Protégé questions

Tuesday, October 30, 2012

11:42 AM

* 1. **Re: Providing recommendations when patient has met target**

**Background**: We need to model Lipid CHD goal as an N\_ary because

For Veterans with Diabetes or Ischemic Heart Disease, lipid control will be deemed appropriate if either of the following criteria are met:

* 1. The patient is receiving at least a moderate dose of a statin drug, as defined as :
     + atorvastatin  10 mg/day or higher
     + fluvastatin 80 mg/day or higher
     + lovastatin 40 mg/day or higher
     + pravastatin 40 mg/day or higher
     + rosuvastatin 5 mg/day or higher
     + simvastatin 20 mg/day or higher

or

* 1. LDL-cholesterol (LDL-C) value is 100 or less

**Question**: how to give advice when patient has met target, as described above.

Example: Patient characteristics

* + Presence of CHD equivalent
  + Taking moderate dose statin e.g.atorvastatin 10 mg/day
  + LDL >=100, e.g. 200

We would like to provide be able to provide some -optional- recommendations, e.g. increase dose even if patient has met target. How can this be modeled?

* + **Re: Bad drug partner issue**

Background: We made "statin metabolized by cyp3a4" and "statin not metabolized by cyp3a4" as bad drug partners of each other because, if a patient

* + is on the max dose of "statin metabolized by cyp3a4", and
  + Has high LDL (e.g. 200)
  + And we want to add a drug

We don't want to add "statin not metabolized by cyp3a4" when the patient is already taking a statin.

But there is a problem:

If a patient

* + Is already on a "statin metabolized by cyp3a4" but not on the maximum dose
  + Then starts taking a drug that is a cyp3a4 inhibitor, e.g. saquinavir

We would like to then switch to another statin. That is, not increase dose of "statin metabolized by cyp3a4", and add drug that is a "statin not metabolized by cyp3a4". In this case, these are not bad drug partners.

Related issue: "Usage of cyp3a4 inhibitor" is modeled as a relative contraindication currently (this may change)

* + **Re: Abnormal CPK when sex of patient not known**

Background: Normal CPK levels are dependent upon patient sex; abnormal CPK levels (10\*upperLImitofNormal) therefore is dependent upon patient sex.

Question: what happens if patient sex is not known/not entered?