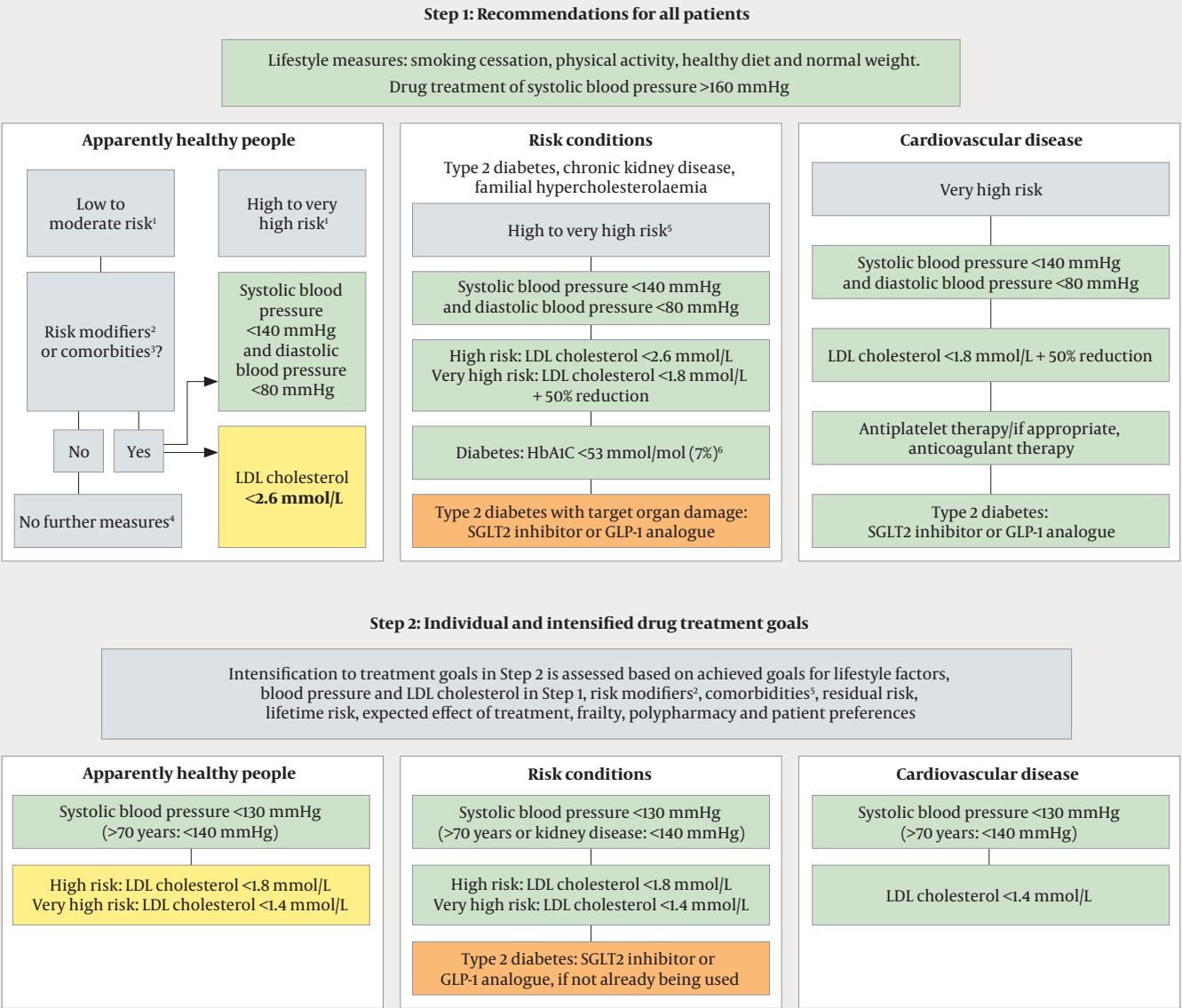


Figure 1 to Elise Sverre, Sigrun Halvorsen, Maja-Lisa Løchen and John Munkhaugen. Personalised cardiovascular disease prevention in the new guidelines. Tidsskr Nor Lægeforen 2022; 142. doi: 10.4045/tidsskr.22.0508



¹ Risk calculated using risk calculators, such as NORRISK. Low to moderate ten-year risk: <50 years <2.5%, 50-69 years: <5%, >70 years <7.5%. High ten-year risk: <50 years: 2.5-7.5%, 50-69 years: 5-10%, >70 years: 7.5-15%. Very high ten-year risk: <50 years: >7.5%, 50-69 years: >10%, >70 years >15%.

² Risk modifiers: psychological stress, ethnicity, detection of vascular changes on diagnostic imaging, family history.

³ Comorbidities: inflammatory conditions, cancer, COPD, migraine, sex-specific conditions (erectile dysfunction, pre-eclampsia, pregnancy diabetes and hypertension, polycystic ovary syndrome), psychiatric disease, sleep apnoea.

⁴ It is recommended that lifetime risk and expected benefit of treatment be assessed, and younger people with persistent hypertension should also be assessed for drug treatment.

⁵ Moderate risk with duration of diabetes <10 years, no target organ damage and no risk factors.

⁶ HbA1c ≤64 mmol/mol (8%) in older people or long duration of diabetes. HbA1c ≤48 mmol/mol (6.5%) in young people or short duration of diabetes.

Figure 1 Risk classification and overview of treatment goals in the new guidelines (1). Green = class I recommendation, yellow = class IIa recommendation, orange = class IIb recommendation