



Understanding the Lp(a) Test



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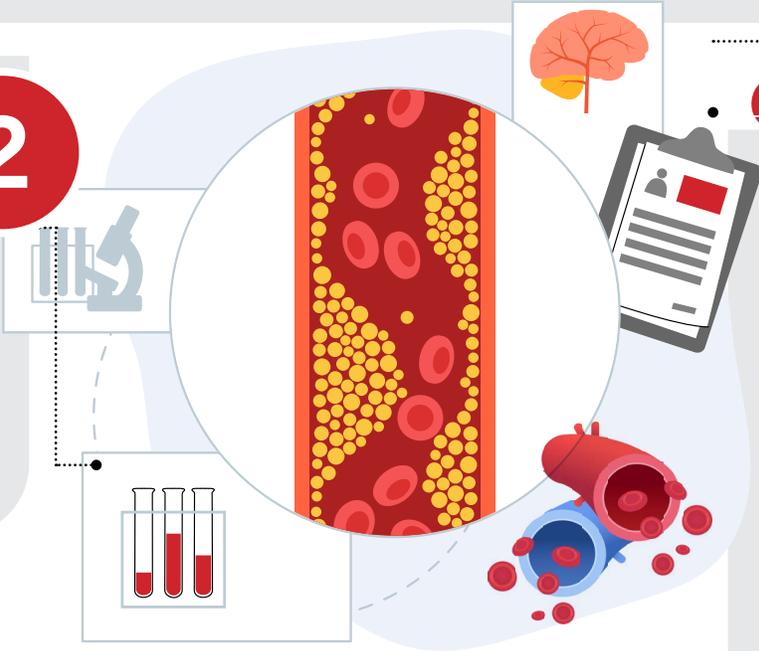
When should I talk to my doctor about Lp(a) testing?

- 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 poorly recycle LDL or bad cholesterol

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How do I get tested?

- The standard cholesterol test, also called a lipid panel, doesn't include Lp(a).
- Talk to your doctor about adding Lp(a) to your next cholesterol test.



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What do the results mean?

- Levels higher than 50 mg/dL (125 nmol/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](#).

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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



stopping 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.

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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 83695 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