
AHA: Redefining CVD Risk, Prevention and Management



A new American Heart Association presidential advisory is reshaping the landscape of cardiovascular disease (CVD) by redefining risk, prevention, and management. This transformation is spurred by the recognition of the interplay between cardiovascular disease, kidney disease, Type 2 diabetes, and obesity, collectively termed cardiovascular-kidney-metabolic (CKM) syndrome.

According to the American Heart Association's 2023 Statistical Update, over one-third of U.S. adults possess three or more risk factors contributing to cardiovascular, metabolic, and kidney diseases. CKM syndrome affects various organs, with a pronounced impact on the cardiovascular system.

Key elements outlined in the advisory include:

1. **CKM Syndrome Stages** : The advisory introduces stages of CKM syndrome, ranging from Stage 0 (no risk factors with a focus on prevention) to Stage 4 (the highest-risk stage involving established cardiovascular disease, potentially including kidney failure).
2. **Social Factors in Health** : Acknowledging the influence of social determinants on health, the advisory emphasises the importance of identifying and addressing these factors in patient care.
3. **Collaborative Care** : It promotes a multidisciplinary approach to patient care, encouraging healthcare specialists to address the comprehensive health of the individual.
4. **Algorithm Updates** : Suggested revisions to risk calculators that can predict the likelihood of heart attacks or strokes and estimate the risk of heart failure.

The advisory attributes the rise of CKM syndrome to the historical prevalence of obesity and Type 2 diabetes in adults and children, highlighting the connection between these metabolic conditions and cardiovascular risk. It also addresses the challenge of fragmented care for CKM syndrome patients, particularly those facing barriers to healthcare access. Additionally, it underscores the importance of systematically identifying and addressing social factors that influence health, such as nutrition and exercise opportunities.

CKM-related screenings aim to detect early cardiovascular, metabolic, and kidney health changes, identify barriers to care, and prevent progression to higher CKM syndrome stages. The various stages of CKM syndrome and their associated recommendations are outlined as follows:

- **Stage 0** : Focuses on prevention with health maintenance through lifestyle changes, including healthy eating, physical activity, and tobacco avoidance. Regular screening for key health parameters is recommended every three to five years.
- **Stage 1** : Involves excess body fat, unhealthy fat distribution, and glucose tolerance issues. It encourages healthy lifestyle changes, targeting at least a 5% weight loss if applicable. Screening every two to three years assesses various health metrics.
- **Stage 2** : Encompasses metabolic risk factors and kidney disease, necessitating risk factor management and potential medication use. SGLT2 inhibitors and GLP-1 receptor agonists are recommended for certain individuals. Screening aligns with established guidelines.
- **Stage 3** : Addresses early cardiovascular disease without symptoms, intensifying efforts to prevent symptomatic cardiovascular disease and kidney failure, possibly involving medication adjustments. Coronary artery calcium measurement may be considered to guide treatment decisions.
- **Stage 4** : Covers symptomatic cardiovascular disease, further divided into subcategories based on kidney failure. Individualised treatment for cardiovascular disease and CKM syndrome conditions is the goal.

The advisory calls for systemic changes in healthcare education, organisation, and reimbursement to optimise CKM health. Investment in research is crucial to address gaps in understanding CKM syndrome's pathways, progression rates, and the efficacy of multifaceted therapies in improving metabolic factors, reducing kidney disease progression, and preventing heart disease.

Source: [American Heart Association](#)

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