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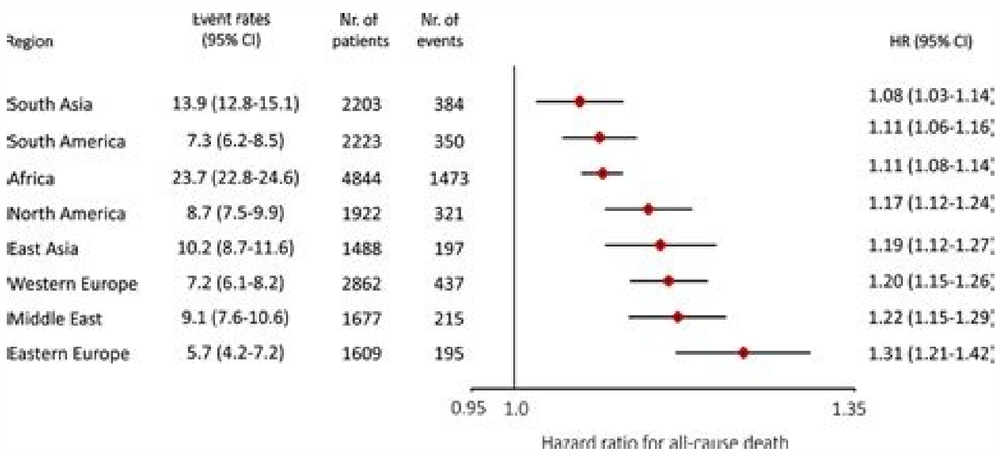
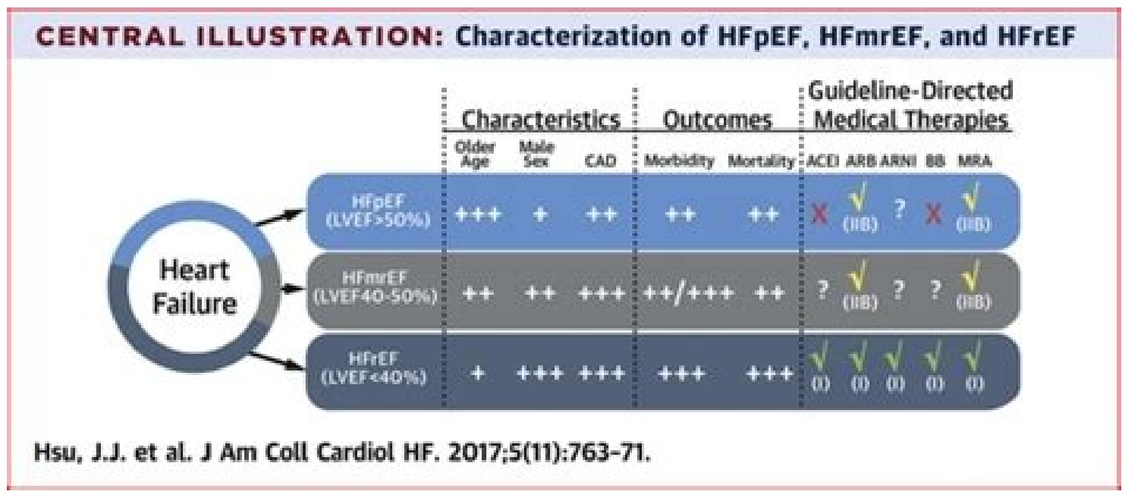
European guidelines heart failure 2017





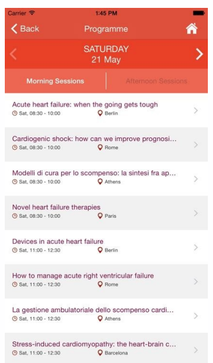


Table 5 Risk categories

Very high-risk	Subjects with any of the following: • Documented CVD, clinical or unequivocal on imaging. Documented clinical CVD includes previous AMI, ACS, coronary revascularization and other arterial revascularization procedures, stroke and TIA, aortic aneurysm and PAD. Unequivocally documented CVD on imaging includes significant plaque on coronary angiography or carotid ultrasound. It does NOT include some increase in continuous imaging parameters such as intima–media thickness of the carotid artery. • DM with target organ damage such as proteinuria or with a major risk factor such as smoking or marked hypercholesterolaemia or marked hypertension. • Severe CKD (GFR <30 mL/min/1.73 m2). • A calculated SCORE ≥10%.
High-risk	Subjects with: • Markedly elevated single risk factors, in particular cholesterol >8 mmol/L (>310 mg/dL) (e.g. in familial hypercholesterolaemia) or BP ≥180/110 mmHg. • Most other people with DM (with the exception of young people with type 1 DM and without major risk factors that may be at low or moderate risk). • Moderate CKD (GFR 30–59 mL/min/1.73 m^2). • A calculated SCORE ≥5% and <10%.
Moderate risk	SCORE is ≥1% and <5% at 10 years. Many middle-aged subjects belong to this category.
Low-risk	SCORE <1%.

AACE/ACE Lipid Guidelines

Panel	High (DM but no other major risk and/or age < 40)	Very High (DM+ major ASCVD risk(s) HTN, Fam Hx, low HDL-C, smoking) or ASCVD
	Desirable Levels	*Desirable Levels*
LDL-C, mg/dL	< 100	< 70
Non-HDL-C, mg/dL	< 130	< 100
TG, mg/dL	< 150	< 150
TC/HDL-C	< 3.5	< 3.0
Apo B, mg/dL	< 90	< 80
LDL-P, nmol/L	< 1200	< 1000

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head and upper body with pillows to breathe better at night. Ivabradin and results in chronic heart failure (change): a randomized stroke with placebo. SPIRONOLACTONA FOR CARDE INSUFFICIENCY WITH FRACTION OF preserved ejection. N English J Med. Face -to -face comparison Stratification of the risk of heart failure: ST2 versus Galectina-3.J am coll cardiol. The metabine alterations identified in the plasma are associated with results in patients with heart failure: diagnostic and pronóstic value of the metabolomic. J am coll cardiol. 2008; 52: 266 "72. Crossrefmedlinegoogle Scholar92. CC0/Valelopardo/Pixabay card. ; 43: 60 â,¬ - 8. Crossrefmedlinegoogle Scholar121. Bayes -Genis A, López L, Zapico E, et al .. adherence to recommendations can be improved by making shared decision -making among the suppliers of Mism and the patients, with the patient's participation in the selection of interventions based on individual values, preferences and associated conditions and comorbidities. 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