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## PATIENT INFORMATION ON Q-RISK SCORE & STATINS

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### Why have I been sent this leaflet?

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You have recently had a blood test to measure your cholesterol. The amount of cholesterol in your blood contributes to your risk of developing cardiovascular disease (CVD), which includes heart attack, stroke, and circulation problems.

However, cholesterol is only one risk factor for CVD. Using your medical records, we calculate your 10-year risk of having a stroke or heart attack using the **QRISK3 tool**. This score helps estimate your overall risk and guide decisions about reducing it.

**How is my QRISK3 score calculated?** The QRISK3 tool takes into account multiple factors, including:

- **Unchangeable factors:** Age, sex, ethnicity, family history of heart disease.
- **Health conditions:** High blood pressure, diabetes, rheumatoid arthritis, kidney disease.
- **Lifestyle factors:** Smoking, alcohol intake, body mass index (BMI), and cholesterol levels.

A higher score means a greater chance of developing CVD within 10 years.

### What does 'risk' mean?

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Risk refers to the chance of something happening. Your risk of developing CVD is never zero, and it increases with age.

Your QRISK3 score places you in one of the following categories:

- **Low risk** – Less than 10%: Fewer than 1 in 10 chance of stroke or heart attack in 10 years.
- **Moderate risk** – 10-20%: Between 1 in 10 to 2 in 10 chance.
- **High risk** – More than 20%: At least 2 in 10 chance.

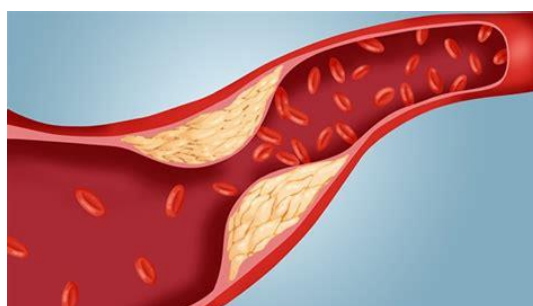
## How can I lower my risk?

NICE guidelines recommend that **anyone with a QRISK3 score over 10% should be offered support to lower their risk**. This includes **lifestyle changes** and, where appropriate, medication such as **statins**.

### Lifestyle changes to reduce your risk:

- **Stop smoking** – Get support from your GP or pharmacy. While vaping may help some people quit smoking, it is not risk-free.
- **Eat a heart-healthy diet** – Prioritize **whole grains, vegetables, fruit, nuts, and oily fish**. Reduce processed foods, added sugar, and saturated fats.
- **Increase fibre intake** – Aim for **30g of fibre per day** from sources like oats, beans, lentils, whole grains, and vegetables.
- **Limit alcohol** – Stay **below 14 units per week** (equivalent to 6 pints of beer or 1.5 bottles of wine).
- **Maintain a healthy weight** – Aim for a **BMI of 20-25**.
- **Exercise regularly** – At least **150 minutes of moderate-intensity exercise per week** (e.g., brisk walking, cycling).
- **Control blood pressure** – If high, medication may be required.

If you focus on lifestyle changes, we recommend **reassessing your cholesterol and QRISK3 score in 6 months**.



## What are Statins?

Statins are medications that reduce cholesterol and **lower your risk of heart attack and stroke by up to 25%**.

**How do statins work?** Statins reduce the production of cholesterol in the liver, helping to lower LDL ("bad" cholesterol) and slightly raise HDL ("good" cholesterol). Over time, this reduces the risk of fatty deposits in the arteries.

**How much do statins reduce risk?** For every **100 people** taking a statin for 10 years:

- **2-3 will avoid a heart attack or stroke** who otherwise would have had one.
- **The majority will have lower cholesterol without noticeable side effects.**

## Commonly prescribed statin:

- **Atorvastatin 20mg daily** (first-line choice per NICE guidelines).

Most people tolerate statins well. **Common side effects** (fewer than 1 in 10 people) include mild muscle aches or digestive issues, which usually improve. **Serious side effects** (e.g., severe muscle pain) are rare.

For more information: [NHS statins page](#)

If you start a statin, we will **recheck your cholesterol and liver function in 3 months** to ensure it is working and well-tolerated.

## What should I do next?

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If your QRISK3 is > 10%, we recommend considering statins and/or discussing with your GP or nurse.

- **Submit a triage form** via our website – This is the quickest way to request a discussion about your results. [Visit our website to access the form](#)
- **Call the practice** if you need further assistance.
- If you prefer to focus on lifestyle changes first, we can **review your risk in 6 months**.

If you decline statins at this time, that is absolutely fine. You may be offered them again at your next **annual review blood test**, particularly if your cholesterol remains raised or your QRISK3 score increases. If you have had your blood test as part of an **NHS Health Check**, you can also discuss statin treatment with the nurse at your scheduled follow-up appointment.

## Further information and support

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- **British Heart Foundation:** [www.bhf.org.uk/informationsupport/heart-matters-magazine/medical/statins](http://www.bhf.org.uk/informationsupport/heart-matters-magazine/medical/statins)
- **NHS Choices:** [www.nhs.uk/conditions/](http://www.nhs.uk/conditions/)
- **Patient UK:** [www.patient.co.uk](http://www.patient.co.uk)
- **Local pharmacy** – Pharmacists can provide advice on lifestyle changes and medications.

## Need help?

- **Submit a triage form via our website** – This is the quickest way to contact us. [Visit our website to access the form.](#)
- **Call the practice:** **01285 653184** or **01285 653122**
- **Urgent medical advice:** **NHS 111** (24 hours)
- **Emergency:** **Call 999**