

Attainment of LDL-C Goals Is Associated With Measures of Patient Engagement With Their Healthcare Providers

Background

- Lowering low-density lipoprotein cholesterol (LDL-C) levels reduces the risk of cardiovascular disease (CVD) events,^{1,2} but elevated levels remain a public health concern in the US population.
- A previous study showed that LDL-C goals are attained by less than half of working-age individuals with employer-sponsored health plans.³
- Because these individuals were aware of their cardiovascular health, non-attainment may be influenced by other factors (eg, engagement with healthcare resources); understanding such factors could help close gaps in dyslipidemia care.
- **Objective:** In this study, the investigators examined the association between engagement with healthcare resources and the attainment of LDL-C goals.

Methods

- The study population was derived from 35,276 employees and spouses who were enrolled in an employer-sponsored annual health assessment (September 2017-June 2018).
 - Individuals were excluded if they were enrolled <1 year in an employer-sponsored health plan or if they were >75 or <40 years old.
 - The study was limited to employees/spouses who would benefit from LDL-C management: those with cardiovascular disease, hypercholesterolemia, diabetes, or elevated 10-year CVD risk.³
- Investigators assessed the association between LDL-C goal attainment and measures of engagement with healthcare resources (self-reported); they also assessed the association with education level and socioeconomic status.
 - Models were adjusted for age, sex, and ethnicity, if appropriate.

Results

- Among the final study population of 7,363 employees and spouses, those who had a personal physician were more likely to attain their LDL-C goals than those who did not have one (odds ratio [OR], 2.25; 95% CI, 1.70-2.99; $P<0.0001$).
- Attaining LDL-C goals was also associated with the following healthcare resource engagement measurements (all $P<0.0001$):
 - Confidence in talking with a physician (OR, 1.20; 95% CI, 1.12-1.29)
 - Confidence in selecting a physician (OR, 1.19; 95% CI, 1.11-1.27)
 - Confidence in understanding health plan benefits (OR, 1.11; 95% CI, 1.05-1.17)
 - Taking a greater number of medications (OR, 1.40; 95% CI, 1.36-1.45)
 - Having a more recent physical exam (OR, 1.25; 95% CI, 1.16-1.34)
- Attaining LDL-C goals was not associated with education level or socioeconomic status.

Conclusions

- Engagement with healthcare resources and confidence in interactions with healthcare providers was associated with attaining LDL-C goals.
- These findings may help close gaps in dyslipidemia care. For example, helping patients to increase their confidence in interactions with healthcare providers may improve LDL-C goal attainment.

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