

SAND abstract No. 99 from the BEACH program 2006–07

Subject: Lipid management in patients with high risk conditions

Organisation supporting this study: AstraZeneca Pty Ltd and Merck, Sharp & Dohme (Australia) Pty Ltd

Issues: Prevalence of selected risk factors among patients attending general practice; current lipid levels; whether target levels had been met; lipid-lowering management; proportion who had cholesterol test in conjunction with current encounter; proportion managed by a specialist for dyslipidaemia, type of specialist; future management plan.

Sample: 5,372 encounters with 183 GPs; data collection period: 06/06/2006 – 14/08/2006.

Method: Detailed in the paper entitled 'SAND Method 2006–07' on this website: <www.fmrc.org.au/publications/SAND_abstracts.htm>. In this study risk factors include: coronary heart disease (CHD), diabetes, hypertension, familial hypercholesterolaemia, elevated cholesterol, family history of CHD and peripheral vascular disease.

Summary of results

The age and sex distributions of respondents were similar to the distributions for all BEACH (general practice) encounters, with the majority (58.7%) of patients being female.

From the 5,372 patient encounters, 2,270 (42.3%, 95% CI: 39.8–44.7) patients had at least one risk factor, and age-specific rates increased with age to 77.7% (95% CI: 74.2–81.2) among patients 75+ years. The most common risk factor was hypertension (24.5%), followed by elevated cholesterol (17.8%). One-fifth of patients (21.3%) indicated they had only one of the listed risk factors and 21.0% had two or more.

Total cholesterol (TC) level was provided for 1,786 patients, and the average TC level was 5.1 mmol/L. Female patients had a significantly higher average level (5.3, 95% CI: 5.2–5.4) than males (4.9, 95% CI: 4.8–5.0). GPs felt 56% of 1,584 respondents had reached target TC levels. The average high density lipoprotein (HDL) level was 1.5 mmol/L (from 1,461 respondents). GPs indicated that 83.1% (of 1,277 respondents) had reached target HDL level. The average low density lipoprotein (LDL) level was 2.9 mmol/L (from 1,402 respondents). GPs indicated that 60.4% (of 1,224 respondents) had reached target level. The average triglyceride (TG) level was 1.7 mmol/L (from 1,692 respondents). GPs indicated that 73.6% (of 1,277 respondents) had reached target TG level.

Of 2,057 patients for whom information on current lipid medication was available, 882 (42.9%) were currently taking 903 lipid medications. Atorvastatin accounted for 46.2%, simvastatin 35.1% and pravastatin 11.1% of these. Of 1,562 respondents, 56.2% indicated diet and/or advice was a current lipid management strategy, for 44.6% (n=697) this was a previous strategy and for 17.5% (n=274) this strategy had not been used.

Of the 2,119 respondents to the question on cholesterol monitoring, 31% were tested in conjunction with the current consultation.

Specialists managed 11% of 2,061 patients with dyslipidaemia. The most common type of specialist was a cardiologist (63.5% of 181 patients for whom type of specialist was recorded). Of the 2,106 respondents changes to medication were planned for 16.6%: 2.9% to increase the dose of the same medication; 1.9% to add a new medication.

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