

The European FCS score: a scoring tool for familial chylomicronemia syndrome (FCS)

In 2018, a panel of European experts (Moulin et al) published an algorithm-based tool using laboratory and clinical findings, which helps differentiate FCS from multifactorial chylomicronemia syndrome (MCS) and identify candidates for genetic testing.¹

The scoring tool below can be used to assign a clinical score for patients with chylomicronemia syndrome based on triglyceride (TG) levels, medical history and age. It was originally proposed that patients with a score equal to or above 10 (meaning FCS is very likely) should be genetically tested.¹ In more recent studies, a lower European FCS score of 7 has been proposed as the referral criterion to request genetic testing for FCS confirmation.²

Using a lower threshold for early referral to genetic testing (a European FCS score of 7 or above) may allow earlier confirmation of a definitive diagnosis and initiation of appropriate treatment.²⁻⁵

Select each item that applies to determine your patient's FCS score. The numbers in brackets represent the weighting given to the presence of each characteristic.¹

Characteristic ¹	Select if applicable	Category score	Cumulative score
Triglycerides			
Fasting triglycerides >880 mg/dL for 3 consecutive blood analyses* [+5]	<input type="radio"/>	+	
Fasting triglycerides >1770 mg/dL at least once [+1]	<input type="radio"/>	+	
Previous triglycerides <177 mg/dL [-5]	<input type="radio"/>	+	
Medical history			
No secondary factor [†] (except pregnancy [‡] and ethinylestradiol) [+2]	<input type="radio"/>	+	
History of pancreatitis [+1]	<input type="radio"/>	+	
Unexplained recurrent abdominal pain [+1]	<input type="radio"/>	+	
No history of familial combined hyperlipidemia [+1]	<input type="radio"/>	+	
No response (triglyceride decrease <20%) to hypolipidemic treatment [+1]	<input type="radio"/>	+	
Onset of symptoms at age:	<input type="radio"/> < 40 years <input type="radio"/> < 20 years <input type="radio"/> < 10 years	=	
Interpreting results¹		Result	
≥10: FCS very likely ≤9: FCS unlikely ≤8: FCS very unlikely			

Adapted from Moulin et al. Identification and diagnosis of patients with familial chylomicronaemia syndrome (FCS): expert panel recommendations and proposal of an "FCS score". *Atherosclerosis*. 2018;275:265-272.

* Plasma triglyceride concentration measured at least 1 month apart. Eruptive xanthomas may be used as a surrogate for high triglyceride levels (rare).¹

[†] Secondary factors include alcohol, diabetes, metabolic syndrome, hypothyroidism, corticosteroids, and additional drugs.¹

[‡] If diagnosis is made during pregnancy, a second assessment is necessary to confirm diagnosis post partum.¹

Useful link



Further information on familial chylomicronemia syndrome:
<https://pro.sobi.com/en/therapeutic-areas-diseases/specialty-care/fcs>

References

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2. Bashir B, et al. *Atherosclerosis* 2024;391:117476.
3. Javed F, et al. *J Clin Lipid*. 2025;19:382–403.
4. Davidson M, et al. *J Clin Lipidol*. 2018;12:898–907.
5. Hegele RA, et al. *J Clin Lipidol*. 2025;19(1):83–94.

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