

SPEAKER: The real problem with guidelines is different. The real problem with guidelines is how to make it possible for people to implement what we have learned in the last few years from randomized clinical trials.

As I mentioned before, the European guidelines are in a trust that lowering LDL is a beneficial thing, and LDL are causal. So those two pillars are the ones that drive the guideline. So we can change numbers, but we'll never, ever change the approach if we go through this way.

So definitely, the challenge will be how to embed into the current guidelines the new information-- but that occurs always-- but at the same time how to make this doable by a physician because a theoretical guideline which only reflects the theory and what has been learned by the randomized clinical trials will never, ever fly if you don't provide some practical approaches.