

## Patient on Ezetimibe Without a Statin

Exclude those attending the cardiovascular (CV) risk clinic (lipid clinic) and / or with familial hyperlipidaemia

Has the patient previously tried a statin?

Yes

No

## True statin intolerance?

Has patient tried an alternative statin? (Patients should have tried at least 2 different statins, including at least one from both the lipophilic (atorvastatin/simvastatin) and hydrophilic (rosuvastatin/pravastatin) groups).

Note: If not able to tolerate a high-intensity statin\* aim to treat with the maximum tolerated dose.

Stop ezetimibe.

Atorvastatin 20mg daily for primary prevention.
See also Algorithm A Secondary prevention.

Yes

No

## Primary prevention: Stop ezetimibe. Reinforce dietary/ lifestyle advice. No lipid lowering

drug therapy.

## Secondary prevention:

Ezetimibe can be considered as monotherapy.

Primary prevention: Stop ezetimibe. Start

atorvastatin 20mg daily.

If previously not tolerated consider alternative statin. (Patients should have tried at least 2 different statins, including at least one from both the lipophilic (atorvastatin/simvastatin)

and hydrophilic (rosuvastatin/pravastatin)

groups). Note: If n

Note: If not able to tolerate a high-intensity statin\* aim to treat with the maximum tolerated dose.

\*high-intensity statins as defined in NICE CG181: 2014.

Adapted with permission from NHSGGC Medicines Information Service.

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August 2011, Updated August 2015 (review date August 2016)

Secondary prevention: Stop ezetimibe.
See also Algorithm A – Secondary prevention.