



CHAMPLAIN PRIMARY CARE CVD PREVENTION & MANAGEMENT GUIDELINE

What's New in the 2012 Guideline Update?

Section	2012 Guideline Updates
Hypertension	<ul style="list-style-type: none"> Additional resources added for helping patients to decrease sodium.
Cholesterol/ Dyslipidemia	<ul style="list-style-type: none"> Changes in assessment and management of patients at moderate risk for CVD. Includes hsCRP and non-HDL-C as part of screening criteria.
CKD	<ul style="list-style-type: none"> No significant updates.
Smoking Cessation	<ul style="list-style-type: none"> Updated Nicotine Replacement Therapy, Varenicline, and Bupropion protocols. Inclusion of recommendations to assist smokers not ready to quit with cut back to quit approaches. OHIP billing codes for Smoking Cessation added. Information on new Ontario Drug Benefit Plan coverage for Varenicline and Bupropion.
Obesity & Weight Management	<ul style="list-style-type: none"> Obesity screening and management now based on the Edmonton Obesity Staging System. Principles and goals of Obesity Management added. Xenical removed from medication list.
Physical Activity	<ul style="list-style-type: none"> Evidence boxes added emphasizing the impact of physical activity on all chronic diseases.
TIA & Ischemic Stroke	<ul style="list-style-type: none"> Evidence box added emphasizing the need for quick follow-up and early initiation of secondary prevention strategies. Goal of out-patient/community management of stroke added.
CAD/PVD	<ul style="list-style-type: none"> Evidence box highlighting the importance of secondary prevention. <i>Antiplatelet therapy:</i> <ul style="list-style-type: none"> Clopidogrel recommended if intolerant to ASA. Start Clopidogrel, Prasugrel, or Ticagrelor in patients receiving bare-metal or drug-eluting stent as ACS treatment. Start ASA or Clopidogrel in patients with symptomatic atherosclerotic peripheral artery disease of the lower extremity. <i>Risk Factor Management:</i> <ul style="list-style-type: none"> Depression screening and management recommendations.
Diabetes	<ul style="list-style-type: none"> Criteria for diagnosis of diabetes modified to include: Casual PG ≥ 11.1 mmol/L or 2hPG in a 75 g OGTT ≥ 11.1 mmol/L or A1c ≥ 6.5 %.
Heart Failure	<ul style="list-style-type: none"> Evidence summary box added emphasizing the need for regular patient follow-up and fluid and sodium management. Recommendations for the management of patients with sleep apnea and CKD. Recommendations for palliative management in patients with end-stage heart failure. Addition of spironolactone consideration in patients with NYHA II heart failure symptoms.