**Raised heart and stroke disease risk (QRISK)**

**You have been sent this leaflet because your Qrisk score is raised, and you will benefit from having your cholesterol managed (see text for your personal Qrisk).**

**This leaflet is to give you some more information about what this means and what you can do next.**

**What is a Qrisk score?**

This is your *risk* of having a heart or circulation problem (heart attack, stroke, kidney disease) in the next 10 years. We have calculated this using information about your personal history (blood pressure, weight, smoking history, past medical history) and family history.

**The risk is split into:**

Low risk < (less than) 10%

Moderate risk 10 -20 %

High risk > (greater than) 20

**My risk is > (greater than) 10%, what can I do?**

Some risk factors can’t change such as your age, family history and ethnicity. However, some of the most important factors in your risk score *can* be improved

- Cholesterol (which this leaflet with be concentrating on)

- Smoking

- Blood pressure

- Weight

**What is cholesterol?**

A natural fat that is essential for our bodies to work properly. There are “good” and “bad” types of cholesterol. When you have high levels of “bad” cholesterol, they start to clog up your arteries (blood vessels) and over time they become blocked. This leads to circulation and kidney problems and is also how heart attacks and strokes happen.

**But I feel fine, do I really need to do anything?**

Like high blood pressure, most people with high cholesterol have no idea. You do not feel unwell with high cholesterol, but it is silently increasing your risk of heart, stroke and kidney disease. If we do nothing your Q risk score is likely to increase. We want you to enjoy a happy and healthy future and this is an opportunity to make changes that increase the chance of this!

**What can I do about my Q risk?**

The good news is lots of things! Reducing sugar and saturated fats, maintaining a healthy weight, and exercising all reduce levels of “bad” cholesterol. If you are a smoker stopping smoking is also very important. Please see the below links for more information to help you manage these risks:

[How to eat less saturated fat - NHS - NHS (www.nhs.uk)](https://www.nhs.uk/live-well/eat-well/how-to-eat-a-balanced-diet/eat-less-saturated-fat/)

[Exercise guidelines - NHS (www.nhs.uk)](https://www.nhs.uk/live-well/exercise/exercise-guidelines/)

[NHS stop smoking services help you quit - NHS (www.nhs.uk)](https://www.nhs.uk/live-well/quit-smoking/nhs-stop-smoking-services-help-you-quit/)

We can also start medications called **statins** to reduce “bad cholesterol” and increase “good cholesterol” levels in your body.

**What are statins?**

A tablet you take once a day that lowers your Q risk score. The most common statin used is ATORVASTATIN, but there are alternatives. It works by reducing how much cholesterol your body makes. Studies suggest that for every 50 people taking a statin for 5 years, 1 major event will be prevented. (heart attack or stroke). There are very few risks associated with taking statins.

**Do they have side effects?**

Most people have none! Some people have minor problems like nausea, diarrhoea, headaches, or muscle cramps. Uncommon problems include- hepatitis (inflammation of the liver). In rare cases they have caused muscle weakness and tendon problems. Some statins interact with grapefruit juice, and it is always important to read the leaflet before starting any medication.

**Starting a statin**

All patients who start statins will need to have their blood checked at 3 months and 12 months to monitor for cholesterol levels and for rare changes in the liver. Once you start a statin you need to continue taking it everyday for it to continue having benefits- but you can stop/ change it after discussion with a doctor if you have unmanageable side effects.

**What do I do now?**

We encourage you to make positive choices about your diet, exercise and stop smoking if you are a smoker.

If you want to start a statin, repeat your bloods in a few months after making lifestyle changes, or if you would like to talk about this further please respond to the text and we’ll arrange this for you.