Metabolic Syndrome (MetS)
Why is it important to identify MetS?

• MetS is associated with an elevated risk of:
  – Type 2 Diabetes (5x)
  – Cardiovascular disease (2x)
    • Cerebrovascular accident (2-4x)
    • Myocardial infarction (3-4x)
  – All cause mortality

• Other systemic effects include:
  – Renal, hepatic, skin, cardiovascular

Source: American Heart Association "What is Metabolic Syndrome" (2015)
What is MetS?
Clinical Definition

Modified NCEP ATPIII Guidelines
• Presence of 3 out of 5 of the following:

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<tr>
<td>Blood glucose</td>
<td>≥100 (or taking hypoglycemic)</td>
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<tr>
<td>HDL</td>
<td>&lt;40 (men) or &lt; 35 (women)</td>
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<tr>
<td>Triglycerides</td>
<td>≥ 150 (or taking lipid lowering agents)</td>
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<td>Waist circumference</td>
<td>&gt;40 in (men) or &gt; 35 in (women)</td>
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<td>Blood pressure</td>
<td>≥ 130/85 (or taking anti-hypertensive)</td>
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Evidence-Based Treatment of MetS: Overview

• Routine monitoring of metabolic parameters
  – Body weight, abdominal circumference
  – Blood pressure
  – Blood glucose and lipids

• Interventions that target lifestyle modifications
  – Weight loss (5-10%)
  – Nutrition
  – Physical activity

• Evidence-based treatment guidelines for management of:
  – Dyslipidemia
  – Hypertension
  – Diabetes Type 2

Source: American Heart Association "What is Metabolic Syndrome" (2015)
Step 4. Treat to Target Metrics?

• How would these metrics be different than the metrics found in your Diabetes, Obesity & CVD CP’s?

• What would your Numerator/Denominator calculations be for MetS?