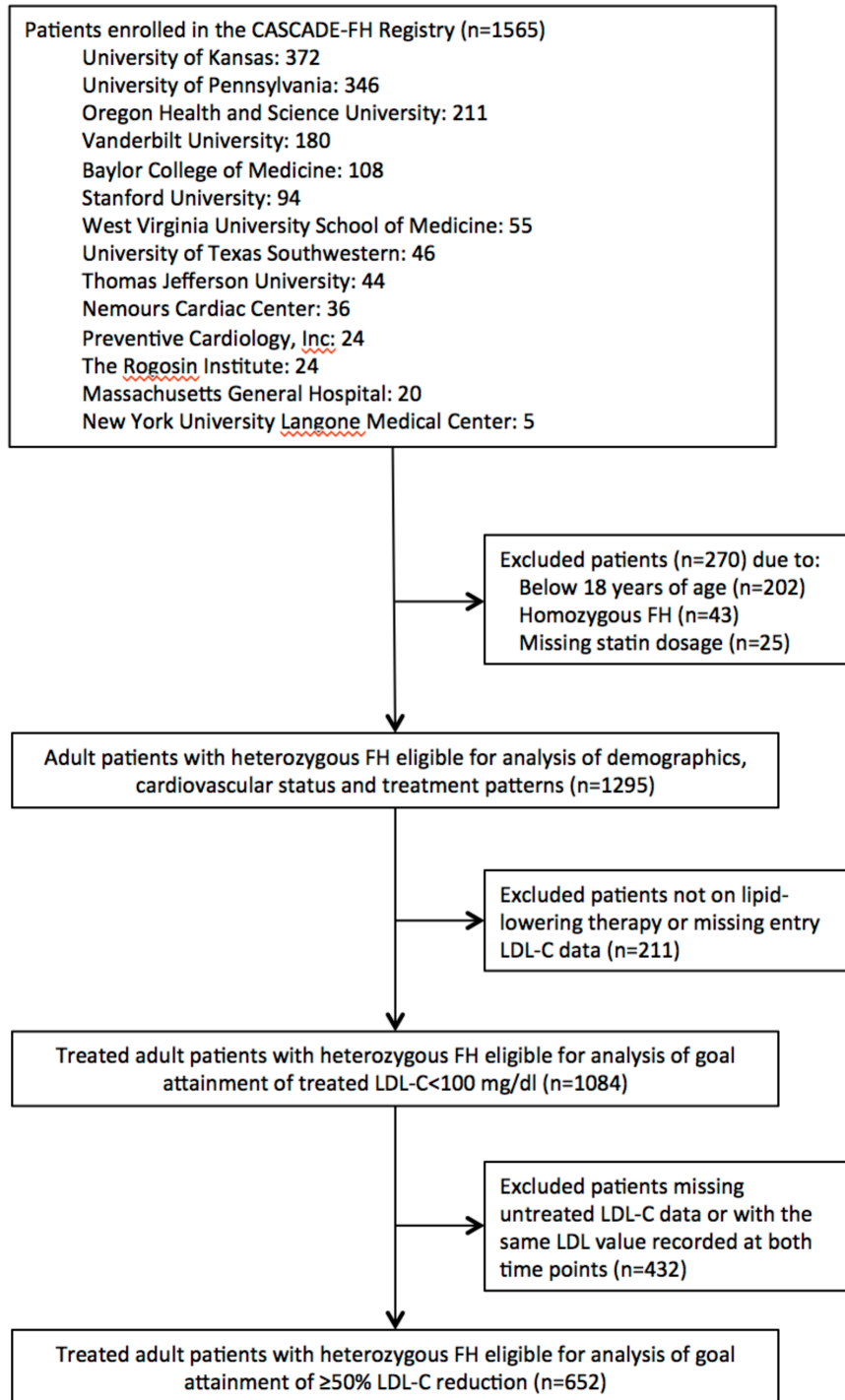


## SUPPLEMENTAL MATERIAL

**Supplementary Figure: Flow chart for analysis of patients enrolled in the CASCADE-FH Registry.**



**Supplementary Table 1: Demographics, clinical, and lipid/lipoprotein characteristics of adults with heterozygous familial hypercholesterolemia enrolled in the CASCADE-FH Registry.**

	<b>All subjects</b>
<b>Demographics</b>	
Age at enrollment, years, median (IQR)	57 (43-66)
Female, %	59.3
Ethnicity, %	
White	80.0
Black	7.0
Hispanic	2.9
Other	10.2
<b>FH history</b>	
Age at FH diagnosis, years, median (IQR), n=1232	47 (31-59)
FH diagnosis before age 30 years, %	22.0
FH diagnosis before age 18 years, %	9.4
Age at initiation of LDL-lowering therapy, years, median (IQR), n=677	39 (25-50)
LDL-lowering therapy before age 30 years, %	16.6
LDL-lowering therapy before age 18 years, %	6.4
Family history of premature MI, %, n=938	45.0
<b>Lipids, mg/dl, median (IQR)</b>	
Untreated	
Total cholesterol, n=949	329 (297-389)
LDL-C, n=888	239 (211-294)
Treated	
Total cholesterol, n=1097	215 (178-268)
LDL-C, n=1084	134 (100-183)
Triglycerides, n=1092	113 (78-160)
HDL-C, n=1096	52 (42-64)
Entry	
Total cholesterol, n=1292	224 (182-281)
LDL-C, mg/dl, n=1278	141 (103-197)
Triglycerides, n=1286	113 (79-164)
HDL-C, n=1291	52 (42-64)
Cholesterol-years score, mg/dl*years, n=862	27121 (19812-35178)
<b>Cardiovascular risk factors</b>	
Number of additional modifiable cardiovascular risk factors, %*	
0	38.8
1	37.8
2	16.1
3	6.6
4	0.8
Diabetes, %, n=1280	13.0
Body-mass index among diabetics, kg/m <sup>2</sup> , median (IQR)	30.4 (27.6-35.5)
Current smoker, %, n=1272	6.9
Hypertension, %, n=1283	42.8
Low HDL-C (<40 mg/dl in men, <50 mg/dl in women), %, n=1285	31.0
Obesity (body-mass index>30 kg/m <sup>2</sup> ), %, n=1223	31.5
Body-mass index, kg/m <sup>2</sup> , median (IQR), n=1223	27.3 (24.2-31.0)
<b>Cardiovascular disease</b>	

ASCVD, %, n=1273 <sup>†</sup>	37.9
Age at onset, years, median (IQR)	52 (42-61)
CHD, overall cohort, %	35.9
Age at onset, years, median (IQR)	51 (42-61)
CHD, men, %	46.6
Age at onset, years, median (IQR)	47 (40-56)
CHD with onset <30 years of age, men, %	2.3
CHD, women, %	28.9
Age at onset, years, median (IQR)	55 (47-63)
CHD with onset <30 years of age, women, %	0.1
Stroke or TIA, %, n=1282	4.8
Aortic valve disease, %, n=1284	3.0

Sample size for calculation of prevalence rates and medians is 1295 unless otherwise noted.

\* Additional modifiable cardiovascular risk factors defined as diabetes, current smoker, hypertension, and low HDL-C.

† ASCVD includes any history of CHD, stroke, TIA, peripheral artery disease.

**Supplementary Table 2: Prevalence of prevalent coronary heart disease at baseline by age groups.**

<b>Age</b>	<b>N</b>	<b>CHD, n (%)</b>
<30	140	0 (0.0%)
30-39	120	24 (20.0%)
40-49	191	52 (27.2%)
50-59	292	99 (33.9%)
60-69	332	170 (51.2%)
70-79	179	91 (50.8%)
≥80	41	29 (70.7%)
All	1295	465 (35.9%)

**Supplementary Table 3: Overview of studies in the US reporting characteristics of ≥200 adults with heterozygous familial hypercholesterolemia.**

Reference	CASCADE-FH 2015	Stone 1974 <sup>1</sup>	Hopkins 2001 <sup>2</sup>	Elis 2011 <sup>3</sup>
<b>Cohort</b>	<ul style="list-style-type: none"> <li>• n=1295</li> <li>• 10 lipid centers</li> <li>• Clinical and/or genetic diagnosis of heFH*</li> </ul>	<ul style="list-style-type: none"> <li>• N=284 heFH, 5 hoFH</li> <li>• 1 lipid center</li> <li>• Clinical diagnosis of heFH/hoFH</li> </ul>	<ul style="list-style-type: none"> <li>• N=262</li> <li>• MEDPED registry</li> <li>• Clinical diagnosis of heFH (MEDPED)</li> </ul>	<ul style="list-style-type: none"> <li>• N=327</li> <li>• 1 lipid center</li> <li>• Clinical diagnosis of heFH (SB)</li> </ul>
<b>Demographics</b>				
Age, years	57	40	50	45
Female, %	59	47	57	40
<b>FH history</b>				
Confirmed FH mutation	3	-	-	-
Age at FH diagnosis, years	47	-	-	38
Age at initiation of therapy, years	39	-	-	-
<b>Lipids</b>				
Untreated lipid values or, when unavailable, lipid values at initial clinic visit or at time of inclusion into registry <sup>†</sup>				
Total cholesterol, mg/dl	329	402	-	340
LDL-C, mg/dl	239	-	224	256
Treated lipid values or, when unavailable, most recent lipids <sup>‡</sup>				
Total cholesterol, mg/dl	215	-	-	195
LDL-C, mg/dl	134	-	172	116
LDL-C<100 mg/dl, %	25	-	-	30
≥50% LDL-C reduction, %	41	-	-	-
Statin, %	75	-	44	98
High-intensity statin, %	42	-	-	-
Statin + ezetimibe, %	34	-	-	44
<b>Cardiovascular risk factors</b>				
Diabetes, %	13	-	3	-
Current/ever smoker, %	7/31	-/44	-/16	10/28
Hypertension, %	43	-	16	-
Body-mass index, kg/m <sup>2</sup>	27	24	28	-
<b>Cardiovascular disease</b>				
CVD or CHD, %	CHD 36	CHD 30	CHD 26	CVD 35
Age at onset, years	M 47, W 55	M 42, W 62	M 44, W 50	54

\* Diagnosis using DLCN, MEDPED, SB, or other clinical criteria and/or genetic testing.

† CASCADE-FH 2015 highest untreated; Stone 1974 at time of inclusion into registry; Hopkins 2001 not on drug(s); Elis 2011 initial untreated; Allard 2014 first clinic visit; Benn 2012 off-treatment; Beliard 2014 at diagnosis; Harada-Shiba 2012 at time of inclusion into registry; Pijlman 2010 baseline; Mundal 2014 at time of inclusion into registry; Mata 2011 at time of inclusion into registry; Hadfield 2008 pre-treatment.

‡ CASCADE-FH 2015 most recent treated; Hopkins 2001 on drug(s); Elis 2011 most recent treated; Benn 2012 on-treatment; Beliard 2014 under medical care; Pijlman 2010 recent; Mundal 2014 during lipid-lowering treatment; Hadfield 2008 post-treatment.

Abbreviations: CHD, coronary heart disease; CVD, cardiovascular disease; DLCN, Dutch Lipid Clinic Network; heFH, heterozygous familial hypercholesterolemia; hoFH, homozygous familial hypercholesterolemia; LDL-C, low-density lipoprotein cholesterol; MEDPED, Make Early Diagnoses - Prevent Early Deaths; SB, Simon Broome

**Supplementary Table 4: Overview of contemporary registries worldwide reporting characteristics of ≥200 adults with heterozygous FH.**

Country	US	Canada	Denmark	France	Japan
<b>Reference</b>	CASCADE-FH 2015	Allard 2014 <sup>4</sup>	Benn 2012 <sup>5</sup>	Beliard 2014 <sup>6</sup>	Harada-Shiba 2012 <sup>7</sup>
<b>Cohort</b>	<ul style="list-style-type: none"> <li>• n=1295</li> <li>• 10 lipid centers</li> <li>• Clinical and/or genetic diagnosis of heFH*</li> </ul>	<ul style="list-style-type: none"> <li>• N=409</li> <li>• 1 lipid center</li> <li>• Clinical diagnosis of heFH (DLCN, definite)</li> </ul>	<ul style="list-style-type: none"> <li>• N=502</li> <li>• Population registry</li> <li>• Clinical diagnosis of FH (DLCN, probable or definite)</li> </ul>	<ul style="list-style-type: none"> <li>• N=1669</li> <li>• 5 lipid centers</li> <li>• Clinical and/or genetic diagnosis of FH (DLCN, SB)</li> </ul>	<ul style="list-style-type: none"> <li>• N=419</li> <li>• 6 lipid centers</li> <li>• Clinical and/or genetic diagnosis of heFH (Japanese)</li> </ul>
<b>Demographics</b>					
Age, years	57	61	59	46	53
Female, %	59	55	59	51	57
<b>FH history</b>					
Confirmed FH mutation	3	-	20	39	53
Xanthoma documented	19	-	-	46	64
Age at FH diagnosis, years	47	-	-	-	-
Age at initiation of therapy	39	-	-	-	-
<b>Lipids</b>					
Untreated lipid values or, when unavailable, lipid values at initial clinic visit or at time of inclusion into registry <sup>†</sup>					
Total cholesterol, mg/dl	329	343	333	389	339
LDL-C, mg/dl	239	262	251		257
Treated lipid values or, when unavailable, most recent lipid values <sup>‡</sup>					
Total cholesterol, mg/dl	215	-	271	270	-
LDL-C, mg/dl	134	-	182	194	-
LDL-C<100 mg/dl, %	25	-	-	10	-
≥50% LDL-C reduction, %	41	-	-	-	-
Statin, %	75	-	-	79	-
High-intensity statin, %	42	-	-	-	-
Statin + ezetimibe, %	34	-	-	35	-
<b>Cardiovascular risk factors</b>					
Diabetes, %	13	6	5	4	-
Current/ever smoker, %	7/31	-/43	27/-	19/-	-
Hypertension, %	43	23	76	11	-
Body-mass index, kg/m <sup>2</sup>	27	26	27	25	-
<b>Cardiovascular disease</b>					
CVD or CHD, %	CHD 36	CVD 27	CHD 33	CVD 12	-
Age at onset, years	M 47, W 55	M 50, W 57	-	-	-



**Supplementary Table 4 (cont.): Overview of contemporary registries worldwide reporting characteristics of ≥200 adults with heFH.**

Country	Netherlands	Norway	Spain	UK
Reference	Pijlman 2010 <sup>8</sup>	Mundal 2014 <sup>9</sup>	Mata 2011 <sup>10</sup>	Hadfield 2008 <sup>11</sup>
Cohort	<ul style="list-style-type: none"> <li>• N=1249</li> <li>• 5 lipid centers</li> <li>• Clinical diagnosis of heFH (DLCN, probable or definite)</li> </ul>	<ul style="list-style-type: none"> <li>• N=4688</li> <li>• 1 coordinating center</li> <li>• Genetic diagnosis of heFH/hoFH</li> </ul>	<ul style="list-style-type: none"> <li>• N=1262</li> <li>• 19 lipid centers</li> <li>• Genetic diagnosis of heFH/hoFH</li> </ul>	<ul style="list-style-type: none"> <li>• N=733</li> <li>• 11 lipid centers</li> <li>• Clinical and/or genetic diagnosis of heFH (SB)</li> </ul>
<b>Demographics</b>				
Age, years	50	55	46	51
Female, %	52	52	52	55
<b>FH history</b>				
Confirmed FH mutation	54	100	100	-
Xanthoma documented	-	-	15	21
Age at FH diagnosis, years	-	-	-	-
Age at initiation of therapy	-	-	-	-
<b>Lipids</b>				
Untreated lipid values or, when unavailable, lipid values at initial clinic visit or at time of inclusion into registry <sup>†</sup>				
Total cholesterol, mg/dl	350	437	262	-
LDL-C, mg/dl	258	348	192	259
Treated lipid values or, when unavailable, most recent lipid values <sup>‡</sup>				
Total cholesterol, mg/dl	196	259	-	-
LDL-C, mg/dl	124	182	-	128
LDL-C<100 mg/dl, %	21	-	3	30 <sup>§</sup>
≥50% LDL-C reduction, %	60	-	-	64 <sup>  </sup>
Statin, %	96	-	80	89
High-intensity statin, %	34	-	13	-
Statin + ezetimibe, %	53	-	26	-
<b>Cardiovascular risk factors</b>				
Diabetes, %	2	-	3	-
Current/ever smoker, %	-/26	-	28/-	-
Hypertension, %	20	-	15	-
Body-mass index, kg/m <sup>2</sup>	25	-	27	-
<b>Cardiovascular disease</b>				
CVD or CHD, %	CVD 17	-	CVD 14	CHD 18

Age at onset, years	-	CV death M 57, W 67	48	-
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Means shown for continuous variables except for CASCADE-FH data where medians are shown.

\* Diagnosis using DLCN, MEDPED, SB, or other clinical criteria and/or genetic testing.

† CASCADE-FH 2015 highest untreated; Stone 1974 at time of inclusion into registry; Hopkins 2001 not on drug(s); Elis 2011 initial untreated; Allard 2014 first clinic visit; Benn 2012 off-treatment; Beliard 2014 at diagnosis; Harada-Shiba 2012 at time of inclusion into registry; Pijlman 2010 baseline; Mundal 2014 at time of inclusion into registry; Mata 2011 at time of inclusion into registry; Hadfield 2008 pre-treatment.

‡ CASCADE-FH 2015 most recent; Hopkins 2001 on drug(s); Elis 2011 most recent treated; Benn 2012 on-treatment; Beliard 2014 under medical care; Pijlman 2010 recent; Mundal 2014 during lipid-lowering treatment; Hadfield 2008 post-treatment.

§ Estimated from figure

|| >45% LDL-C reduction

Abbreviations: CHD, coronary heart disease; CVD, cardiovascular disease; DLCN, Dutch Lipid Clinic Network; heFH, heterozygous familial hypercholesterolemia; hoFH, homozygous familial hypercholesterolemia; LDL-C, low-density lipoprotein cholesterol; MEDPED, Make Early Diagnoses - Prevent Early Deaths; SB, Simon Broome

**Supplementary Table 5: Overview of studies with ≥200 subjects reporting factors associated with cardiovascular outcomes in adults with heterozygous familial hypercholesterolemia.**

Country	Reference	Factor	Risk ratio (95% CI)
<b>Cross-sectional studies</b>			<b>Odds ratio</b>
<b>US</b>	CASCADE-FH 2015* n=1282	Age, per 10-year increment	1.53 (1.35-1.73)
		Male	2.68 (1.91-3.78)
		Family history of premature MI	1.83 (1.25-2.70)
		Diabetes	1.66 (1.01-2.72)
		Hypertension	2.68 (1.91-3.76)
		Low HDL-C (<40 mg/dl for men, <50 mg/dl for women)	1.53 (1.09-2.14)
		Untreated total cholesterol, per 10-mg/dl increment	1.02 (1.00-1.04)
	Hopkins 2001 <sup>2†</sup> n=262	Age, per 10-year increment	2.24 (1.63-3.08)
		Male	5.64 (2.62-12.1)
		Smoking (ever)	2.71 (1.13-6.51)
Smaller LDL		2.60 (1.21-5.58)	
<b>UK</b>	Neil 2004 <sup>12</sup> n=410	White blood cell count	1.30 (1.05-1.59)
		Smoking (ever)	2.53 (1.67-3.83)
<b>Spain</b>	Alonso 2008 <sup>13‡</sup> n=811	Smoking (ever)	2.53 (1.67-3.83)
		Male	1.98 (1.09-3.56)
		Smoking (ever)	1.80 (1.03-3.16)
		Pre-treatment total cholesterol/HDL-C ratio	1.26 (1.01-1.58)
<b>Australia</b>	Chan 2015 <sup>14</sup> n=390	Age	1.05 (1.02-1.07)
		Age (years)	1.07 (1.05-1.09)
		Male	2.69 (1.54-4.69)
		Smoking (ever vs. never)	2.24 (1.29-3.87)
		Hypertension (present vs. absent)	4.99 (2.80-8.89)
		Diabetes (present vs. absent)	2.74 (1.06-7.08)
		eGFR < 60 mL/min/1.73m <sup>2</sup>	3.12 (1.18-8.27)
		LDL-cholesterol, pretreatment (mmol/L)	1.17 (1.05-1.30)
		LDL-cholesterol year score (mmol/L)	1.01 (1.00-1.01)
		Triglyceride, pretreatment (mmol/L)	1.34 (1.09-1.65)
		HDL-cholesterol, pretreatment (mmol/L)	0.32 (0.13-0.76)
Lp(a) (g/L)	2.18 (1.31-3.62)		

Cohort studies			Relative risk
<b>Netherlands</b>	Jansen 2004 <sup>15§</sup> n=1956	Male	2.82 (2.37-3.36)
		Diabetes	2.19 (1.36-3.54)
		Smoking (ever)	1.67 (1.40-1.99)
		Hypertension	1.36 (1.06-1.75)
		Low HDL-C (<35 mg/dl for men, <43 mg/dl for women)	1.37 (1.15-1.63)
		High lipoprotein(a) (>30 mg/dl)	1.50 (1.20-1.79)
<b>Canada</b>	Allard 2014 <sup>4  </sup> n=409	Male	2.4 (1.6-3.7)
		Diabetes	3.6 (2.0-6.5)
		Family history of premature CVD	1.8 (1.2-2.7)
		HDL-C at first clinic visit, per 1-mmol/l increment	0.4 (0.2-0.7)
		High lipoprotein(a) (>60 mg/dl)	1.8 (1.1-2.9)

\* Adjusted for age at enrollment, diabetes, current smoking, hypertension, pre-treatment total cholesterol, and low HDL-C.

† Adjusted for age, gender, smoking, body mass index, waist to hip ratio, hypertension, diabetes, xanthoma, plasma insulin, HDL-C, triglycerides, lipoprotein(a), homocysteine, white cell count, C-reactive protein, carotid intima-medial thickness, angiotensin-converting enzyme I/D polymorphism.

‡ Adjusted for age, gender, smoking, hypertension, body-mass index, family history of premature cardiovascular disease, lipoprotein(a), apo E genotype, type of FH mutation, LDL-C, HDL-C, triglycerides.

§ Adjusted for gender, smoking, hypertension, diabetes, body-mass index, HDL-C, triglycerides, lipoprotein(a), homocysteine.

|| Adjusted for gender, body-mass index, smoking, family history of premature cardiovascular disease, diabetes, hypertension, LDL-C, HDL-C, triglycerides, lipoprotein(a).

Abbreviations: CHD, coronary heart disease; FH, familial hypercholesterolemia; HDL, high-density lipoprotein, LDL, low-density lipoprotein; MI, myocardial infarction

**Supplementary Table 6: Overview of studies with ≥200 subjects reporting factors associated with LDL-C<100 mg/dl goal attainment in adults with heterozygous familial hypercholesterolemia.**

Country	Reference	Factor	OR (95% CI)
<b>US</b>	CASCADE-FH 2015* n=1084	Current age, per 10-year increment	1.23 (1.07-1.41)
		Family history of premature MI	1.88 (1.16-3.04)
		Untreated LDL-C, per 10-mg/dl increment	0.93 (0.90-0.96)
		High-intensity statin	4.66 (2.15-10.13)
		Low- or moderate intensity statin	2.29 (1.05-4.95)
		>1 lipid-lowering therapy	1.88 (1.25-2.83)
<b>Netherlands</b>	Pijlman 2010 <sup>8†</sup> n=1249	Cardiovascular disease	1.54 (1.05-2.25)
		Hypertension	1.49 (1.05-2.11)
		LDL-C, per 1-mmol/l increment	0.66 (0.59-0.73)
		Total cholesterol, per 1-mmol/l increment	0.70 (0.65-0.76)
<b>Spain</b>	Mata 2011 <sup>10‡</sup> n=1262	Statin + ezetimibe	2.22 (1.10-4.48)

\* Adjusted for recent LDL-C, coronary heart disease, statin use, and use of >1 LDL-lowering therapy.

† Adjusted for age and gender.

‡ Adjusted for age, gender, cardiovascular disease, cardiovascular risk factors.

Abbreviations: LDL, low-density lipoprotein; MI, myocardial infarction

## Supplementary References:

1. Stone NJ, Levy RI, Fredrickson DS, Verter J. Coronary artery disease in 116 kindred with familial type ii hyperlipoproteinemia. *Circulation*. 1974;49:476-488
2. Hopkins PN, Stephenson S, Wu LL, Riley WA, Xin Y, Hunt SC. Evaluation of coronary risk factors in patients with heterozygous familial hypercholesterolemia. *The American journal of cardiology*. 2001;87:547-553
3. Elis A, Zhou R, Stein EA. Effect of lipid-lowering treatment on natural history of heterozygous familial hypercholesterolemia in past three decades. *The American journal of cardiology*. 2011;108:223-226
4. Allard MD, Saeedi R, Yousefi M, Frohlich J. Risk stratification of patients with familial hypercholesterolemia in a multi-ethnic cohort. *Lipids in health and disease*. 2014;13:65
5. Benn M, Watts GF, Tybjaerg-Hansen A, Nordestgaard BG. Familial hypercholesterolemia in the danish general population: Prevalence, coronary artery disease, and cholesterol-lowering medication. *The Journal of clinical endocrinology and metabolism*. 2012;97:3956-3964
6. Beliard S, Carreau V, Carrie A, Giral P, Duchene E, Farnier M, et al. Improvement in ldl-cholesterol levels of patients with familial hypercholesterolemia: Can we do better? Analysis of results obtained during the past two decades in 1669 french subjects. *Atherosclerosis*. 2014;234:136-141
7. Harada-Shiba M, Arai H, Okamura T, Yokote K, Oikawa S, Nohara A, et al. Multicenter study to determine the diagnosis criteria of heterozygous familial hypercholesterolemia in japan. *Journal of atherosclerosis and thrombosis*. 2012;19:1019-1026
8. Pijlman AH, Huijgen R, Verhagen SN, Imholz BP, Liem AH, Kastelein JJ, et al. Evaluation of cholesterol lowering treatment of patients with familial hypercholesterolemia: A large cross-sectional study in the netherlands. *Atherosclerosis*. 2010;209:189-194
9. Mundal L, Sarancic M, Ose L, Iversen PO, Borgan JK, Veierod MB, Leren TP, Retterstol K. Mortality among patients with familial hypercholesterolemia: A registry-based study in norway, 1992-2010. *Journal of the American Heart Association*. 2014;3:e001236
10. Mata N, Alonso R, Badimon L, Padro T, Fuentes F, Muniz O, Perez-Jimenez F, Lopez-Miranda J, Diaz JL, Vidal JL, Barba A, Piedecausa M, Sanchez JF, Irigoyen L, Guallar E, Ordovas JM, Mata P. Clinical characteristics and evaluation of ldl-cholesterol treatment of the spanish familial hypercholesterolemia longitudinal cohort study (safeheart). *Lipids in health and disease*. 2011;10:94
11. Hadfield SG, Horara S, Starr BJ, Yazdgerdi S, Bhatnagar D, Cramb R, Egan S, Everdell R, Ferns G, Jones A, Marenah CB, Marples J, Prinsloo P, Sneyd A, Stewart MF, Sandle L, Wang T, Watson MS, Humphries SE. Are patients with familial hypercholesterolaemia well managed in lipid clinics? An audit of eleven clinics from the department of health familial hypercholesterolaemia cascade testing project. *Annals of clinical biochemistry*. 2008;45:199-205
12. Neil HA, Seagroatt V, Betteridge DJ, Cooper MP, Durrington PN, Miller JP, Seed M, Naoumova RP, Thompson GR, Huxley R, Humphries SE. Established and emerging coronary risk factors in patients with heterozygous familial hypercholesterolaemia. *Heart*. 2004;90:1431-1437
13. Alonso R, Mata N, Castillo S, Fuentes F, Saenz P, Muniz O, Galiana J, Figueras R, Diaz JL, Gomez-Enterria P, Mauri M, Piedecausa M, Irigoyen L, Aguado R, Mata P, Spanish Familial Hypercholesterolaemia G. Cardiovascular disease in familial hypercholesterolaemia: Influence of low-density lipoprotein receptor mutation type and classic risk factors. *Atherosclerosis*. 2008;200:315-321

14. Chan DC, Ping J, Hooper AJ, Burnett JR, Bell DA, Bates TR et al. Elevated lipoprotein (a), hypertension and renal insufficiency as predictors of coronary artery disease in patients with genetically confirmed heterozygous familial hypercholesterolemia. *International J. of Cardiology*. 2015;201:633-638.
15. Jansen AC, van Aalst-Cohen ES, Tanck MW, Trip MD, Lansberg PJ, Liem AH, et al. The contribution of classical risk factors to cardiovascular disease in familial hypercholesterolaemia: Data in 2400 patients. *Journal of internal medicine*. 2004;256:482-490