

Treating High Risk Cardiovascular Patients Intensively

Adrian J.B. Brady

Consultant Cardiologist
Department of Medical Cardiology
Glasgow Royal Infirmary
GLASGOW, UK



The phrase, “patients with diabetes have a risk equivalence of coronary heart disease patients,” is often quoted but poorly adhered to. Many of us here today will believe in multiple risk factor intervention, yet within my own geographical region there are examples of both good and poor implementation.

The reality of diabetes is that most patients will die of heart disease, and it is imperative that all risk factors are treated intensively not just blood sugar. Thus there is the Holy Trinity of diabetes: blood pressure, blood glucose and blood cholesterol. UK PDS and other databases suggest that a considerable portion of the benefit in treating diabetes relates to the treatment of blood pressure and blood cholesterol. Accordingly, we must address proportionate time to these readily modifiable and fundamental risk factors. There are well defined guidelines for blood pressure, and methods of achieving target levels with appropriate combination therapy will be discussed. The benefits of the British Hypertension Society ACD guideline will be outlined and expanded upon. The overriding imperative is that aggressive blood pressure control will save lives, heart attacks and strokes.

Aggressive treatment of cholesterol is equally critical, statin therapy is fundamental, aggressive statin therapy is often indicated, and aggressive combination lipid lowering therapy is frequently needed to achieve the levels indicated by European and World Guidelines. Modern combinations of statins, Ezetimibe, fish oils and Niacin will be discussed with particular relevance to patients with diabetes. The indications regarding angiotensin receptor blocker or ACE inhibitor therapy will be addressed. Finally, the question of anti-platelet therapy for patients with diabetes will also be examined.

The Holy Trinity of Diabetes: blood pressure, blood cholesterol and blood glucose together with renal protection and anti-platelet therapy, are the 5 corner stones for modern management of the individual with diabetes and high cardiovascular risk. Assiduous and painstaking approaches must be taken and must be persevered with.