



## 161 - LIPID-LOWERING TREATMENT IN PATIENTS WITH DIABETES IN SPAIN

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### Resumen

**Background/Objectives:** Adults with type 2 diabetes mellitus (T2DM) are at high cardiovascular risk, and lipid-lowering therapy is recommended to reduce LDL-cholesterol (LDL-C). We aimed to describe temporal trends (2018-2023) in lipid-lowering prescriptions and LDL-C target attainment (< 100 and < 70 mg/dL) among adults with T2DM in Spain, overall and by sex.

**Methods:** We conducted a repeated cross-sectional analysis using the Spanish Ministry of Health statistical portal linked to the BDCAP (Primary Care Clinical Database), a probability sample of primary-care electronic health records calibrated with weights to produce nationally representative estimates. Adults aged 40-75 years with T2DM in the public healthcare system were included (2018-2023). Annual indicators were: (i) proportion receiving any lipid-lowering therapy; (ii) LDL-C control (< 100 and < 70 mg/dL); and (iii) treatment type among treated patients (monotherapy vs. combination therapy), stratified by sex.

**Results:** The proportion of patients receiving lipid-lowering therapy increased steadily, reaching 63.0% in 2023 (64.1% men; 61.7% women). Attainment of LDL-C < 100 mg/dL remained broadly stable (67.3% overall in 2023; 71.6% men; 62.3% women). In contrast, LDL-C < 70 mg/dL improved from 25.5% (2018) to 30.8% (2023), with persistent sex differences (36.1% men vs. 24.6% women in 2023). Combination therapy increased markedly (52 per 1,000 assigned in 2018 to 123 per 1,000 in 2023), while monotherapy remained the predominant strategy.

**Conclusions/Recommendations:** Lipid-lowering treatment coverage in Spanish adults with T2DM increased between 2018 and 2023, alongside growing use of combination therapy. LDL-C control at < 70 mg/dL improved, whereas < 100 mg/dL remained stable. Persistent sex disparities highlight opportunities for therapeutic intensification and equity-focused strategies in primary care.

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