Centralised Pan-Algerian Survey on the undertreatment of hypercholesterolemia--The CEPHEUS study.

Auteurs :

Abstract

BACKGROUND:

Most Epidemiological surveys have shown that elevated total serum cholesterol and LDL-C levels are strongly correlated with CHD risk. Most guidelines identify LDL-C as the primary target of cholesterol-lowering therapy and recommend low LDL–C goals based on the patient's individual risk. For both primary and secondary prevention of CVD, Statins are currently the most widely prescribed lipid-modifying agents. The aim of this study was to determine the proportion of patients on lipid-lowering pharmacological treatment reaching the LDL-C goals according to the 2004 NCEP ATP III guidelines.

METHODS:

The Algerian CEPHEUS study was conducted in 8 cities, in patients who had been in lipidlowering therapy for at least 3 months with no dose change for a minimum of 6 weeks. 1236 adult patients were recruited by 46 specialists (cardiologists and internists) in 34 sites. 1168 were available for analysis. Information about the percentage of patients on lipid-lowering pharmacological treatment reaching the LDL-C goals according to the 2004 NCEP ATP III guidelines were collected following the patient's individual risk.

RESULTS:

Among evaluated patients with no missing data (n=1168), 58,8% (n=687) were male and 41,2% (n=481) were female. 56,3% (n=657) of patients have reached the LDL-C goal recommended by the 2004 NCEP ATP III guideline (52,8% male and 61,1% female). Among patients reaching the LDL-C goal, the percentage was higher in the \leq 40 years old category. Only 44,5% of CHD patients, 45,9% of PAD patients and 50,7% of cerebrovascular disease patients achieved the target based on this guideline. 67,3% of primary prevention and 46,5% of secondary prevention have reached the target. 60% were treated with combination therapy, 56,8% with statins and 34,3% with fibrates. The least category in reaching the LDL-C goal was the very high risk one.

CONCLUSION:

The results of this survey highlight the suboptimal management of hypercholesterolemia in Algeria, principally in the high-risk population, in whom the percentage of patients achieving the LDL-C goals was the lowest.