



American
Heart
Association.

Discover Lp(a): **A CLINICIAN'S PLAYBOOK** for Lipoprotein(a) Testing



INTRODUCTION



Okay team, let's huddle up...

This isn't just another day in the clinic, this is our moment to make an impact. Every patient who walks through those doors is counting on us to bring our best, and this playbook gives us the strategies to rise to the challenge.

Lp(a) testing has the power to change outcomes. Too often, hidden risks give heart disease and stroke the advantage. But not here. Not with us. We have the knowledge, the tools, and the game plan to take control and shift the odds in our patients' favor.

You're not just clinicians — you're the leaders, the decision-makers, the ones who set the tone for care. Every test you order, every patient you guide, every conversation you start is a step forward. And when we put it all together, that is how we create wins for our patients and our communities.

So use this playbook. Learn the strategies, take them back to your teams, and put them into action. Because today, we're not just running clinics. We're driving a new game plan for heart health. So let's get out there and make a difference!

— Coach Lp(a)

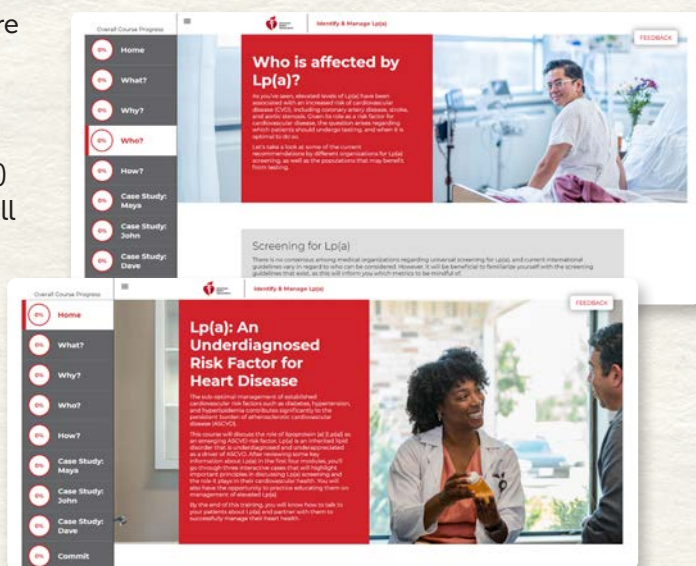
01

LAYING THE GROUNDWORK

Strong teams start with preparation. This is where we build the foundation, sharpen our understanding, and make sure everyone is aligned. With a solid start, we set ourselves up for **success** in every encounter that follows.

Identify & Manage Lp(a) Free Access Online E-Module

A 55-minute, self-paced online course for healthcare professionals introducing Lp(a) as an emerging risk factor for ASCVD. The module reviews guideline recommendations, highlights populations disproportionately affected and explains how Lp(a) contributes to heart disease and stroke. Learners will gain practical knowledge on testing, interpreting results, and management strategies to improve outcomes across care settings.



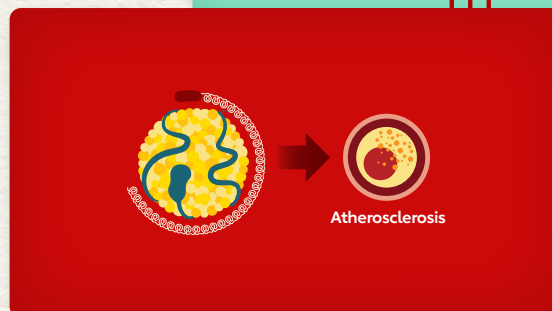
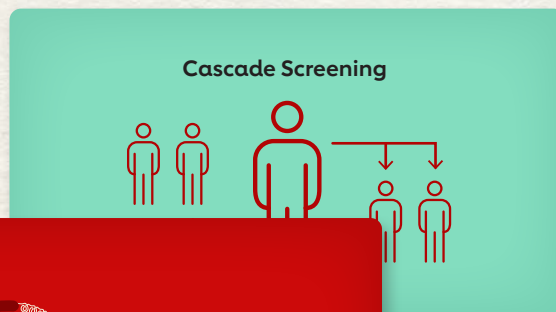
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Understanding Lp(a): A Key to Comprehensive Risk Assessment

This video explains what Lp(a) is, why it matters, and what steps you can take to learn your levels and protect your heart health.



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Clinicians' Guide to Frequently Asked Questions About Lipoprotein(a) Testing

This Clinicians' Guide to Frequently Asked Questions About Lipoprotein(a) Testing outlines the importance of identifying high Lp(a), a genetic risk factor that affects 20–30% of people worldwide and significantly increases the likelihood of heart attack, stroke, and aortic stenosis. Designed to support healthcare clinicians, the guide explains who should be tested, how to discuss results with patients, and the role of cascade screening for family members. It also addresses patient concerns around costs, insurance coverage, and treatment options, emphasizing that while no direct therapies currently exist, overall cardiovascular risk can be managed through lifestyle changes and LDL-lowering therapies. With clear answers to common patient questions, this resource helps clinicians guide prevention, reduce anxiety, and support shared decision-making. As future therapies emerge, this guide equips clinicians to integrate Lp(a) testing into practice and enhance cardiovascular care outcomes across care settings.



Clinicians' Guide to Frequently Asked Questions About Lipoprotein(a) Testing



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The ABCs of Lipoprotein(a): What Researchers and Clinicians Need to Know

This webinar provides a scientific foundation for understanding Lp(a). Dr. Marlys Koschinsky explains its unique structure, genetic inheritance, and role as a powerful driver of cardiovascular disease. She describes how Lp(a) promotes inflammation and clotting, making it an especially important factor for both atherosclerosis and aortic valve disease. By reviewing global prevalence and the latest scientific findings, Dr. Koschinsky sets the stage for why awareness and testing are so critical. The session is especially valuable for clinicians who want a deeper grasp of the biology behind this under-recognized risk factor.



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★ ★ ★ ALL-PRO QUOTE ★ ★ ★

"Lp(a) is pro-atherogenic, pro-thrombotic, and pro-inflammatory, making it one of the most important genetic risk factors for cardiovascular disease."

— Dr. Marlys Koschinsky





The Importance of Lp(a) Testing

This webinar delivers a strong call to action from Dr. Keith Ferdinand, a nationally recognized leader in cardiology. Using both patient stories and clinical evidence, Dr. Ferdinand demonstrates how high Lp(a) is often underrecognized and underdiagnosed, especially among Black and South Asian populations where prevalence is highest. He argues that even without direct therapies, measuring Lp(a) empowers clinicians to act by intensifying LDL management, counseling patients, and encouraging participation in clinical trials. His message is clear: waiting for new drugs is not an option, and clinicians have the tools right now to save lives.

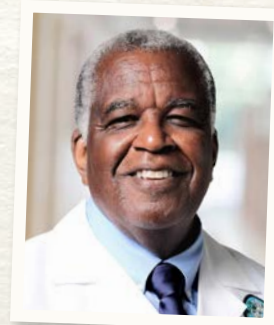


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★ ★ ★ ALL-PRO QUOTE ★ ★ ★

“We do not have specific treatment for lipoprotein(a), but not knowing it is not beneficial to the patient — measuring Lp(a) gives us the power to act now.”

— Dr. Keith Ferdinand

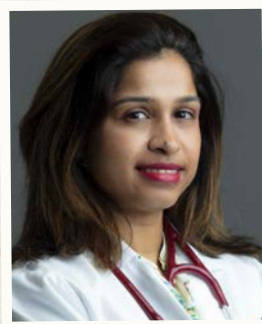


A Clinician-to-Clinician Conversation

This podcast episode pairs two unique perspectives: a community health champion and an academic cardiologist. Dr. Reema Menezes discusses her work at Bay Area Community Health, sharing how she integrates Lp(a) testing into primary care. Dr. Kaavya Paruchuri of Massachusetts General Hospital adds a specialty lens, explaining how she interprets test results and uses them to guide prevention strategies. Together, they illustrate how Lp(a) awareness can be applied both in everyday practice and in advanced cardiology settings, offering listeners real-world strategies for expanding testing and engaging patients.



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Dr. Reema Menezes



Dr. Kaavya Paruchuri

★ ★ ★ ALL-PRO QUOTE ★ ★ ★

“Lp(a) is the canary in the coal mine — a warning sign that should motivate patients and providers to intensify cardiovascular prevention now.”

— Dr. Kaavya Paruchuri

02

GAMEDAY STRATEGIES

This is where planning meets execution. Here you will find practical approaches that turn knowledge into action. Clear, confident steps that keep momentum going and move us closer to better outcomes for every patient we serve.

Measuring, Managing and Mitigating Risk

In recognition of Lp(a) Awareness Day, this webinar brings together science and practice. Dr. Gissette Reyes-Soffer reviews the latest evidence on Lp(a)'s biology and genetics, showing why it is an independent, inherited risk factor that deserves clinical attention. She emphasizes how Lp(a) risk can remain hidden in patients who otherwise appear low-risk based on standard cholesterol measures. Dr. Donald Lloyd-Jones builds on this by outlining how clinicians can act now, including the use of PREVENT risk equations, LDL and ApoB reduction, lifestyle counseling, and family-based prevention. The session balances cutting-edge science with actionable strategies for patient care.



Dr. Gissette Reyes-Soffer



Dr. Donald Lloyd-Jones



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"DNA is not destiny — Lp(a) may be genetic, but managing LDL, lifestyle, and family risk makes it actionable today."

— Dr. Donald Lloyd-Jones

Challenges in Testing and Opportunities in Care

This session focuses on the challenges and opportunities in Lp(a) testing. Dr. Leslie Donato from Mayo Clinic explains why prevalence is so high and why one simple, once-in-a-lifetime test can identify at-risk patients who would otherwise be missed. She underscores barriers in current testing practices and why clinicians need to increase awareness. Dr. Howard Weintraub from NYU Langone compliments this with a practical look at patient care, discussing how to manage high Lp(a) by addressing other modifiable risks, maximizing LDL reduction, and preparing for future therapies currently in development. Together, they highlight how clinicians can act today to improve care while anticipating what's ahead.



Dr. Howard Weintraub



Dr. Leslie Donato



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★ ★ ★ ALL-PRO QUOTE ★ ★ ★

"Every clinician should know: Lp(a) is common, measurable, and actionable — one test can change a patient's life and their family's future."

— Dr. Howard Weintraub



Cardiology and Neurology Perspectives

This cross-specialty conversation offers unique insights from both cardiology and neurology. Dr. Nishant Shah emphasizes how Lp(a) testing can reclassify cardiovascular risk, drive cascade screening, and guide aggressive prevention even before a major event occurs. Dr. Nada El Hussein brings the neurology perspective, highlighting research that links high Lp(a) with stroke, including pediatric stroke, and discussing how it intersects with conditions like kidney disease and menopause. Together, they call for broader screening and a stronger focus on implementation, while pointing out that current testing rates remain far too low. Their combined perspectives make a powerful case for why Lp(a) awareness must extend beyond cardiology alone.



Dr. Nishant Shah



Dr. Nada El Hussein



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★ ★ ★ ALL-PRO QUOTE ★ ★ ★

“Testing for Lp(a) is extraordinarily low—yet identifying it can reclassify risk, guide cascade screening, and save lives.”

— Dr. Nishant Shah

Women’s Health

This episode of the Lp(a) Discovery podcast series shines a spotlight on women’s heart health. Dr. Stephanie Saucier explores how Lp(a) uniquely affects women across their lifespan, from pregnancy to post-menopause, and its connection to conditions such as preeclampsia. Dr. Antonio Fernandez emphasizes the importance of every woman knowing her Lp(a) level and explains how cascade screening can protect families across generations. The discussion highlights how gender and life stage influence cardiovascular risk, highlighting the need for tailored prevention strategies. It gives clinicians concrete ways to start conversations with female patients and ensure that women are not overlooked in Lp(a) care.



Dr. Stephanie Saucier



Dr. Antonio Fernandez



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★ ★ ★ ALL-PRO QUOTE ★ ★ ★

“Heart disease is the number one killer of women—and knowing Lp(a) levels is critical to protecting them across their lifespan.”

— Dr. Stephanie Saucier

At the heart of it all are the people we care for. This section is about building trust, guiding conversations, and empowering patients with understanding. When patients feel informed and supported, progress becomes possible.

An All-Pro Roster of Patient Resources

This collection of resources is designed to empower patients and families with knowledge about Lipoprotein(a), what it is, why it matters, and how to take action. From understanding the basics of Lp(a) and its genetic risks to learning which tests to ask for, preparing thoughtful questions for healthcare visits, and addressing common myths, each tool builds confidence and supports informed decisions. The materials also highlight the importance of cascade screening, encouraging family members to get tested and take proactive steps to protect their heart health. Together, these resources ensure that patients are not only aware of their risk but also equipped with the right information to work with their doctors, reduce overall cardiovascular risk, and safeguard their future.



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★ ★ ★ ALL-PRO QUOTE ★ ★ ★

“I now know that lipoprotein(a) is a silent risk health factor and that I need to be proactive. Having a high Lp(a) test is a wake-up call. I advocate for people to learn more about this test to see if they are at risk while there is still time to do something to help mitigate the risk.”

— Verónica Sánchez



SCAN CODE OR CLICK HERE TO READ VERÓNICA'S Lp(a) STORY

Lipoprotein (a): Myths Vs. Facts

Myth 1: If I know my LDL cholesterol number, I don't need to have my Lp(a) tested

Fact: LDL and Lp(a) are different. Imagine your blood is like a river flowing through your body, with boats called lipoproteins carrying cholesterol and similar substances. Both lipoprotein (a) [Lp(a)] and low-density lipoprotein (LDL, or "bad") cholesterol, have a passenger called ApoB-100, but Lp(a) has an extra passenger called Apo(a). If there are too many Lp(a) boats in your blood, they can stick to the walls of your blood vessels, making the river narrower and harder for blood to flow smoothly. Doctors check for Lp(a) because having too much can increase your risk of heart disease.

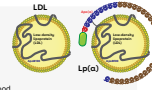
You could have a normal LDL number and a high Lp(a) level. Since regular cholesterol tests don't check Lp(a), ask your doctor if you should have an Lp(a) test.

Myth 2: I don't need to know my Lp(a) level because it doesn't affect my health

Fact: A high Lp(a) level can cause plaque buildup, narrowing arteries and reducing blood flow. It also makes it harder to break down and causes plaque rupture. Plaque buildup and rupture can end up blocking blood flow to important organs like the brain, kidneys, and lungs. This serious condition is called coronary artery disease, aortic stenosis, aortic aneurysm (AA), and stroke. Lp(a) can really harm your heart.

Myth 4: Just because a close family member has high Lp(a), it doesn't mean I will

Fact: Lp(a) is a genetic lipoprotein risk factor for heart disease. If a family member has high Lp(a), it's important to encourage other family members, siblings, and children to do the cascade screening.



Understanding the Lp(a) Test

- When should I talk to my doctor about Lp(a) testing?**
 - Family or personal history of premature heart disease (meaning under 45 for men and under 55 for women)
 - Known family history of high Lp(a)
 - Diagnosis of familial hypercholesterolemia (FH) - inherited condition that causes the body to produce very high LDL or bad cholesterol
- How do I get tested?**
 - The standard cholesterol test, also called a lipid panel, doesn't include Lp(a)
 - Talk to your doctor about ordering Lp(a) to your next cholesterol test.
- What do the results mean?**
 - Levels higher than 50 mg/dL (1.27 mmol/L) are considered to be high.
 - A high Lp(a) level increases the risk of heart attack, stroke, peripheral artery disease (PAD), and aortic stenosis.
 - Lp(a) is a genetic risk factor for heart disease. If a close family member has high Lp(a), it's important to get tested and encourage other family members, like parents, siblings, and children, to do the same. Ask your doctor about genetic testing options like cascade screening.
- How can I lower my Lp(a)?**
 - Although lifestyle changes can't lower Lp(a) levels, it's important to lower your overall risk of heart disease by:
 - Eating a healthy diet
 - Being physically active
 - Maintaining a healthy weight
 - Avoiding tobacco use
 - Limiting alcohol use
 - Getting enough sleep
 - These habits in addition to taking medications as prescribed can also help reduce your risk for high blood pressure, high cholesterol, obesity and diabetes.
 - *New treatments to lower Lp(a) levels are being developed. Talk to your doctor for more information.
- Would my health insurance cover the Lp(a) test?**
 - Health insurance often covers Lp(a) testing, but if you're unsure, contact your insurance with the CPT code 83955 to check coverage. If not covered, your doctor may be able to help find affordable options.

Talk to your doctor about Lp(a) and how to reduce your risk of a heart attack and stroke. Learn more at heart.org/lpa

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04

EXTRA POINTS

Learning works best when it inspires action. These resources bring energy and creativity to patient education, helping them stay engaged and motivated. When patients join the process, real change happens.

Lipoprotein(a) Gamified Knowledge Checks

This set of interactive tools makes learning about Lipoprotein(a) both fun and memorable. Through activities like a word search, fact check quiz, and a matching game, patients and families can test their knowledge while discovering essential information about Lp(a). The games reinforce key lessons, including that Lp(a) is a genetic risk factor for heart disease, it is not measured in routine cholesterol tests, and family members should be screened if one relative has high levels. These activities are designed to spark curiosity, encourage conversation, and build awareness, giving patients of all ages an engaging way to understand their heart health.



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Lipoprotein (a) Word Search Challenge

Did you know high Lp(a) levels affect about 1 in 5 people worldwide? Lipoprotein (a), or Lp(a), is a genetic risk factor for heart disease. It's not included in regular cholesterol tests or lipid panels. While diet and exercise don't lower Lp(a) levels, they do improve overall heart health. If someone in your family has high Lp(a), close relatives should get tested too!

Welcome to the Lp(a) Word Search Challenge! Find and circle the hidden words related to Lipoprotein(a). Words can be vertical, horizontal or diagonal.

WORD LIST

1. Lipoprotein
2. Cholesterol
3. Genetic
4. Testing

A	S	L	X	C	W
G	Z	E	Q	H	M
N	L	I	P	O	P
J	U	X	G	L	F
L	D	M	O	E	B
X	O	U	I	S	N
T	C	Z	Q	T	V
U	T	B	C	E	O
M	O	Y	N	R	M
Y	R	T	A	O	W
W	O	U	P	L	A
A	E	F	J	K	C

Lipoprotein (a) Match the Statement

Welcome to the Lp(a) Match the Statement Game! Match the statements in Column A with the correct answers in Column B. Write the letter of your answer in the box. Have fun and learn something new!

STATEMENTS

COLUMN A	COLUMN B
<input type="checkbox"/> 1. Lp(a) levels are not determined by genetics.	A. True: Parents, siblings, and children should get tested.
<input type="checkbox"/> 2. Regular cholesterol tests don't check Lp(a).	B. False: About 1 in 5 people worldwide have high Lp(a) levels.
<input type="checkbox"/> 3. High Lp(a) can increase heart disease risk.	C. False: Lp(a) is mostly determined (>90%) by genetics.
<input type="checkbox"/> 4. If a close family member has high Lp(a), others should test.	D. True: Lp(a) can be added to your cholesterol test, but if you've already had one, you'll need a separate test for Lp(a).
<input type="checkbox"/> 5. Lifestyle changes won't lower Lp(a).	E. True: Diet and exercise reduce your overall heart disease risk but don't reduce Lp(a) levels.
<input type="checkbox"/> 6. High Lp(a) levels are rare.	F. True: It can cause plaque buildup in arteries.

SUMMARY

Lipoprotein (a), or Lp(a), is a genetically inherited risk factor for heart disease. Regular cholesterol tests don't check for Lp(a). Lp(a) levels can't be lowered by diet or exercise. If a close family member has a high Lp(a) level, parents, siblings, and children should get tested too.

Ask your doctor if a Lp(a) test is right for you!

ANSWERS B E F D A C E D F <

A WINNING GAME PLAN FOR



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