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LIPID CONTROL AND USE OF LIPID-LOWERING DRUGS FOR SECONDARY PREVENTION OF CARDIOVASCULAR EVENTS IN TAIWAN: THE TAIWANESE SECONDARY PREVENTION FOR PATIENTS WITH ATHEROSCLEROTIC DISEASE (T-SPARCLE) REGISTRY

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Objectives The aim of the present study was to examine treatment patterns, goal attainment, and factors influencing treatment among patients with stable symptomatic atherosclerotic disease in Taiwan.

Methods T-SPARCLE is a multi-centre, prospective registry enrolled 3486 outpatients with atherosclerotic disease (established coronary artery disease, cerebrovascular disease, or peripheral arterial disease) from 18 medical centres and regional hospitals in Taiwan. Among them, 2691 (77%) received at least one lipid-lowering drug and 2285 (85%) of them were receiving statin monotherapy. Most patients (92%) received statins at medium or lower equipotency doses. In this patient population with established CVD, 54% of patients attained ATP III targets for low-density lipoprotein cholesterol (LDL-C). The mean total cholesterol was 177 mg/dl, mean LDL-C was 101.91 mg/dl, mean high-density lipoprotein cholesterol was 46 mg/dl, and mean triglyceride was 146 mg/dl, respectively. Multivariate analysis identified three independent factors that were directly associated with goal attainment: the presence of hypertension (OR 1.49, 95% CI 1.13 to 1.95, $p=0.004$), previous history of stroke (OR 1.57, 95% CI 1.10 to 2.24, $p=0.014$), and previous history of myocardial infarction (OR 0.65, 95% CI 0.50 to 0.89, $p=0.004$).

Results T-SPARCLE is a multi-centre, prospective registry enrolled 3486 outpatients with atherosclerotic disease (established coronary artery disease, cerebrovascular disease, or peripheral arterial disease) from 18 medical centres and regional hospitals in Taiwan. Among them, 2691 (77%) received at least one lipid-lowering drug and 2285 (85%) of them were receiving statin monotherapy. Most patients (92%) received statins at medium or lower equipotency doses. In this patient population with established CVD, 54% of patients attained ATP III targets for low-density lipoprotein cholesterol (LDL-C). The mean total cholesterol was 177 mg/dl, mean LDL-C was 101.91 mg/dl, mean high-density lipoprotein cholesterol was 46 mg/dl, and mean triglyceride was 146 mg/dl, respectively. Multivariate analysis identified three independent factors that were directly associated with goal attainment: the presence of hypertension (OR 1.49, 95% CI 1.13 to 1.95, $p=0.004$), previous history of stroke (OR 1.57, 95% CI 1.10 to 2.24, $p=0.014$), and previous history of myocardial infarction (OR 0.65, 95% CI 0.50 to 0.89, $p=0.004$).

Conclusions LDL-C goal attainment in patients with established CVD is still unsatisfactory in Taiwan, up to one half of them are still inadequately treated. More effective strategies, including multidisciplinary approach to improved guideline adherence and revision of insurance reimbursement guidelines may facilitate goal attainment.