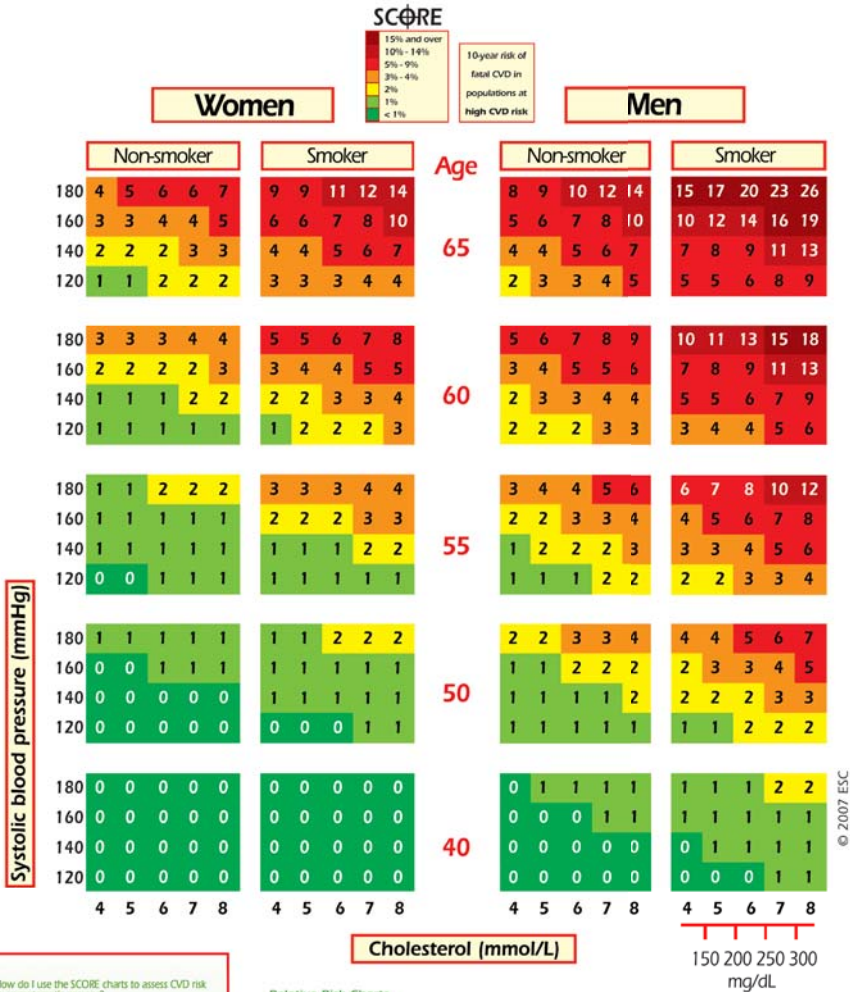


SCORE - European Low Risk Chart

10 year risk of fatal CVD in low risk regions of Europe by gender, age, systolic blood pressure, total cholesterol and smoking status



Systolic blood pressure (mmHg)

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How do I use the SCORE charts to assess CVD risk in asymptomatic persons?

1. Use the low risk chart in Belgium*, France, Greece**, Italy, Luxembourg, Spain*, Switzerland and Portugal; use the high risk chart in other countries of Europe.
 *Licensed, uncalibrated charts are now available for Belgium, Germany, Greece, The Netherlands, Spain, Sweden and Poland.

2. Find the cell nearest to the person's age, cholesterol and BP values, bearing in mind that risk will be higher as the person approaches the next age, cholesterol or BP category.

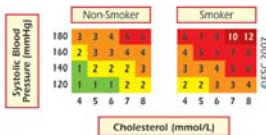
3. Check the qualifiers

4. Establish the total 10 year risk for fatal CVD.

Note that a low total cardiovascular risk in a young person may conceal a high relative risk; this may be explained to the person by using the relative risk chart. As the person ages, a high relative risk will translate into a high total risk. More intensive lifestyle advice will be needed in such persons.

Relative Risk Charts

This chart may be used to show younger people at low total risk that, relative to others in their age group, their risk may be many times higher than necessary. This may help to motivate decisions about avoidance of smoking, healthy nutrition and exercise, as well as flagging those who may become candidates for medication. This chart refers to relative risk, not percentage risk, thus the person in the top-right corner is at twelve times higher risk than the person in the bottom-left corner.



Risk estimation using SCORE: Qualifiers

- The charts should be used in the light of the clinician's knowledge and judgement, especially with regard to local conditions.
- As with all risk estimation systems, risk will be over estimated in countries with a falling CVD mortality rate, and under estimated if it is rising.
- At any given age, risk appears lower for women than men. This is misleading since, ultimately, more women than men die from CVD. Inspection of the charts shows that their risk is merely deferred by 10 years.
- Risk may be higher than indicated in the chart in:
 - Secondary or obese subjects, especially those with central obesity
 - Those with a strong family history of premature CVD
 - The socially deprived
 - Subjects with diabetes - risk may be 5 fold higher in women with diabetes and 3 fold higher in men with diabetes compared to those without diabetes
 - Those with low HDL cholesterol or high triglycerides
 - Asymptomatic subjects with evidence of pre-clinical atherosclerosis, for example in aortic atherosclerotic index or on imaging such as carotid ultrasonography or CT scanning



www.escardio.org/Prevention

European Guidelines on CVD Prevention: Fourth Joint European Societies' Task Force on Cardiovascular Disease Prevention in Clinical Practice.

Graham I, Azar D, Borch-Johnsen K, et al. Executive Summary [European Heart Journal 2007;28:2375-2414]

and Full text [European Journal of Cardiovascular Prevention and Rehabilitation 2007; 14(suppl 2):S1-S113].



