

Cardiovascular Disease

Canadian guidelines recommend that cardiovascular disease (CVD) risk assessment be completed every 5 years for men and women aged 40 to 75 years using the modified Framingham score (FRS) or Cardiovascular Life Expectancy Model (CLEM).

Individuals with factors associated with increased risk for CVD (e.g. diabetes, atrial hypertension, smoker, chronic kidney disease, family history risk factors) should be offered screening regardless of age.

Screening can be done by:

- Standard lipid panel
- Non-HDL-C
- Glucose
- Estimated glomerular filtration rate

Risk assessment:

Family history red flags that indicate higher risk for heart disease:

- Early onset of cardiovascular disease (in men younger than 55 and women younger than 65)
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- Cardiovascular disease in two or more (≥ 2) relatives on same side of family
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- Late onset of cardiovascular disease on both sides of family
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- Loss of family member to sudden cardiac death
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A strong family history of cardiovascular disease at young ages and/or a family history of unexplained sudden death may indicate an underlying genetic condition. Individuals with an inherited cardiac disorder cannot be assessed using FRS or CLEM. **Consider referral to your local cardiologist or cardiogenomics expert for further assessment.**

References:

Anderson TJ, Grégoire J, Pearson GJ, et al. 2016 Canadian Cardiovascular Society Guidelines for the management of Dyslipidemia for the Prevention of Cardiovascular Disease in the Adult. Can J Cardiol. 2016; 32:1263-1282
[https://www.onlinecjc.ca/article/S0828-282X\(16\)30732-2/fulltext](https://www.onlinecjc.ca/article/S0828-282X(16)30732-2/fulltext)

Find the contact information for your local [Genetics Centre here](#) or go to www.geneticseducation.ca > Genetics Centres > Canada > [Clinics](#).

To learn more about cardiac conditions with a strong genetic component (arrhythmias, cardiomyopathy, hypercholesterolemia) [click here](#) or go to www.geneticseducation.ca > Point of Care Tools > [Cardiogenomics](#).