Figure. Determining Intensity of Statin Therapy for ASCVD Risk Reduction

Does the patient have clinical ASCVD?\(^b\)

- Yes
  - Age 21-75 y → High-intensity therapy\(^c,d\)
  - Age >75 y → Moderate-intensity therapy\(^d\)
- No
  - LDL-cholesterol
    - ≥190 mg/dL (Age ≥21 y) → High-intensity therapy\(^c,d\)
    - 70-189 mg/dL (Age 40-75 y)
      - Does the patient have diabetes?
        - Yes
          - 10-y ASCVD risk ≥7.5\(^e\) → High-intensity therapy\(^d\)
          - 10-y ASCVD risk <7.5\(^e\) → Moderate-intensity therapy\(^d\)
        - No
          - 10-y ASCVD risk 5.0% to <7.5\(^e,f\) → Moderate-intensity therapy\(^d\)

ASCVD, atherosclerotic cardiovascular disease.

\(^a\) If it is unclear whether statin therapy will reduce ASCVD risk, other factors (e.g., family history, lifetime ASCVD risk, high-sensitivity C-reactive protein [hs-CRP] levels, coronary artery calcium [CAC] score, ankle-brachial index) may be considered to inform treatment decision-making.

\(^b\) Clinical ASCVD includes acute coronary syndromes or a history of stroke, transient ischemic attack, myocardial infarction, arterial revascularization, stable or unstable angina, or peripheral arterial disease of atherosclerotic origin.

\(^c\) Moderate-intensity statin therapy should be used if the patient is not a candidate for high-intensity statin therapy.

\(^d\) Consult the treatment guideline\(^2\) for specific statins and doses that correspond to statin therapy intensities.

\(^e\) Use of the Pooled Cohort Equations is recommended when estimating 10-year ASCVD risk. Estimates are based on African American and non-Hispanic white cohorts; an estimate based on the non-Hispanic white cohort should be used for other ethnicities.\(^1\)

\(^f\) This group is not one of the 4 major statin benefit groups, but the treatment guideline states that it is reasonable to offer treatment with a moderate-intensity statin to these patients.\(^2\)

This figure was developed by Quest Diagnostics based on the 2013 ACC/AHA blood cholesterol treatment guideline.\(^2\) It is provided for informational purposes only and is not intended as medical advice. A physician’s test selection and interpretation, diagnosis, and patient management decisions should be based on his/her education, clinical expertise, and assessment of the patient.