

Million Hearts QI Initiative Cholesterol: What we need to know to help our patients

Million Hearts Grantee Technical Assistance
Recorded Webinar

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HEALTH
MANAGEMENT
ASSOCIATES



Jean Glossa, MD, MBA, FACP
Managing Director, Delivery Systems
Washington, DC
iglossa@healthmanagement.com

Chronic diseases are defined broadly as conditions that last 1 year or more and require ongoing medical attention or limit activities of daily living or both.

- Hypertension
- Diabetes
- Cardiovascular Disease



CDC's National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP)

CHRONIC DISEASES IN AMERICA

6 IN 10
Adults in the US
have a **chronic disease**



4 IN 10
Adults in the US
have **two or more**

THE LEADING CAUSES OF DEATH AND DISABILITY
and Leading Drivers of the Nation's **\$3.8 Trillion** in Annual Health Care Costs



HEART DISEASE



CANCER



CHRONIC LUNG
DISEASE



STROKE



ALZHEIMER'S
DISEASE



DIABETES



CHRONIC
KIDNEY DISEASE

An aspect of personal behavior or lifestyle, an environmental exposure, or a hereditary characteristic that is associated with an increase in the occurrence of a particular disease, injury, or other health condition.” (Principles of Epidemiology, CDC, 2006)

Modifiable: A risk factor that can be reduced or controlled by intervention, thereby reducing the probability of disease.

THE KEY LIFESTYLE RISKS FOR CHRONIC DISEASE



**TOBACCO
USE**



**POOR
NUTRITION**



**LACK OF
PHYSICAL ACTIVITY**



**EXCESSIVE
ALCOHOL USE**

- Lack of Physical Activity
- Smoking
- Poor nutrition
- Excessive alcohol



Modifying these risk factors can have a significant impact on our patients' risk of developing or controlling certain diseases.

Health care teams can help patients recognize the role they can play in controlling their chronic diseases. This is patient centered care.

American Heart Association recommends a “heart healthy” lifestyle across the lifespan.



National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP)

CDC > National Center for Chronic Disease Prevention and Health Promotion



Home National Center for Chronic Disease Prevention and Health Promotion

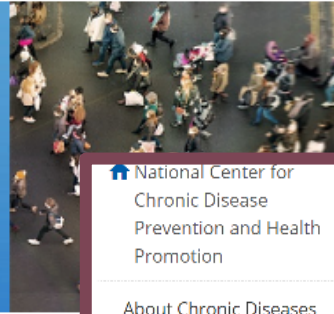
About Chronic Diseases

How You Can Prevent Chronic Diseases

Health and Economic Costs of Chronic Diseases

About Chronic Diseases

Six in ten adults in the US have a chronic disease and **four in ten adults** have two or more.



Home National Center for Chronic Disease Prevention and Health Promotion

About Chronic Diseases +

About the Center +

Budget and Funding +

Our Impact +

Chronic Disease Data +

Publications, Graphics, and Media -

Chronic Disease Fact Sheets

Division At A Glances

Chronic Disease Fact Sheets



Our fact sheets describe the most common preventable diseases in America, the key risk factors that cause them, and CDC's health promotion activities for all age groups and in multiple settings.

Chronic Disease Risk Factors

- Excessive Alcohol Use
- Lack of Physical Activity

Health Across the Life Span

- Promoting Health for Infants
- Promoting Health for Children and

DC Health

Heat Emergency: A heat emergency is in effect for the District of Columbia. [Find information on cooling centers.](#)

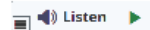
Home Child, Adolescent and School Health Services Health Professionals HIV/AIDS Resources Vital Records About DC Health

Services

- Animal Services
- Cancer and Chronic Disease

- Asthma
- Cancer
- Diabetes
- Heart Disease and Stroke
- Obesity
- Smoke-Free and Tobacco Laws

- Certificate of Need
- Community Outreach Request



DC Health Telephone Directory



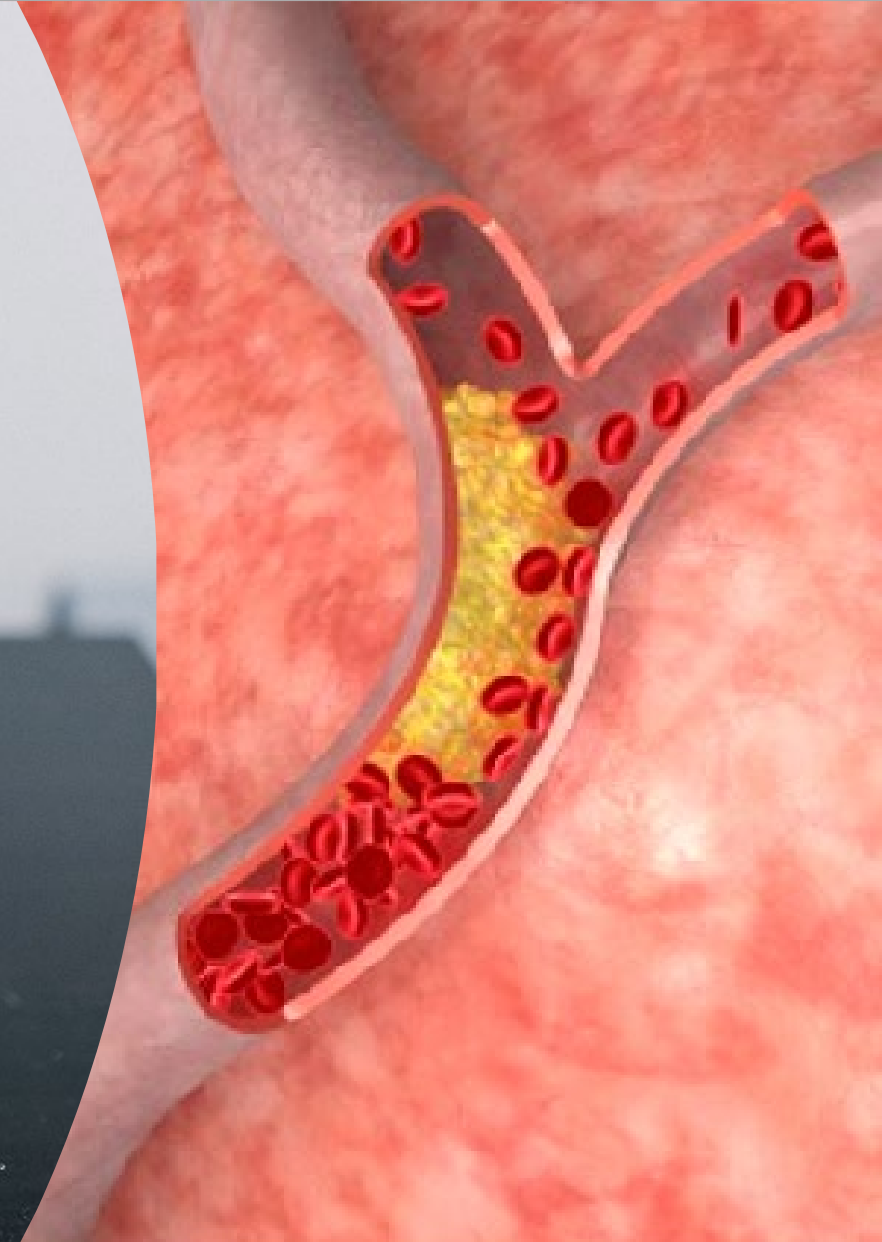
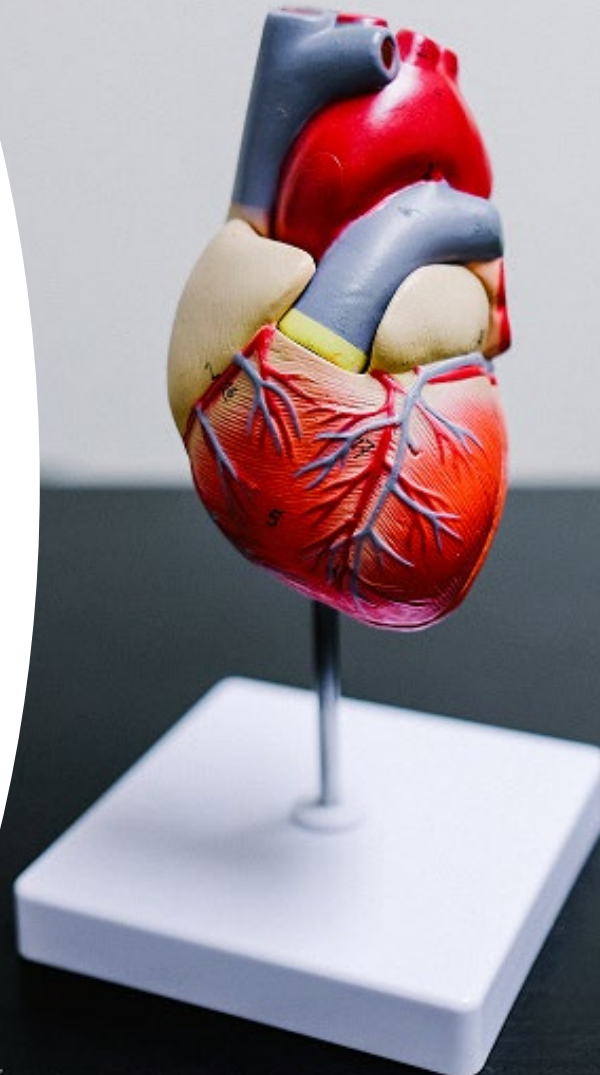
Use our [DC Health Service Telephone Directory](#) to view the telephone numbers for various DC Health services.

Cancer and Chronic Disease Prevention

The purpose of the Cancer and Chronic Disease Bureau is to reduce the incidences, morbidity and mortality of cancer and chronic disease in the District of Columbia. The Bureau uses strategies of primary, secondary and tertiary prevention; clinical quality improvement; and community engagement and partnerships to achieve its goals. Its programs address cancer, cardiovascular disease, diabetes mellitus, asthma and focus their wellness promotion work in clinical settings, community and faith-based organizations and worksites.

- Asthma
- Diabetes
- Heart Disease and Stroke

- Waxy substance in your blood
- Sources: liver and food
- Too much causes blockages in vessels
- Need to eliminate excess cholesterol before it causes damage and symptoms



All adults 20 or older have their cholesterol and other traditional risk factors checked **every four to six years** as long as their risk remains low. (CDC/AHA)

Recommendations for testing and management vary based on individual risk scores for cardiovascular disease.

Children and adolescents should have their cholesterol checked at least once between ages 9 and 11 and again between ages 17 and 21. (CDC)




What Do the Numbers Mean?

Cholesterol is measured in milligrams per deciliter (mg/dL).

Desirable Cholesterol Levels^{1,2}

Total cholesterol	Less than 200 mg/dL
LDL (“bad”) cholesterol	Less than 100 mg/dL
HDL (“good”) cholesterol	Greater than or equal to 60 mg/dL
Triglycerides	Less than 150 mg/dL



PHYSICAL ACTIVITY
can help raise HDL
and LOWER LDL

Regular physical activity (30 minutes daily) can help raise HDL (good cholesterol) levels and lower LDL levels. This is especially important for individuals with high triglyceride and/or low HDL levels who are overweight with a large waist measurement.



25% of your
BLOOD CHOLESTEROL
comes from the
FOOD YOU EAT



LOSING WEIGHT
can help
LOWER LDL



Eating a low-saturated-fat, low-cholesterol diet should help lower your LDL (bad cholesterol). If it's not lowered enough by reducing saturated fat and cholesterol, you can increase the amount of soluble fiber in your diet.

REDUCE THE AMOUNT OF
saturated fat & cholesterol
IN YOUR DIET

- Statins are a class of medicines used to lower cholesterol. While some of the cholesterol in your blood comes from food, most is made by the liver.
- Statins work by reducing the amount of cholesterol made by the liver and helping the liver remove cholesterol that is already in the blood.
- Statins may also reduce inflammation in the artery walls. This inflammation can lead to blockages that damage organs such as the heart and brain



The Scoop on Statins: What Do You Need to Know?

Why is it important to understand the benefits and risks of statins?

Most heart attacks and strokes are preventable by practicing a healthy lifestyle, and when necessary, taking medications to lower blood pressure or cholesterol or to help quit smoking. Statins, when used as indicated, can dramatically reduce a person's risk of having a heart attack or stroke, but millions of people are missing that opportunity. Some clinicians may miss prescribing a statin to a person who can benefit. Many times, individuals stop or do not start taking a statin due to concerns about side effects. The good news is that understanding your individual benefits and risks and working through your concerns with your clinician can help you prevent heart attacks and strokes and enjoy a longer, healthier life.

What is a statin, and how does it work?

Statins are a class of medicines used to lower cholesterol. While some of the cholesterol in your blood comes from food, most is made by the liver. Statins work by reducing the amount of cholesterol made by the liver and helping the liver remove cholesterol that is already in the blood. Statins may also reduce inflammation in the artery walls. This inflammation can lead to blockages that damage organs such as the heart and brain.

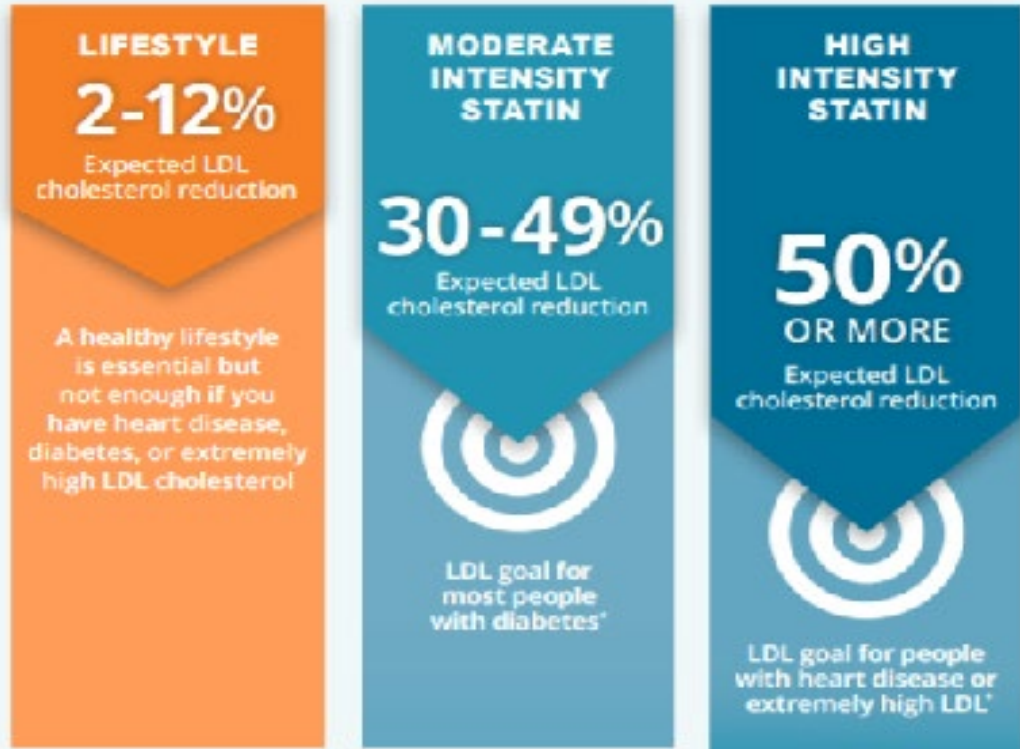


What should I ask my clinician?

- ▶ What are my "good" and "bad" cholesterol levels?

Lower your LDL cholesterol and decrease your risk of heart attack and stroke with statins and a healthy lifestyle

Statins are an essential part of reducing your LDL cholesterol.



MY CURRENT LDL MY LDL GOAL*

*Your doctor will help you determine your personal LDL cholesterol goal.



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Slightly more than half of the U.S. adults (55%, or 43 million) who could benefit from cholesterol medicine are currently taking it.

Quality Improvement Initiatives may include:

- Educating staff on cholesterol management and how to talk to patients about cholesterol and risk factors
- Educating patients on cholesterol and risk factors
- Identifying gaps in testing
- Actionable follow up on test results
- Evidence based interventions for modifying risk factors
- Medication adherence
- Follow up



- Proportion of patients considered at high risk of cardiovascular events who have their cholesterol managed with statin therapy
- Patients undergoing statin therapy (based on eligibility under risk categories for statin benefit groups) and lifestyle modifications resulting in an LDL \leq 190 mg/dL. (CMS, 2018)
- Alternate Performance Measure: Proportion of patients with a diagnosis of hyperlipidemia who have been prescribed a lipid lowering therapy



- People with high blood pressure and high blood cholesterol should be referred to evidence-based lifestyle programs that can increase blood pressure control and lower cholesterol levels.
- These programs should promote the following elements:
 - reduce weight
 - adopt DASH (Dietary Approaches to Stop Hypertension) eating plan principles including lower sodium intake
 - engage in regular physical activity.
- DC Health has identified DPP, the YMCA's SMBP program, SNAP-Ed and Weight Watchers



- Engage nurses, nurse practitioners, pharmacists, nutritionists, physical therapists, social workers for example, in cholesterol management in clinical settings
- Report # and % of patients in health care systems implementing new or enhanced team-based approaches or policies to address cholesterol management
- Team based, multi-disciplinary approaches may include medication management, patient follow-up, and adherence and self-management support
- Patients undergoing statin therapy (based on eligibility under risk categories for statin benefit groups) and lifestyle modifications resulting in an LDL \leq 190 mg/dL.



Leveraging Team Based Care to Identify and improve Cholesterol control

Education/consistency- speaking the same language

No wrong door

Check

Control

Change

Motivational interviewing

Medication adherence strategies

Follow up and follow through

Communication and feedback

Huddle up



Office Hour: July 26, 2021



[Click here to access the office hours meeting URL.](#)