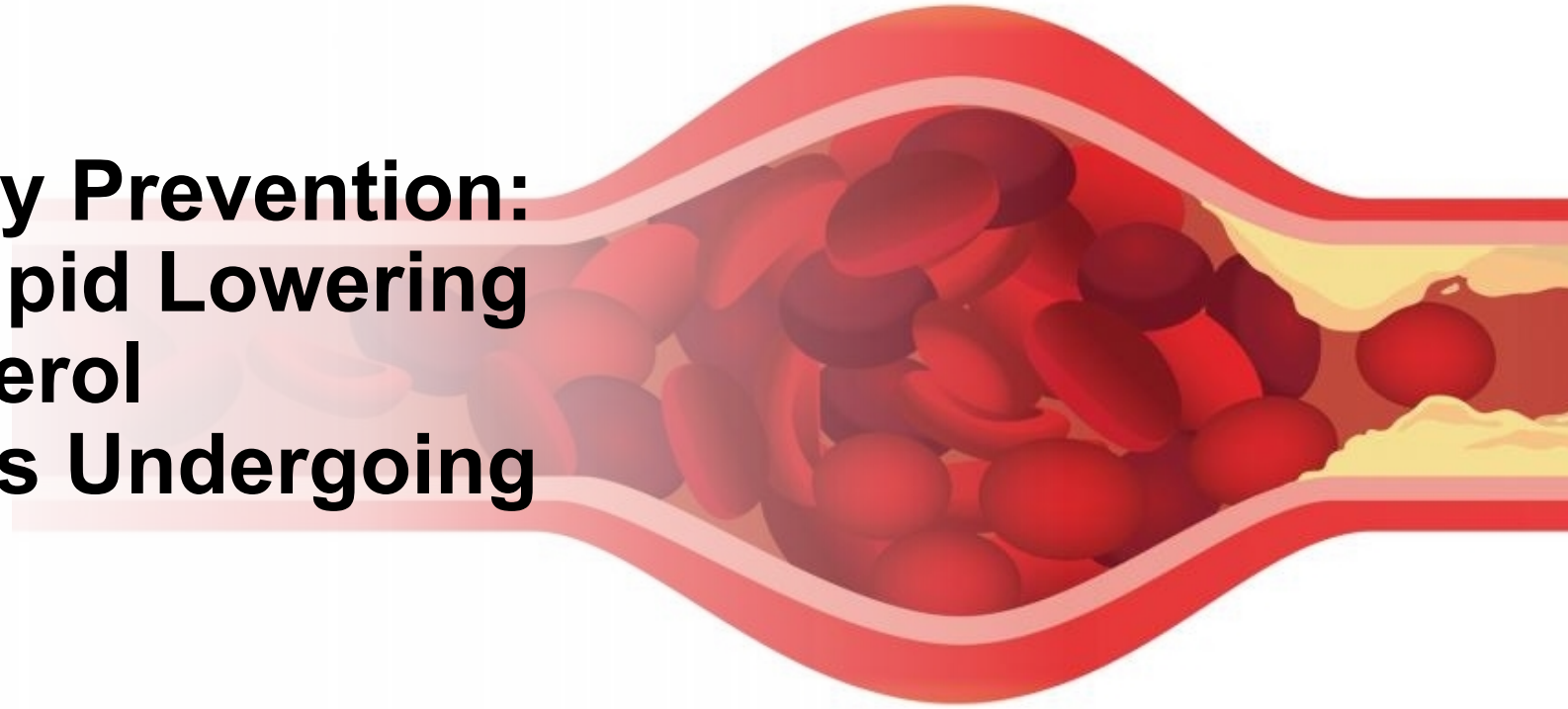


# Optimizing Secondary Prevention: A 1-Year Review of Lipid Lowering Therapy and Cholesterol Monitoring in Patients Undergoing Carotid Surgery



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## Stroke

1.1 million + 440 000 deaths yearly <sup>1</sup>  
Ischaemic stroke – 80% of cases



## Lipid Lowering Therapy

10 year stroke/death post CEA<sup>2</sup>  
17.9% → 7.6%

**(i) Prior to admission for surgery**

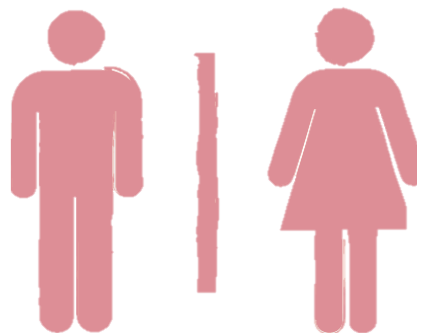
**(ii) On discharge post CEA/CAS**

**(iii) 1 year post discharge**

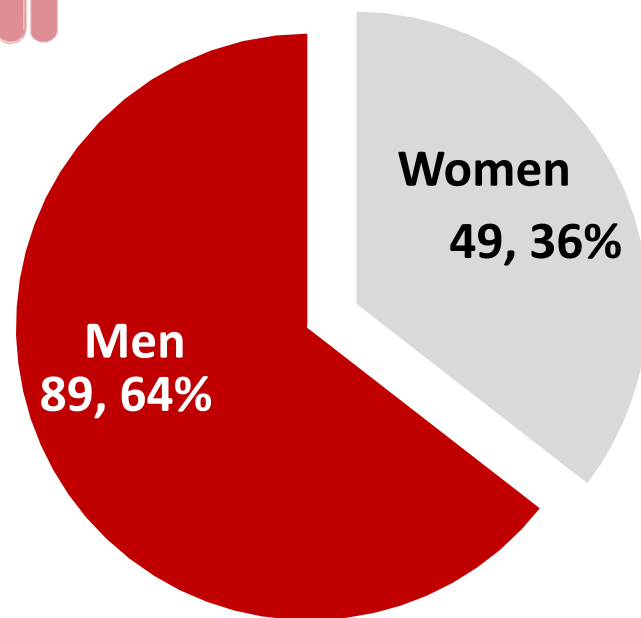
**Operation date:**  
01/01/2019 - 31/12/2020

**Information collected:**  
Lipid lowering therapy prescriptions  
+ Blood lipid profiles

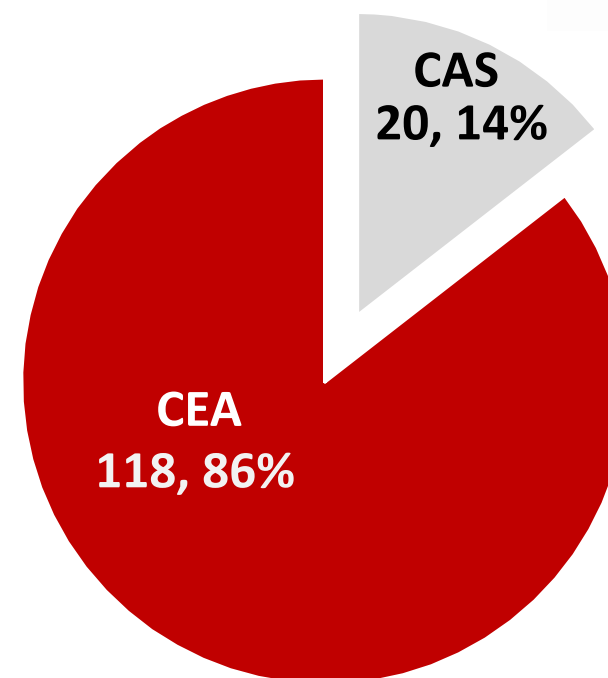
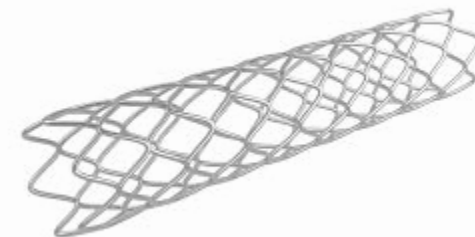
# Demographics



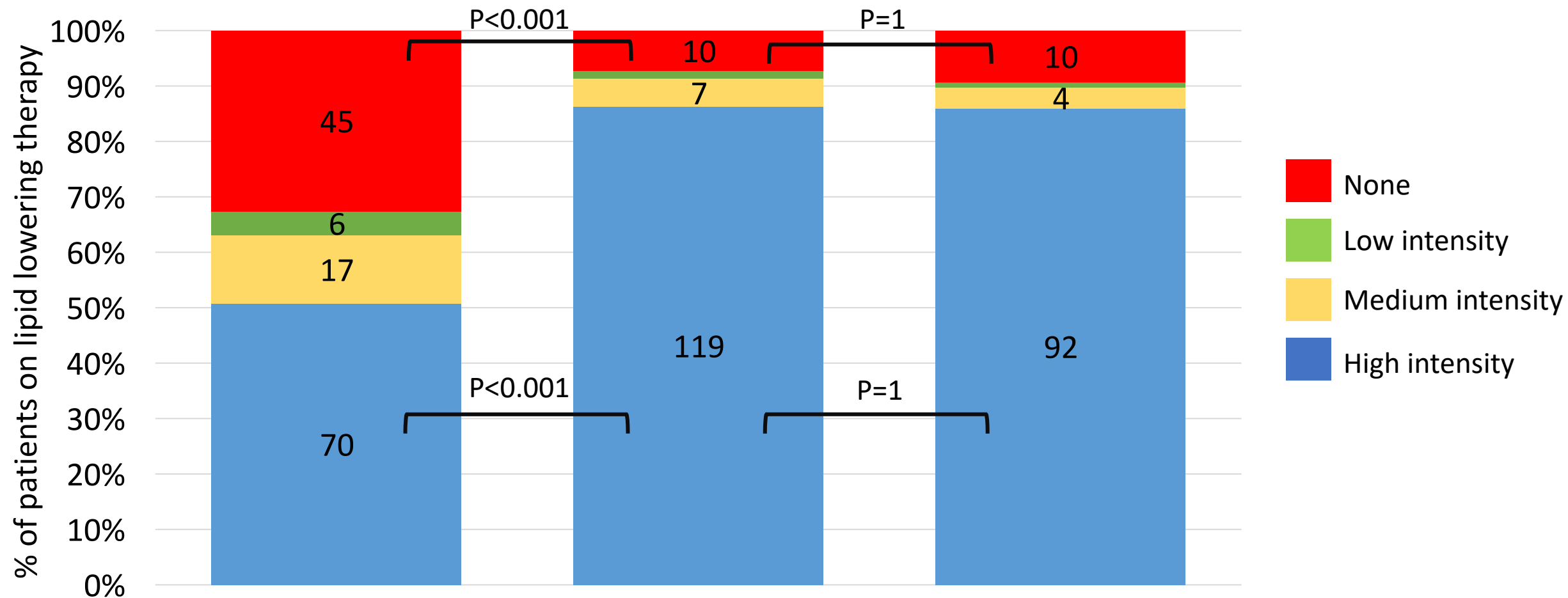
## Sex



## Operation



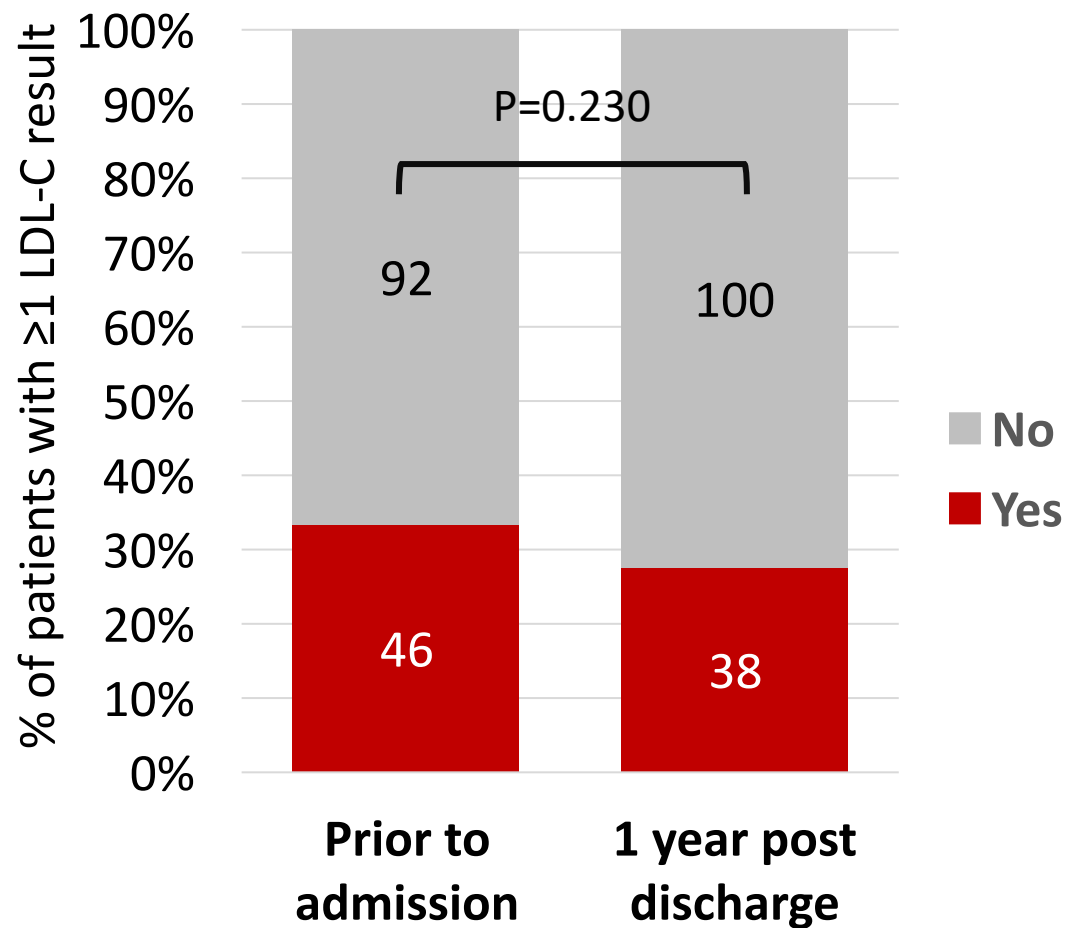
# Lipid Lowering Therapy



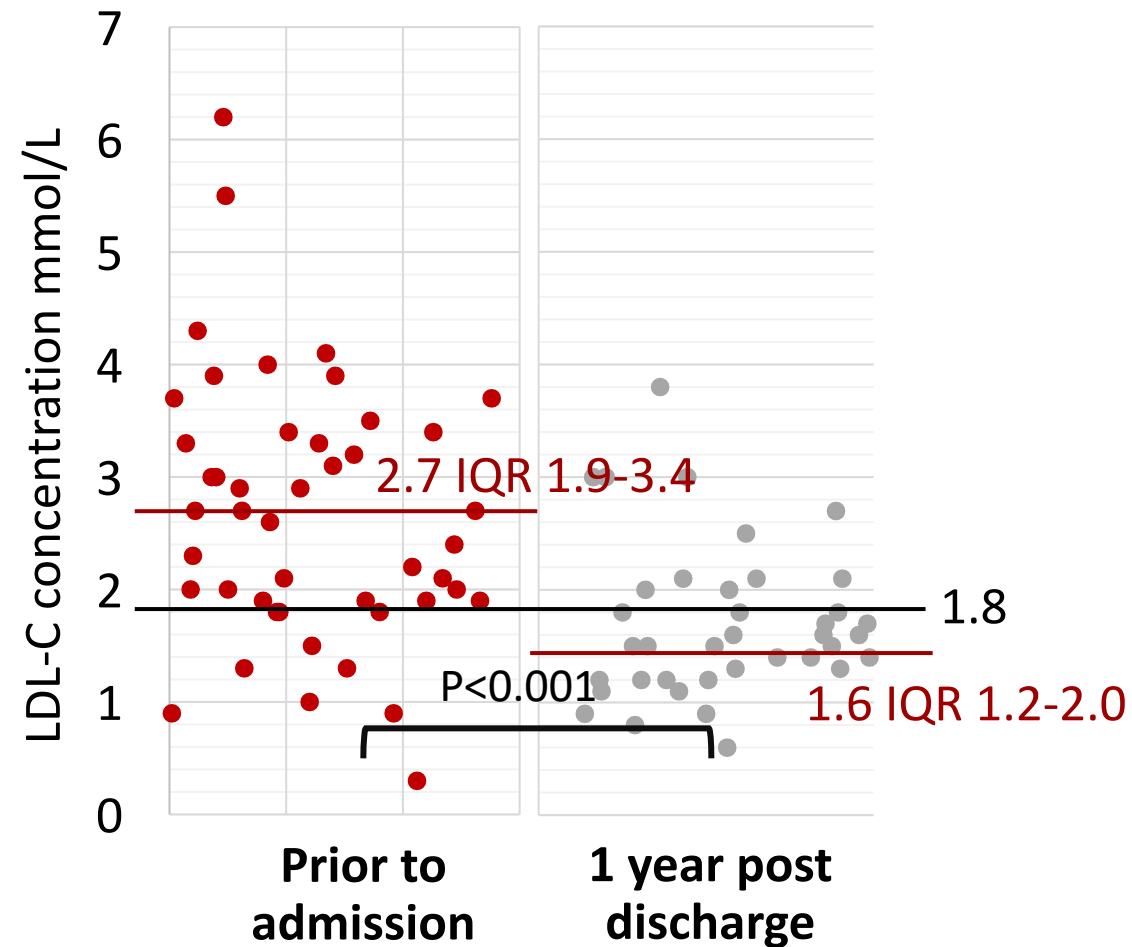
(i) Prior to admission for surgery (ii) On discharge post CEA/CAS (iii) 1 year post discharge

# Lipid Profile

## LDL-C Monitoring



## LDL-C levels



## Adherence

82% were adherent (MPR>80%)  
Median MPR 97%, IQR (88-100)

Prescription of statin therapy

Prescription of HIS

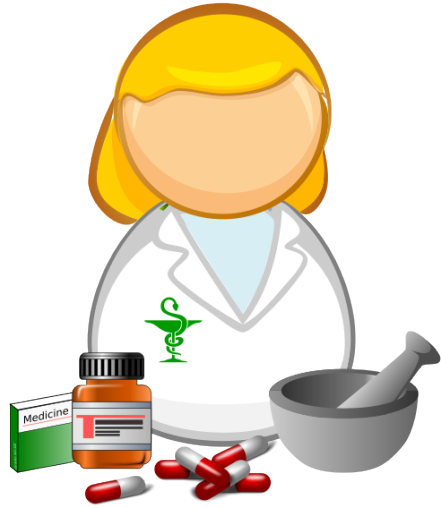
Prescription of MIS

P=0.074

P=0.437

P=0.114

Achievement of LDL-C <1.8mmol/L



## Cardiovascular pharmacists

- ↑ guideline directed usage of LLT
- ↓ LDL-C concentration



## Areas of improvement

- Community based monitoring
- Up-titration to MIS +/- Ezetimibe



**THANK YOU**

