

Newsletter Comment (June 2011)

The NZ Cardiovascular Risk Guideline (again)

I recently gave a lecture entitled "Treating Mild-Moderate Hypertension is Worthwhile" at a cardiology update symposium in Wellington sponsored by MSD (Cardiovascular Update Forum 2011, Copthorne Hotel, Wellington 13-14 May 2011). This was part of a quasi-debate with Professor Stewart Mann presenting the counter argument. A copy of my presentation is available under "Powerpoint Presentations and Teaching Materials".

In my presentation I again made the point that the NZ Cardiovascular Risk Guideline¹ discriminates against younger people and women. I used the example of the 50 year old (not overweight, non-diabetic, non-smoking) European woman with a blood pressure persistently averaging 160/95 and with a total cholesterol of 6.1mmol/l and an HDL cholesterol of 1.2mmol/l. According to the NZ risk calculator she has a 5 year risk of a cardiovascular event of 5-10%. As such (according to the guideline) she does not warrant either antihypertensive or statin therapy because her risk is under the threshold 15%.

What the guideline does not tell you though is that her lifetime risk of cardiovascular disease is 50%, compared with only 8% for a woman of similar age with optimal blood pressure and lipid parameter². To me therefore, not treating this woman's blood pressure and lipids pharmacologically, makes no sense. After all, in 2011, 50 year olds expect to remain healthy in to their 80's or 90's and exposing them to a 10% risk of a heart attack or a stroke within 5 years, which is preventable, is certainly not acceptable to most of the 50 year old patients that I see.

I therefore direct you to my (revised) Waitemata Hypertension Clinic Risk Factor Management Guideline in this month's GP Tip³.

1. www.nzgg.org.nz/guidelines/0154/090202_CVD_web_pdf_Final_pdf

2. Marma et al. *Circ Cardiovasc Qual Outcomes* 2010;3(1):8-14

3. Tip 17 (June 2011). Waitemata Hypertension Clinic Risk Factor Management Guideline