FH Patient's Journey:

Exploring Treatment Options



A patient or patient's close relative (parents, siblings, grandparents) has had:

- an LDL-C level higher than 100 mg/dl and/or Lp(a) higher than 60 mg/dl with documented CAD or PAD
- a heart attack or stroke before the age of 50 and want to take steps to find out why this happened.

FAMILY HEALTH ASSESSMENT



The patient goes to their physician, who will likely check their risk factors, including cholesterol levels and current medical therapies and lifestyle, with the goal of improving the patient's health status.

Since high LDL-C and Lp(a) are genetically passed down, it is important for the patient to have all their close relatives tested, especially their children.







DRUG THERAPY & LIFESTYLE CHANGES



The physician recommends that the patient implement lipid-lowering strategies (drug therapy, diet and lifestyle changes).

In cases where the patient has CAD or PAD and their LDL-C and/or Lp(a) does not meet treatment goals (LDL-C less than 100 mg/dl and or Lp(a) less than 60 mg/dl), the physician may determine that **lipoprotein-apheresis** (LA) may be the best treatment option and connects the patient with nearest center.



ONBOARDING



The patient will meet with the LA team to see what they need to do before the first treatment (such as a switch or addition of medication, vascular access discussion, etc.).





The patient starts treatment and should expect to be there for **2-4 hours**, per session. The physician will check patient's cholesterol each session to ensure the levels are lowering and meeting treatment goals, helping to **reduce the risk of future heart** attacks/strokes.8



The patient should expect to have **treatments 2-4 times per month** (depending on cholesterol levels). Since LIPOSORBER is a lifelong therapy, it is important that the patient follow their doctor's recommendation.

