ARIC MANUSCRIPT PROPOSAL FORM

Manuscript #490

1. Full Title: Patterns and trends in the utilization of lipid lowering medications in the ARIC visit 1 through visit 4
   Abbreviated Title (length 26): Lipid Lowering Medication Use

2. Writing Group (list individual with lead responsibility first):
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3. Timeline:
   Analyses will start upon approval of the Publications Committee, and will be completed within 8 months. A draft manuscript will be circulated within 4 months after the completion of the analysis.

4. Rationale:
   An abnormal profile of cholesterol is one of the established risk factors for development of cardiovascular disease. Studies have shown that a 10% reduction in serum cholesterol results in a 25% reduction in coronary events. Unfortunately, it has been difficult to convince doctors and patients of the utility of treatment because of 1) the long asymptomatic period before the clinical onset of cardiovascular disease (CVD), 2) the high cholesterol, high saturated fat "All American" diet, and 3) the cost, inconvenience and side effects of lipid lowering drugs. In order to help physicians treat patients with abnormal profile of cholesterol appropriately, the National Institutes of Health (NIH) established the National Cholesterol Education Program (NCEP). The NCEP's Expert Panel on Detection, Evaluation, and Treatment of High Blood Cholesterol in Adults (ATP) established treatment guidelines in 1989. Since then, these guidelines have been revised in 1993 by the Adult Treatment Panel II (ATPII). In recent years, there are several new lipid/cholesterol lowering agents approved by FDA, and have been put in European and US guidelines for prevention of CVD. Exploration of the patterns and trends of use of lipid lowering medication in the ARIC cohort after 9 years follow-up is important in terms of public health implication.
5. Main Hypotheses:
1) The patterns of the utilization of lipid lowering medications are different by serum cholesterol level, prevalent CHD, race, gender, SES, insurance status, and geographic location.
2) There is a trend in time towards greater use of lipid lowering agents among participants with abnormal profile of cholesterol.
3) The patterns of lipid lowering agents used by the ARIC participants changed over time (as a result of the different medications that became available during the study period).

6. Data (variables, time window, source, inclusions/exclusions):
lipid lowering medications, serum TG, LDL-C, HDL-C, VLDL-C, insurance status at Visit 1, 2, 3, 4; prevalent CHD and diabetes at Visit 1 and incident CHD at Visit 2, 3, and 4; cholesterol-lowering diet at Visit 1 and 3; race, gender, SES, and centers at Visit 1.

REFERENCES

ADDRESSES OF THE WORKING GROUP MEMBERS
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