## FRAMINGHAM RISK SCORE (FRS) Estimation of 10-year Cardiovascular Disease (CVD) Risk

## Step 11

In the "points" column enter the appropriate value according to the patient's age, HDL-C, total cholesterol, systolic blood pressure, and if they smoke or have diabetes. Calculate the total points.

Risk F	actor	Risk Points			Points	
		Men		Women		
Age						
	30-34		0		0	
	35-39		2		2	
40-	40-44		5		4	
45-	49	7		5		
50-	-54	8		7		
55-	-59	10		8		
60-	-64	11		9		
65-	-69	12		10		
70-	70-74		14		11	
75		15		12		
	HDL-C (mmol/L)					
	>1.6		-2		-2	
1.3-		-1		-1		
1.2-		0		0		
	0.9-1.19		1		1	
<0		2		2		
	Total Cholesterol					
<4		0		0		
4.1-		1		1		
5.2-6		2		3		
	6.2-7.2		3		4	
>7		4		5		
Systolic Blood Pressure (mmHg)		Not Treated	Treated	Not Treated	Treated	
<1	20	-2	0	-3	-1	
120-	120-129		2	0	2	
130-	130-139		3	1	3	
140-149		2	4	2	5	
150-159		2	4	4	6	
160+		3	5	5	7	
Smoker	Yes	4		3		
	No	0		0		
Diabetes	Yes	statin-indicat		ed condition		
Diabetes	No	0		0		
Total Point	s					
1 Adapted from DiAccet	ino RB et al.(i). General c	ardia vasa ylar riak arafi	la faca in adiabas	. The French street is		447.740.50

<sup>1</sup> Adapted from: D'Agostino RB et al.(i). General cardiovascular risk profile for use in primary care. The Framingham Heart Study. Circ 2008;117:743-53.

Date: Patient's Name:

## Step 21 Using the total points from Step 1, determine the 10-year CVD risk\* (%)

Total Points	Total Points 10-Year CVD Risk (%)*					
	Men	Women				
-3 or less	<1	<1				
-2	1.1	<1				
-1	1.4	1.0				
0	1.6	1.2				
1	1.9	1.5				
2	2.3	1.7				
3	2.8	2.0				
4	3.3	2.4				
5	3.9	2.8				
6	4.7	3.3				
7	5.6	3.9				
8	6.7	4.5				
9	7.9	5.3				
10	9.4	6.3				
11	11.2	7.3				
12	13.3	8.6				
13	15.6	10.0				
14	18.4	11.7				
15	21.6	13.7				
16	25.3	15.9				
17	29.4	18.51				
18	>30	21.5				
19	>30	24.8				
20	>30	27.5				
21+	>30	>30				

Step 31 Using the total points from Step 1, determine heart age (in years).

Heart Age, y	Men	Women
<30	<0	<1
30	0	
31		1
32	1	
34	2	2
36	3	3
38	4	
39		4
40	5	
42	6	5
45	7	6
48	8	7
51	9	8
54	10	
55		9
57	11	
59		10
60	12	
64	13	11
68	14	12
72	15	
73		13
76	16	
79		14
>80	≥17	15+

<sup>\*</sup> Double cardiovascular disease risk percentage for individuals between the ages of 30 and 59 without diabetes if the presence of a positive history of premature cardiovascular disease is present in a first-degree relative before 55 years of age for men and before 65 years of age for women. This is known as the modified Framingham Risk Score.<sup>3</sup>

Lipid targets LDL-C:

Using 10-year CVD risk from Step 2, determine if patient is Low, Moderate or High risk.† Indicate Lipid and/or Apo B targets

Risk Level† Initiate Treatment If:		Primary Target (LDL-C)	Alternate Target	
<b>High</b> FRS ≥20%	Consider treatment in all (Strong, High)	<ul> <li>≤2 mmol/L or ≥50% decrease in LDL-C (Strong, Moderate)</li> </ul>	• Apo B ≤0.8 g/L or • Non-HDL-C ≤2.6 mmol/L (Strong, High)	
Intermediate FRS 10-19%	LDL-C ≥3.5 mmol/L (Strong, Moderate)     For LDL-C <3.5 mmol/L consider if:     Apo B ≥1.2 g/L     OR Non-HDL-C ≥4.3 mmol/L (Strong, Moderate)     Men ≥50 and women ≥60 with 1 risk factor: low HDL-C, impaired fasting glucose, high waist circumference, smoker, hypertension	• ≤2 mmol/L or ≥50% decrease in LDL-C (Strong, Moderate)	• Apo B ≤0.8 g/L or • Non-HDL-C ≤2.6 mmol/L (Strong, Moderate)	
Low FRS <10%	statins generally not indicated	statins generally not indicated	statins generally not indicated	
Statin-indicated conditions**	Clinical atherosclerosis*     Abdominal aortic aneurysm     Diabetes mellitus     Age ≥ 40 years     15-Year duration for age ≥ 30     years (DM1) Microvascular     disease     Chronic kidney disease     (age ≥ 50 years)     eGFR < 60 mL/min/1.73 m2 or     ACR > 3 mg/mmol			

Apo B:

Adapted from: Genest 1 et al.(i). 2019 Canadian Cardiovascular Society/Canadian quideliens for the diamingrain react sciency. Adapted from: Genest 1 et al.(i). 2019 Canadian Cardiovascular Society/Canadian quideliens for the Graniovascular Society/Canadian Quideliens for the diagnosis and treatment of dyslinderia and Adapted from: Anderson T et al.(i). 2012 Update of the Canadian Cardiologoscular Society guidelines for the diagnosis and treatment of dyslinderia and Canadian Cardiologoscular Society Graniovascular Society Graniovascular Society/Canadian Quideliens for the Graniovascular Society/Canadian Quide dyslipidemia for the prevention of cardiovascular disease in the adult. Can J Cardiol. 2013;29(2):151-167

<sup>‡</sup> apoB: apolipoprotein B stat, CVD: cardiovascular disease, FRS: Framingham Risk Score, HDL-C: high-density lipoprotein cholesterol,

LDL-C: low-density lipoprotein cholesterol.

\* Statins indicated as initial therapy

<sup>\*\*</sup> Consider LDL-C < 1.8 mmol/L for subjects with acute coronary syndrome (ACS) within past 3 months