



Preventive Primary Care ~ Select

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Lp(a) and Atherosclerosis

What is Lp(a) ?

Lp(a) stands for Lipoprotein(a). It is a special form of LDL (low density lipoprotein). LDL is the “bad” form of cholesterol that can deposit in the artery wall and cause blockages (plaque) in blood vessels. Lp(a) consists of an LDL particle with a large protein called “apo a” connected to the outer surface. The structure of apo(a) is similar to proteins that control blood clotting. Elevated levels of Lp(a) may increase the risk of heart disease. Lp(a) may also speed the development of blockages in the arteries and may blood clot more easily.

What is an elevated Lp(a) level?

Desirable Lp(a) – Less than 15 mg/dl

Borderline Lp(a) – 15-30 mg/dl

High Risk Lp(a) – Greater than 30 mg/dl

Elevated Lp(a) is associated with an increased risk for heart disease, especially in persons who have a family history of heart disease and are younger than 50 years of age. A high Lp(a) level can increase the risk for heart disease even if that person has normal or “good” cholesterol levels.

What is the treatment for elevated Lp(a)?

Because elevated Lp(a) levels are genetically determined, treatment can be difficult. Some medications may lower Lp(a); but the primary treatment approach emphasizes careful control of all other heart disease risk factors. If the Lp(a) level is higher than desired, reducing LDL cholesterol levels to less than 70 mg/dl, reducing high blood pressure, quitting smoking, good nutrition, and regular exercise will reduce overall heart disease risk.