

3.17 Use of Cardiovascular Risk Scores in Adult Populations with Cystic Fibrosis

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Background: Advancements in Cystic Fibrosis (CF) therapy have increased the life expectancy of people with CF (PwCF). An emerging challenge is the potential increased risk of cardiovascular disease (CVD)

Methods: We calculated the SCORE2, SCORE2-DM and WHO CVD risk scores of PwCF aged ≥ 40 attending our service between 2019 and 2023. **Results:** 77 PwCF were included. Of the 26 with CF-related diabetes (CFRD), SCORE2-Diabetes classified 46.2% as low-risk, 46.2% as moderate-risk, and 7.6% as high-risk. Of the 51 without CFRD, SCORE2 classified 78.4% as low-to-moderate-risk and 21.6% as high-risk. Using the WHO risk chart, 63.6% were green-risk, 24.7% were yellow-risk, 10.4% were orange-risk, and 1.3% were red-risk. ESC recommends targeting LDL-C < 2.6 mmol/L in moderate-risk patients and < 1.8 mmol/L in high-risk patients. WHO recommends pharmacotherapy in red-risk patients and in established diabetes. LDL-C was ≥ 2.6 mmol/L in 31.2%, and ≥ 1.8 mmol/L in 72.7% of our cohort.

Conclusions: Further research into the most suitable risk score and treatment target in PwCF is warranted. A significant proportion of our cohort would be candidates for lipid-lowering therapy. Statin initiation is challenging in PwCF due to potential co-existing liver disease and polypharmacy. **Keywords:** Cardiovascular risk, Cystic Fibrosis **Disclosures:** **Conflict of Interest:** The authors declare that they have no conflict of interest.