

## CAD RISK FACTORS & RECOMMENDED INTERVENTIONS

The following are common risk factors for CAD-related complications. These factors are addressed with the member through a comprehensive telephonic assessment and reinforced in our written educational materials. Also included are recommended interventions based on current national standards. The care management nurse reviews and emphasizes the provider's recommendations for cardiac treatment and utilizes the member's assessment responses to suggest additional topics of discussion with the provider, if clarification may be needed.

### The following are common risk factors associated with Coronary Artery Disease-related complications:

- Myocardial infarction within the past 12 months
- Diabetes and a previous myocardial infarction
- Acute Coronary Syndrome/Unstable angina
- History of CVA within the past 12 months
- History of vascular disease (s/p angioplasty, stent procedure, CABG; peripheral vascular disease)
- Uncontrolled hypertension
- Diabetes and hyperlipidemia
- Diabetes and hypertension
- Diabetes and smoking
- Hypercholesterolemia; hyperlipidemia
- Physical inactivity
- Current smoker
- BMI < 18.5 or  $\geq 25$  kg/m<sup>2</sup>
- BMI  $\geq 25$  kg/m<sup>2</sup> and waist circumference  $\geq 35$ " in women or  $\geq 40$ " in men
- CAD and diagnosed depression
- Self reported non-adherence or poor adherence to medications.

### RECOMMENDED INTERVENTIONS\*

- **The recommended intervention is:** ASA therapy for anyone with CAD unless contraindicated; add antiplatelet to ASA for 12 months after ACS or PCI with stent.
- **The recommended intervention is:** Blood pressure control to achieve and maintain a BP < 140/90 mm Hg or < 130/80 mm Hg if patient has diabetes or CKD. Lifestyle changes and, if needed, ACEI or beta-blockers initially; add diuretics or other antihypertensives to reach goal.
- **The recommended intervention is:** Cholesterol-lowering therapy to reach a target LDL < 100mg/dL; consider target of < 70 for patients with established CAD or multiple CVD risk factors. Initiate lipid-lowering medication therapy if acute coronary event and baseline LDL is  $\geq 100$  mg/dL.
- **The recommended intervention is:** An ACE-inhibitor for LVEF < or = 40% or those with hypertension, CKD or diabetes with proteinuria, unless contraindicated.

- **The recommended intervention is:** An ARB if patient is intolerant of an ACEI and has HF, or is post-MI with an EF  $\leq$  40%.
- **The recommended intervention is:** Beta-blocker for history of MI, acute coronary syndrome or LV dysfunction with or without HF symptoms, unless contraindicated.
- **The recommended intervention is:** Weight management to achieve and maintain a BMI between 18.5 and 24.9 kg/m<sup>2</sup> and a waist circumference  $<$  40" in men,  $<$  35" in women.
- **The recommended intervention is:** Diabetes management – lifestyle and pharmacotherapy to achieve and maintain an A1C  $<$  7%.
- **The recommended intervention is:** Smoking cessation - medication and/or behavior modification program; ask about tobacco use status and encourage quitting at every visit.

*\*Adapted from the AHA-ACC Guidelines for Secondary Prevention for Patients with Coronary and other Atherosclerotic Vascular Disease: 2006 Update.*

01/11