

# Use of Lipoprotein(a) in Clinical Practice: A Biomarker Whose Time Has Come.

A Scientific Statement from the National Lipid Association.

## SCREENING

### PRIMARY PREVENTION

Adults and Youth with:

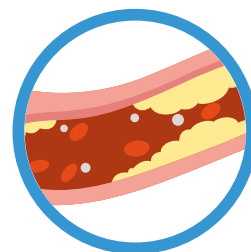
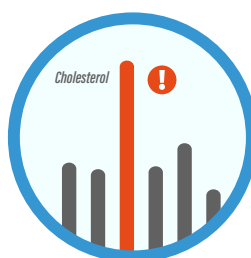
- First-degree relatives with premature ASCVD or elevated Lp(a)
- A personal history of premature ASCVD and/or ischemic stroke
- Primary severe hypercholesterolemia or suspected familial hypercholesterolemia



### SECONDARY PREVENTION

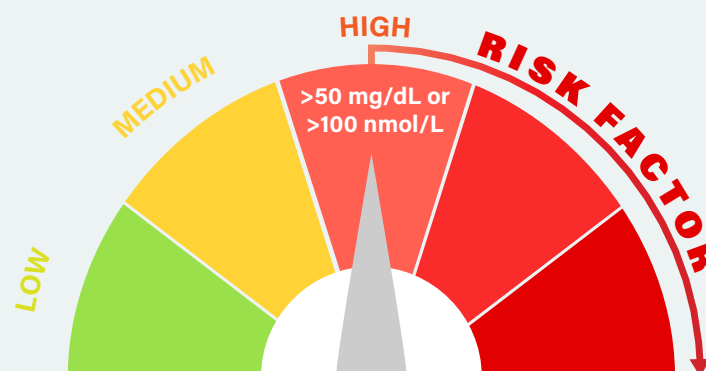
Adults with:

- Premature ASCVD
- Recurrent or progressive ASCVD, despite optimal lipid-lowering
- Calcific valvular aortic stenosis
- Less-than-expected LDL-C lowering on statin therapy



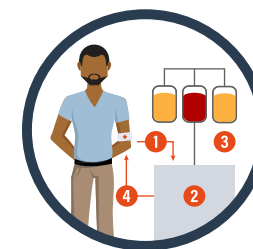
## ASCVD RISK GAUGE

*Lp(a) TEST*



## TREATMENT

Along with optimal lifestyle and statin therapy, PCSK9 inhibitors and LDL apheresis may be helpful for selected at risk patients to lower Lp(a) and ASCVD and/or calcific aortic valvular risk.



### LDL APHERESIS

### PCSK9 INHIBITOR



### NOT RECOMMENDED FOR Lp(a) - LOWERING

- Niacin
- Lomitapide
- Hormone replacement therapy (women)