Editorial

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Elevated LDL-cholesterol and/or disproportional LDL/HDL serum concentrations are accepted to significantly increase cardiovascular complications. The impact of lipoprotein antigen (Lp(a)) to accelerate arteriosclerosis and consequent complications is yet less investigated but up-to-date scientific work indicates its important role in the manifestation of adverse cardiovascular events. Lp(a) serum concentrations can only moderately be lowered by lifestyle modification or drugs.

In most of our patients, dyslipoproteinemia can be sufficiently handled first of all by appropriate use of lipid-lowering drugs including CSE inhibitors, cholesterol adsorption blockers, and others. In a few patients, all attempts to normalize dyslipoproteinemia by diet, lifestyle modification, and drugs remain insufficient and such patients may be considered candidates for heparin-induced extracorporeal LDL precipitation (H.E.L.P.), a selective and sophisticated apheresis procedures. By means of heparin lowering the pH level, the lipoproteins and fibrinogen are reduced by at least 50 %. In addition, the adhesion molecules, strong promoters in the development and progression of atherosclerosis, are significantly lowered.

This supplement summarizes important aspects of lipid apheresis presented and discussed during the symposium “Lipid apheresis—ultima ratio or target therapeutic option” held from October 7–8, 2011 in Bad Oeynhausen, Germany.

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