

Is this patient at high risk for a vascular event?

Step 1: Is the patient...

Male \geq 45 years
Female \geq 50 years

IF NO

IF YES

Step 2: Has the patient had...

Diabetes > 15 years AND is age > 30

IF NO

IF YES

Step 3: Any of the following?

Macrovascular disease? (\geq 1)

Cardiac ischemia (silent or overt)
Peripheral arterial disease
Carotid disease
Cerebrovascular disease

OR

Microvascular disease? (\geq 1)

Retinopathy
Nephropathy
(ACR \geq 2.0 in men
or \geq 2.8 in women)

Neuropathy

OR

Multiple risk factors? (\geq 2)

Family history of premature
CHD or stroke
Smoking
Hypertension (treated or untreated)
Dyslipidemia (treated or untreated)

OR

Extreme single risk factor?

Example:
systolic BP > 180 mmHg
LDL > 5.0 mmol/L

IF YES

IF YES

IF YES

IF YES

HIGH RISK

Please turn over →

Recommendations for vascular protection

For all patients with diabetes:

- A1c \leq 7%
- BP < 130/80 mmHg
- Smoking cessation
- Physical activity (goal of \geq 150 minutes of aerobic exercise per week)
- Healthy body weight
- Healthy diet

For high risk patients, include:

- ACE-inhibitor or ARB
- Statin*
- Anti-platelet agent**

Screening for coronary artery disease (CAD)

Any one of:

<ul style="list-style-type: none">• Age > 40• DM > 15 years• Hypertension (regardless of age)• Nephropathy (ACR \geq 2.0 in men, ACR \geq 2.8 in women)• Reduced pulses• Vascular bruits	Resting ECG <ul style="list-style-type: none">• At diagnosis (baseline)• Every 2 years (if high risk)
<ul style="list-style-type: none">• Symptoms possibly due to CAD (including unexplained dyspnea)• Abnormal resting ECG (Q-waves, ST-T abnormalities)• Any vascular disease (Peripheral arterial disease, Carotid bruit, TIA, Stroke)	Stress test <ul style="list-style-type: none">• Exercise ECG or• Nuclear imaging or• Pharmacologic stress echocardiography
<ul style="list-style-type: none">• Ischemia at low exercise capacity on stress testing (< 5 METS)	Refer to Cardiac specialist

* Statin indicated for all high risk patients. Dose change or additional lipid therapy warranted if lipid targets (LDL \leq 2.0 mmol/L AND total cholesterol / HDL ratio < 4) not being met.

** Anti-platelet agent should be considered for secondary prevention. For primary prevention of cardiovascular events (with no other indication for its use), individual clinical judgment is required.

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