

From the:

Effectiveness-Based Guidelines for the Prevention of Cardiovascular Disease in Women—2011 Update



TABLE 2. Classification of CVD Risk in Women

Risk Status	Criteria
High risk (≥1 high-risk states)	Clinically manifest CHD
	Clinically manifest cerebrovascular disease
	Clinically manifest peripheral arterial disease
	Abdominal aortic aneurysm
	End-stage or chronic kidney disease
	Diabetes mellitus
	10-year predicted CVD risk ≥10%
At risk (≥1 major risk factor(s))	Cigarette smoking
	SBP ≥120 or DBP ≥80 mm Hg or treated hypertension
	Total cholesterol ≥200 mg/dL or HDL-C <50 mg/dL or treated for dyslipidemia
	Obesity, particularly central adiposity
	Poor diet
	Physical inactivity
	Family history of premature CVD occurring in first-degree relatives <55-year-old men or <65-year-old women
	Metabolic syndrome
	Evidence of advanced subclinical atherosclerosis (eg, coronary calcification or carotid plaque or thickened IMT)
	Poor exercise capacity on treadmill test and/or abnormal heart rate recovery after stopping exercise
	Systemic autoimmune collagen-vascular disease (eg, lupus or rheumatoid arthritis)
	A history of preeclampsia, gestational diabetes, or pregnancy-induced hypertension
Ideal cardiovascular health (all of these)	Total cholesterol <200 mg/dL (untreated)
	BP <120/<80 mm Hg (untreated)
	Fasting blood glucose <100 mg/dL (untreated)
	Body mass index <25 kg/m ²
	Abstinence from smoking
	Physical activity at goal: <u>Adults</u> >20 y of age: ≥150 min/wk moderate intensity or ≥75 min/wk vigorous intensity or combination
	Healthy (DASH-like) diet (see Appendix)

CVD indicates cardiovascular disease; CHD, coronary heart disease; SBP, systolic blood pressure; DBP, diastolic blood pressure; HDL-C; high-density lipoprotein cholesterol; IMT, intima-media thickness; BP, blood pressure; and DASH, Dietary Approaches to Stop Hypertension.