

Gaps in Dyslipidemia Care Among Working-age Individuals with Employer-sponsored Healthcare

Background

- The risk of cardiovascular disease (CVD) events is reduced by lowering low-density lipoprotein cholesterol (LDL-C) levels,^{1,2} but elevated levels are still a population health issue.
- Gaps in dyslipidemia care have been reported by multiple studies, but these studies have limitations. Some focus on specific populations (eg, patients already under care), while others do not factor in the effect of medical insurance availability.
- Thus, the gaps identified by previous studies may not reflect a large population of working-age individuals who have group healthcare coverage and are largely aware of their cardiovascular health.
- **Objective:** In this cross-sectional study, the investigators assessed gaps in dyslipidemia care for individuals who were enrolled in an employer-sponsored health assessment program and had healthcare benefits.

Methods

- The study population was drawn from 35,276 employees and spouses who participated in an employer-sponsored annual health assessment.
 - Individuals were excluded if they did not participate in the employer-sponsored health plans for the previous 12 months, were >75 or <40 years old, or had missing data, leaving 17,889 participants for analysis.
- The study focused on participants determined to be in 1 of 4 guideline-based cholesterol management groups² based on data from medical claims, laboratory tests, and risk assessment questionnaires. The groups included 1) secondary prevention (those who have CVD), 2) severe hypercholesterolemia, 3) diabetes, or 4) elevated 10-year CVD risk.
- A gap in care was defined as failure to meet recommended LDL-C levels: ≤70 mg/dL for participants in secondary prevention or whose 10-year risk was >20%; ≤100 mg/dL for all others.
- Participant LDL-C levels were obtained from annual health assessments, and evidence of treatment with lipid-lowering therapy was assessed by pharmacy claims in the previous 6 months or by self-reporting.

Results

- Of the 17,889 study participants, 43% (n=7,628) were determined to be in 1 of the 4 patient management groups.
- About 74% of the participants in a management group had LDL-C levels above the target goal.
 - The proportion was particularly high in the secondary prevention group (84%) and the severe hypercholesterolemia group (93%).
- Only 31% of the participants in a management group had been treated with lipid-lowering therapy in the past 6 months.

Conclusions

- A large proportion (74%) of participants assigned to cholesterol management groups had LDL-C levels above target goal, but only a small proportion (31%) had recently received lipid-lowering therapy.
- These findings show that there is a sizeable gap in dyslipidemia care among working-age individuals with employer-sponsored healthcare in the United States.

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Webpage

<https://www.ncbi.nlm.nih.gov/pubmed/32319337>

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