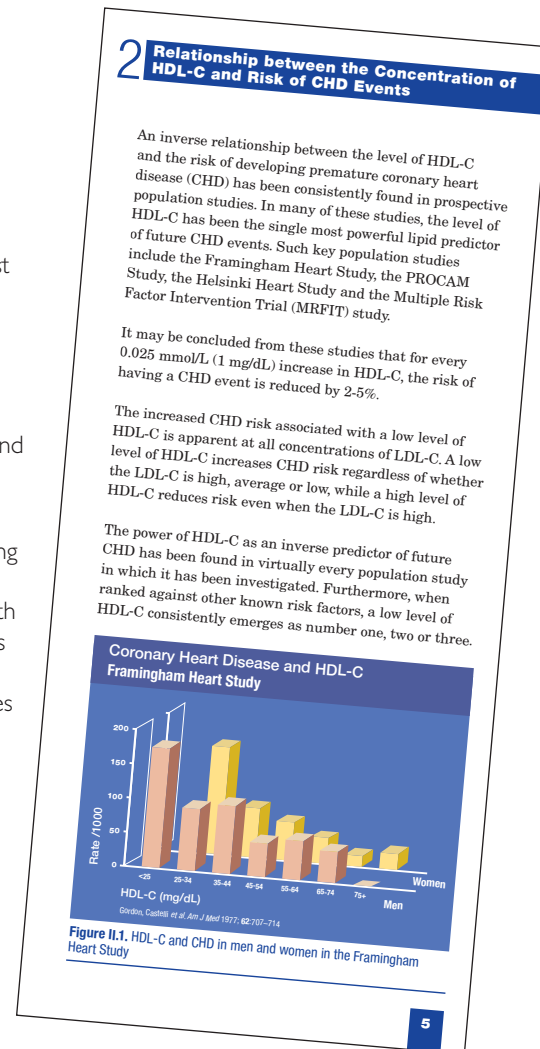


Intervention trials using statins to lower LDL cholesterol (LDL-C) have consistently shown impressive reductions in major cardiovascular events. However, despite the effective lowering of LDL-C in these trials, there is an unacceptably high residual risk of having a major cardiovascular event. One reason for this relates to the presence of a low level of HDL cholesterol (HDL-C).

The combined results of population studies and clinical trials support the now accepted view that raising the level of HDL-C should be considered as a therapeutic target of importance comparable to that of lowering LDL-C. The time of HDL-C as a therapeutic target has arrived.

The **third edition** of this very popular clinical handbook has been extensively revised. It contains the latest information including:

- New evidence demonstrating that a low level of HDL-C remains highly predictive of future cardiovascular events even when LDL-C has been reduced to very low levels by statins
- Results and clinical implications from the latest trials of the effects of HDL raising as well as summaries of important ongoing studies
- An update of the position of HDL-C in treatment guidelines
- Discussions of newer formulations of niacin and their role in protecting against cardiovascular disease
- A re-evaluation of the role of fibrates, including evidence of their disproportionately large cardiovascular protective effects in people with features of the metabolic syndrome as well as their potential protective role against the microvascular complications of type-2 diabetes
- Recent data about rimonabant and other endocannabinoid inhibitors
- Insights into the future of cholesteryl ester transfer protein (CETP) inhibitors as cardioprotective agents
- New understanding of the role of HDL mimetics to reduce cardiovascular risk
- Information on the impact of lifestyle interventions on HDL levels



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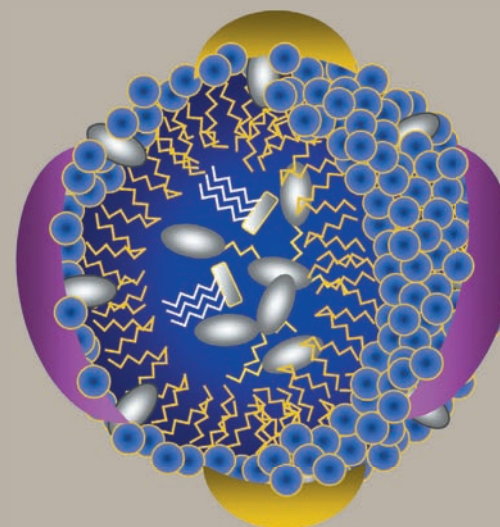
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