



MALAYSIAN SOCIETY OF
ATHEROSCLEROSIS

NHAM ANNUAL SCIENTIFIC MEETING 2018

13 - 15 APR 2018 | Hilton KL & Le Meridien KL



MANAGEMENT OF DYSLIPIDEMIA

Please fill detail informations to proceed to questionnaires.
Thank you.

Age

Select one

Specialty

Select one

Workplace

Select one

Sector

Select one

Location

Select one

SUBMIT



Disclaimer: Information collected will not be shared to Merck Sharp & Dohme (Malaysia) Sdn. Bhd.



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MANAGEMENT OF DYSLIPIDEMIA

Please complete below information to proceed to questionnaires.
Thank you.

Age	<input type="text" value="Select one"/>
Specialty	Allied health
Workplace	Family physician
	General practice
Sector	Internal medicine
Location	Nursing
	Pathology
<input type="button" value="SUBMIT"/>	





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QUESTIONNAIRES

Instructions: Select the correct answer(s)

1. Dyslipidemia refers to the following lipid levels (choose all that apply).

- Total cholesterol >5.2 mmol/l
- HDL-C <1.0 mmol/l (males) <1.2 mmol/l (females)
- TG >1.7 mmol/l
- LDL-C levels – will depend on the patient's CV risk

1/9

NEXT





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 WRONG

1/9

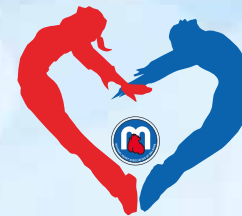
NEXT





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QUESTIONNAIRES

Instructions: Select the correct answer(s)

2. In treating patients with dyslipidaemia, the Malaysian CPG recommend treating to particular LDL-cholesterol levels.

- True
- False

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NEXT





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QUESTIONNAIRES

Instructions: Select the correct answer(s)

2. In treating patients with dyslipidaemia, the Malaysian CPG recommend treating to particular LDL-cholesterol levels.

- True
- False

 CORRECT

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NEXT





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QUESTIONNAIRES

Instructions: Select the correct answer(s)

3. Screening for dyslipidaemia should start at the age of 30 years old.

- True
- False

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QUESTIONNAIRES

Instructions: Select the correct answer(s)

3. Screening for dyslipidaemia should start at the age of 30 years old.

- True
- False

 **CORRECT**

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QUESTIONNAIRES

Instructions: Select the correct answer(s)

4. Assessment for lipid values can be done in the fasting and non-fasting state.

- True
- False

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QUESTIONNAIRES

Instructions: Select the correct answer(s)

4. Assessment for lipid values can be done in the fasting and non-fasting state.

- True
- False

 CORRECT

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QUESTIONNAIRES

Instructions: Select the correct answer(s)

5. The Malaysian CPG guideline recommend using risk stratification with the SCORE RISK calculator in deciding treatment targets for patients at risk.

- True
- False

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QUESTIONNAIRES

Instructions: Select the correct answer(s)

5. The Malaysian CPG guideline recommend using risk stratification with the SCORE RISK calculator in deciding treatment targets for patients at risk.

- True
- False**

 **CORRECT**

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QUESTIONNAIRES

Instructions: Select the correct answer(s)

6. When advising therapeutic lifestyle diet, carbohydrate intake should be limited to 30% of total calorie consumption.

- True
- False

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QUESTIONNAIRES

Instructions: Select the correct answer(s)

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- True
- False**

 **CORRECT**

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QUESTIONNAIRES

Instructions: Select the correct answer(s)

7. When performing CV risk stratification, very high risk individuals are those with established CVD, diabetes with proteinuria/major risk factor such as smoking, hypertension or dyslipidemia, or CKD with $GFR < 30 \text{ ml/min}^{-1}/1.73\text{m}^2$ (Stage 4 CKD)

- True
- False

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QUESTIONNAIRES

Instructions: Select the correct answer(s)

8. The recommended treatment target for LDL-C levels for the very high risk individuals is:

- ≤ 2.6 mmol/l or a reduction of $>50\%$ from baseline
- < 3.0 mmol/l or a reduction of $>50\%$ from baseline
- < 1.8 mmol/l or a reduction of $>50\%$ from baseline
- ≤ 2.0 mmol/l or a reduction of $>50\%$ from baseline

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QUESTIONNAIRES

Instructions: Select the correct answer(s)

9. In high and very high CV risk, drug therapy with statins should be initiated at the outset in conjunction with therapeutic lifestyle changes. If unable to achieve LDL-C goals, one can consider (choose all that apply):

- Statins + ezetimibe
- Statins + PCSK-9 inhibitors
- Statins + fibrates
- Statins alone

9/9

END





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 **CORRECT**

9/9

END

