

Lipoprotein(a): What it Means for Your Heart Health

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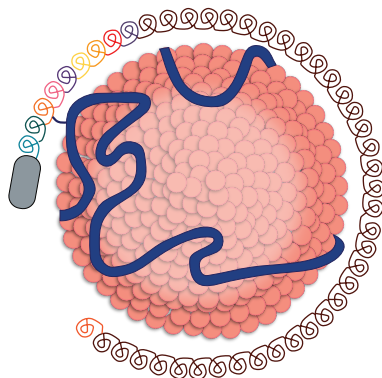
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01 Cholesterol

Cholesterol is a waxy, fat-like substance found in every cell of your body. Your body needs some cholesterol to function, but high cholesterol can lead to heart health problems like heart attack and stroke.

When people talk about high cholesterol, they're usually referring to a type of cholesterol particle called LDL (low-density lipoprotein), sometimes called "bad" cholesterol. But there is another type of cholesterol particle you need to know about. It's called Lipoprotein(a), or Lp(a).¹

02 What Is Lp(a)?



Structure of Lp(a)^{2,3}

Lipoprotein(a), written as **Lp(a)** for short and said as "**L-P-little-a**", is a type of cholesterol particle in your blood. Your body produces it based on your genes, which means the amount of Lp(a) in your blood is mostly something you are born with. It does not change much with diet or exercise.^{2,4-6}

About **1 in 5 people** has high Lp(a), but many do not know it because Lp(a) is not included in a standard cholesterol test. Your doctor can order a simple blood test to check your Lp(a) level.⁵

Lp(a) is different from LDL (bad) cholesterol.
You can have normal LDL and still have high Lp(a).⁷

03 Why Does Lp(a) Matter?

When Lp(a) is high, it can harm your heart and blood vessels in 3 ways^{4,8}:



Builds up plaque faster

Plaque is a waxy substance that narrows your arteries. High Lp(a) speeds this up.



Causes more swelling inside blood vessels.

This swelling (called inflammation) damages artery walls over time.



Makes blood clots more likely

Blood clots can block an artery and cause a heart attack or stroke.

Because of these effects, people with high Lp(a) have a higher chance of heart disease, even if their other cholesterol numbers look good.

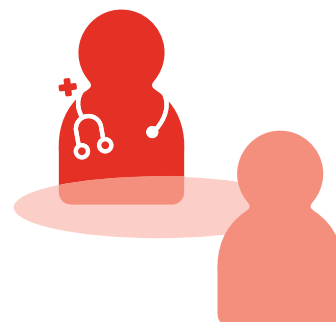
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People with high Lp(a), have up to 4 times the risk of a first heart attack compared to those people with low Lp(a).⁹

04 Benefits of Lp(a) Testing

Heart health guidelines now recommend that **every adult should have their Lp(a) checked at least once in their lifetime**. The test is a simple blood draw and can be added to your regular cholesterol test, just ask your doctor.¹⁰

You only need to be tested once because your Lp(a) level stays about the same throughout your life. It does not fluctuate like other cholesterol numbers.⁶



05 Understanding Your Results

Your Lp(a) result is reported in nmol/L (a unit of measurement). Here is what the numbers mean^{11,12}:

Lower Risk

Below 75 nmol/L

Moderate Risk

75-<125 nmol/L

Higher Risk

125 nmol/L or above

Your doctor will explain what your number means for you.

A Note About Units

Some labs report Lp(a) in mg/dL instead of nmol/L. These are 2 different scales, and the numbers are not the same. For example, 50 mg/dL is not equal to 50 nmol/L.

There is no simple way to convert between the 2 units because the conversion depends on your Lp(a) particle size, which varies from person to person.

If your result is in mg/dL, ask your doctor what your number means or whether the test can be repeated using the nmol/L scale. Guidelines recommend using nmol/L for the most accurate reading.^{12,13}

06 What Can I Do If My Lp(a) Is High?

Currently, there is no medicine that directly lowers Lp(a). However, there is still a lot that you and your doctor can do. Studies show that people with high Lp(a) who keep their other risk factors under control have significantly fewer heart problems.^{2,6}



Eat well¹⁴⁻¹⁶

Choose fruits, vegetables, whole grains, lean proteins, and healthy fats. Limit salt, sugar, and processed foods.



Stay active¹⁴⁻¹⁶

Aim for at least 150 minutes of moderate activity each week, such as brisk walking, biking, or swimming.



Manage your weight^{14,15}

Even a small amount of weight loss can help reduce your overall heart risk.



Control blood pressure^{14,15}

Work with your doctor to keep your blood pressure within a healthy range.



Manage blood glucose^{14,15}

Monitor your blood glucose regularly and maintain optimal levels to support cardiovascular health.



Lower LDL cholesterol^{6,14,15,17}

Your doctor may set a tighter LDL goal and may prescribe a statin or other medicine.



Do not smoke¹⁴⁻¹⁶

If you smoke, ask your care team for help quitting. Smoking increases your risk of heart disease.



Get enough sleep^{14,15}

Aim for 7-9 hours of sleep each night. Poor sleep increases your risk of heart disease.

07 Should My Family Get Tested?

Because Lp(a) is passed down through families, your close relatives (parents, brothers, sisters, and children) should also have their Lp(a) checked. Let them know about your result so they can talk to their own doctor.⁴



08 Looking Ahead

Researchers are working on new medicines that are designed to lower Lp(a) directly. These medicines are being studied in clinical trials currently. Ask your doctor if you want to learn more about ongoing research.^{2,6}

09 Questions to Ask Your Doctor

01 What is my Lp(a) number, and what does it mean for me?

02 Do I need to change any of my medicines?

03 What is my LDL cholesterol goal now that we know my Lp(a)?

04 Should I see a heart specialist?

05 Should my family members get tested?

06 Are there any clinical trials I should know about?

My Notes

This handout is for educational purposes only. It does not replace medical advice from your doctor or care team. Always talk to your doctor before making changes to your health plan.
Content aligned with current clinical guidelines including the 2024 NLA Scientific Statement and 2026 AHA/ACC Guideline on the Management of Cholesterol.

Glossary

Apo(a)	Apolipoprotein(a)	LDL	Low-density lipoprotein
ApoB	Apolipoprotein B	Lp(a)	Lipoprotein(a)

References

01

ASA. Cholesterol and Stroke. <https://www.stroke.org/en/about-stroke/stroke-risk-factors/cholesterol-and-stroke>. (Accessed July 24, 2026).

02

American Heart Association. Clinicians' guide to frequently asked questions about lipoprotein(a) testing. <https://www.heart.org/en/-/media/Files/Professional/Quality-Improvement/Lpa/Clinicians-Guide-LPaFAQFINAL.pdf> (Accessed February 20, 2026).

03

Nordestgaard BG, Langsted A. Lipoprotein(a) and cardiovascular disease. *Lancet*. 2024;404(10459):1255-1264.

04

CDC. About lipoprotein (a). <https://www.cdc.gov/heart-disease-family-history/about/about-lipoprotein-a.html> (Accessed April 23, 2026).

05

AHA. Lipoprotein(a). <https://www.heart.org/en/health-topics/cholesterol/genetic-conditions/lipoprotein-a> (Accessed April 24, 2026).

06

Harvard Health Publishing. Lipoprotein(a): an update on testing and treatment. New therapies for elevated Lp(a)—an inherited cause of early heart disease—are in the pipeline. <https://www.health.harvard.edu/heart-health/lipoproteina-an-update-on-testing-and-treatment> (Accessed April 24, 2026).

07

AHA. Lipoprotein(a): myths vs. facts. <https://www.heart.org/en/-/media/Files/Health-Topics/Cholesterol/Lpa-Myths.pdf> (Accessed April 24, 2026).

08

Reyes-Soffer G, Ginsberg HN, Berglund L, et al. Lipoprotein(a): a genetically determined, causal, and prevalent risk factor for atherosclerotic cardiovascular disease: a scientific statement from the American Heart Association. *Arterioscler Thromb Vasc Biol*. 2022;42(1):e48-e60.

09

Blumenthal RS, Morris PB, Gaudino M, et al. 2026 ACC/AHA/AACVPR/ABC/ACPM/ADA/AGS/APhA/ASPC/NLA/PCNA Guideline on the management of dyslipidemia: a report of the American College of Cardiology/American Heart Association Joint Committee on clinical practice guidelines. *J Am Coll Cardiol*. 2026;87(19):2624-2757.

10

AHA. Understanding the Lp(a) test. https://www.heart.org/en/-/media/Files/Health-Topics/Cholesterol/Lpa-Test.pdf?sc_lang=en (Accessed April 24, 2026).

11

Koschinsky ML, Bajaj A, Boffa MB, et al. A focused update to the 2019 NLA scientific statement on use of lipoprotein(a) in clinical practice. *J Clin Lipidol*. 2024;18(3):e308-e319.

12

Clinical Pathology Laboratories. Lipoprotein(a) reporting units change. <https://www.cpllabs.com/clinicians/client-communications/lruc/> (Accessed April 24, 2026).

13

ACC. An update on lipoprotein(a): the latest on testing, treatment, and guideline recommendations. <https://www.acc.org/Latest-in-Cardiology/Articles/2023/09/19/10/54/An-Update-on-Lipoprotein-a> (Accessed April 24, 2026).

14

Reyes-Soffer G, Yeang C, Michos ED, et al. High lipoprotein(a): actionable strategies for risk assessment and mitigation. *Am J Prev Cardiol*. 2024;18:100651.

15

AHA. Life's Essential 8™. Your checklist for lifelong good health. <https://www.heart.org/en/healthy-living/healthy-lifestyle/lifes-essential-8> (Accessed April 23, 2026).

16

CDC. Preventing heart disease. <https://www.cdc.gov/heart-disease/prevention/index.html> (Accessed April 23, 2026).

17

AHA. Lower your LDL. <https://www.heart.org/en/health-topics/cholesterol/hdl-good-ldl-bad-cholesterol-and-triglycerides/lower-your-ldl> (Accessed April 23, 2026).