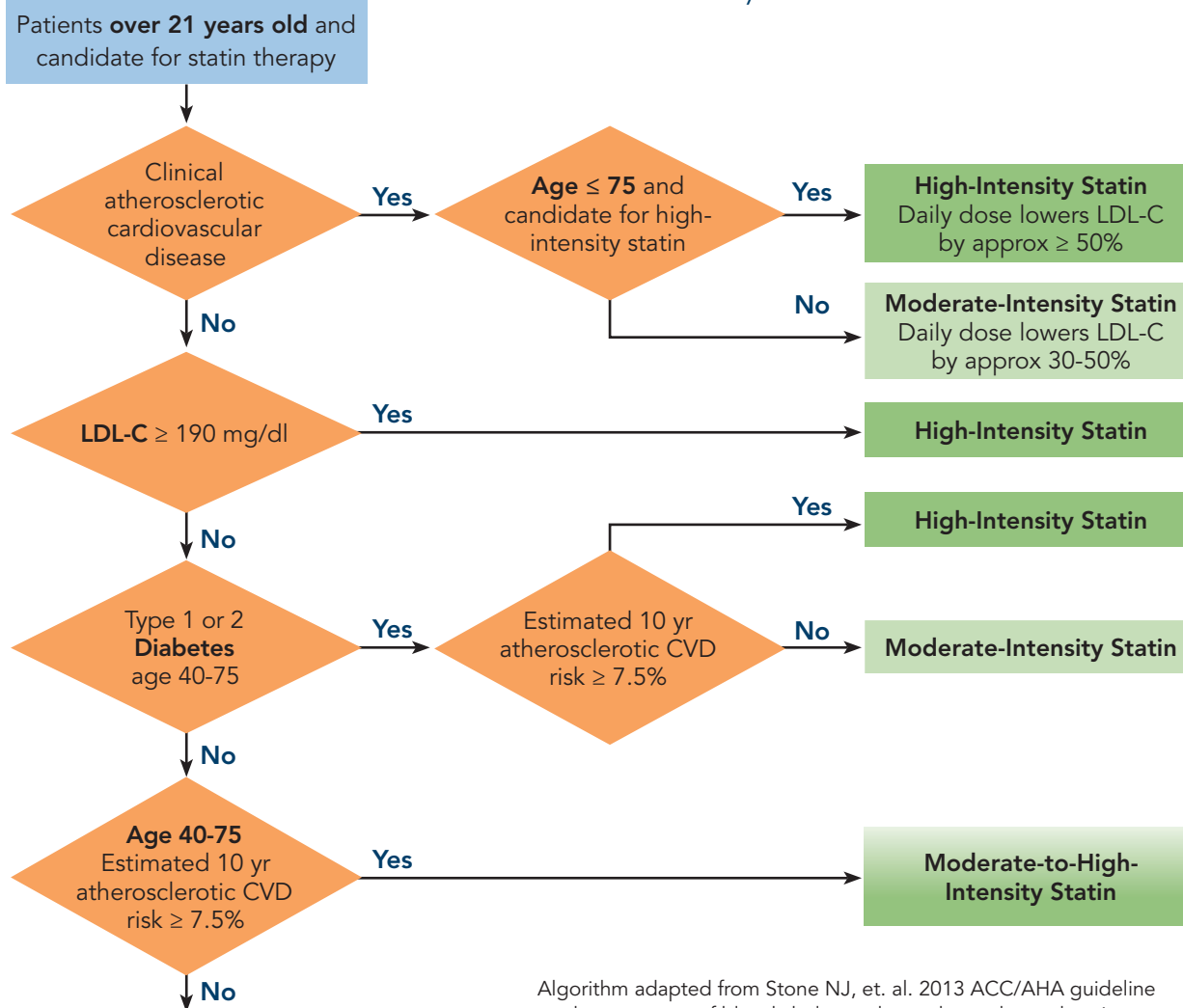


Major Recommendations for Statin Therapy for Atherosclerotic Cardiovascular Disease Prevention

2013 ACC/AHA Blood Cholesterol Guideline



Algorithm adapted from Stone NJ, et. al. 2013 ACC/AHA guideline on the treatment of blood cholesterol to reduce atherosclerotic cardiovascular risk in adults: a report of the American College of Cardiology/American Heart Association Task Force on Practice Guidelines. Circulation 2013; 0000437738.63853.7a

*Calcium scoring considerations are provided by Minneapolis Heart Institute® and are not part of the official ACC/AHA Guidelines.

Guidance for High-Intensity and Moderate Intensity Statin Dosing

High-Intensity Statins

- Atorvastatin **40-80 mg**
- Rosuvastatin **20-40 mg**

Moderate-Intensity Statins

- Atorvastatin **10-20 mg**
- Rosuvastatin **5-10 mg**
- Simvastatin **20-40 mg**
- Pravastatin **40-80 mg**
- Lovastatin **40 mg**
- Fluvastatin XL **80 mg**
- Fluvastatin **40 mg bid**
- Pitivastatin **2-4 mg**

Patients over age 75

For patients with clinical CVD, moderate-to-high intensity statins if tolerated.

For all other indications, consider comorbidities, safety, and priorities of care before initiating or continuing statin therapy.

Calcium Scoring Considerations

For individuals at intermediate risk (5%-7.5%) or those who are unsure about their risk, consider calcium scoring.

A CAC score of zero is associated with a low CVD event rate and those individuals are less likely to benefit from a statin therapy.*

A CAC score ≥ 100 is associated with an elevated risk of a CVD event regardless of traditional risk factors.*

Online CVD Risk Calculator

Go to www.heart.org and search "cv risk calculator" for online web application.

