**What is preventive cardiology?**

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Cardiovascular disease is a leading cause of morbidity and mortality in both men and women across the globe. Despite a dramatic decline in cardiovascular mortality rates in the past five decades, this decline recently slowed down, with projections suggesting a potential for a reversal in mortality in the coming years. Concerningly, younger individuals currently represent a more prominent proportion of patients at risk of cardiovascular morbidity and mortality. Moreover, cardiovascular disease causes substantial financial and productivity losses to societies and leads to physical limitation and reduced quality of life. Although significant progress has been made to reduce the global burden of cardiovascular disease, efforts have focused primarily on treatment of manifest disease rather than on prevention of events.

Preventive cardiology is a subspecialty of cardiology that focuses on preventing a wide range of cardiovascular diseases, and refers to all efforts aiming at identifying, assessing, and optimizing cardiovascular risk at the primordial, primary, and secondary prevention stages. Accurate identification of individuals at increased risk for future cardiovascular disease who may benefit from the most aggressive primary prevention strategies remains a top priority in cardiovascular medicine.

Preventive cardiologists utilize a variety of methods to prevent heart disease, including identifying and managing risk factors for heart disease, prescribing medications to lower risk factors, encouraging patients to make lifestyle changes, such as eating a healthy diet, exercising regularly, and quitting smoking, and providing counseling and support to help patients make healthy changes. Therefore, enormous opportunities exist to focus on prevention of cardiovascular disease.

The field of preventive cardiology has evolved significantly over the years. Traditionally, preventive cardiology focused primarily on identifying and treating cardiovascular risk factors, most notably management of high cholesterol, high blood pressure, and smoking. However, the field of preventive cardiology has expanded for three main reasons:

1. Our understanding of cardiovascular risk have expanded from individual risk factors to a multiplicity of comorbidities and risk exposures.
2. The growing public health crisis of diabetes, obesity, and associated cardiometabolic risk is presenting an unprecedented burden on our health.
3. The revolution in lipid-lowering, heart failure, and cardiometabolic pharmacotherapies over the last decade is re-defining the evolving field of preventive cardiology.

Preventing atherosclerotic cardiovascular disease has been the focus of preventive cardiology over the years, however, the field has now evolved beyond preventing atherosclerosis to include prevention of heart failure, prevention of cardiac manifestation of metabolic diseases, and obesity management. Newer and innovative tools can include biomarkers (such cardiac enzymes and lipid sub-particles), genetics, risk calculators, and noninvasive subclinical atherosclerosis imaging.  These tools can help clinicians identify asymptomatic patients who are at high risk for cardiovascular disease, which enables providers to objectively match the intensity of preventive interventions to the patient’s risk to maximize the anticipated benefit and minimize the potential for overtreatment in a context of finite resources. Prevention also focuses on improving health in community settings at large to decrease the socioeconomic burden of heart disease.

The wide adoption of preventive cardiology as a subspecialty has the potential to make a tremendous positive impact at the individual, healthcare and community levels.