Person—dyslipidaemia treatment with anti-lipid medication indicator (current), code N

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# Person—dyslipidaemia treatment with anti-lipid medication indicator (current), code N

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| Identifying and definitional attributes | |
| Metadata item type: | Data Element |
| Short name: | Dyslipidaemia treatment indicator |
| METEOR identifier: | 302440 |
| Registration status: | [Health!](https://meteor-uat.aihw.gov.au/RegistrationAuthority/14), Standard 21/09/2005 |
| Definition: | Whether a person is being currently treated for dyslipidaemia using anti-lipid medication, as represented by a code. |
| Data Element Concept: | [Person—dyslipidaemia treatment with anti-lipid medication indicator](https://meteor-uat.aihw.gov.au/content/304485) |
| Value Domain: | [Yes/no/not stated/inadequately described code N](https://meteor-uat.aihw.gov.au/content/301747) |

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| Value domain attributes | | |
| Representational attributes | | |
| Representation class: | Code | |
| Data type: | Number | |
| Format: | N | |
| Maximum character length: | 1 | |
|  | **Value** | **Meaning** |
| Permissible values: | 1 | Yes |
|  | 2 | No |
| Supplementary values: | 9 | Not stated/inadequately described |

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| Collection and usage attributes | |
| Guide for use: | CODE 9    Not stated/inadequately described  This code is not for use in primary data collections. |



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| Data element attributes | |
| Collection and usage attributes | |
| Guide for use: | CODE 1   Yes Record if a person is being treated for dyslipidaemia using anti-lipid medication.  CODE 2   No Record if a person is not being treated for dyslipidaemia using anti-lipid medication. |
| Collection methods: | Ask the individual if he/she is currently treated with anti-lipid medication. Alternatively obtain the relevant information from appropriate documentation. |
| Source and reference attributes | |
| Submitting organisation: | National diabetes data working group |
| Origin: | National Diabetes Outcomes Quality Review Initiative (NDOQRIN) data dictionary. |
| Relational attributes | |
| Related metadata references: | Supersedes [Person—dyslipidaemia treatment status (anti-lipid medication), code N](https://meteor-uat.aihw.gov.au/content/270238)  [Health!](https://meteor-uat.aihw.gov.au/RegistrationAuthority/14), Superseded 21/09/2005 |
| Implementation in Data Set Specifications: | [Acute coronary syndrome (clinical) DSS](https://meteor-uat.aihw.gov.au/content/372930)  [Health!](https://meteor-uat.aihw.gov.au/RegistrationAuthority/14), Superseded 01/09/2012  [Acute coronary syndrome (clinical) DSS](https://meteor-uat.aihw.gov.au/content/482119)  [Health!](https://meteor-uat.aihw.gov.au/RegistrationAuthority/14), Superseded 02/05/2013  [Acute coronary syndrome (clinical) NBPDS 2013-](https://meteor-uat.aihw.gov.au/content/523140)  [Health!](https://meteor-uat.aihw.gov.au/RegistrationAuthority/14), Standard 02/05/2013  ***Implementation start date:*** 01/07/2013  [Diabetes (clinical) NBPDS](https://meteor-uat.aihw.gov.au/content/304865)  [Health!](https://meteor-uat.aihw.gov.au/RegistrationAuthority/14), Standard 21/09/2005  ***DSS specific information:***  Dyslipidaemia is associated with many health problems including diabetes and hypertension. It is often related to overweight and obesity. Usually caused by inappropriate diet and sedentary lifestyle, dyslipidaemia has been reaching epidemic proportions. Active lifestyle and low calorie diets are the best way of prevention, however sometimes for the treatment of dyslipidaemia the use of pharmacotherapy is required. Abnormal levels of blood lipids are associated with increased risk of developing CHD especially in diabetic patients.  The risk of coronary and other macrovascular disorders is 2-5 times higher in people with diabetes than in non-diabetic subjects and increases in parallel with the degree of dyslipidaemia. Diabetes mellitus greatly modifies the significance of lipoprotein levels, particularly when associated with smoking, hypertension and family history of CVD. Poor metabolic control of diabetes seems to have impact on abnormal lipoprotein level. Primary dyslipidaemia, due to genetic and environmental (especially dietary) factors, is diagnosed if secondary causes have been excluded (hypothyroidism, nephrotic syndrome, cholestasis, anorexia nervosa, diabetes mellitus Type 2, renal impairment). |