Cardiovascular diseases are the main cause of death worldwide and dyslipidemia constitutes a substantial risk factor. Patients with rheumatic diseases, especially active inflammatory arthritis and systemic lupus erythematous, show unfavorable lipid profiles, which, however, do not account for the total excess cardiovascular morbidity. Effective disease management, life-style changes and cholesterol-lowering agents can ameliorate the lipid profile and lower cardiovascular mortality. Due to their anti-inflammatory and potent cholesterol-lowering properties, statins are the pharmacological agents of first choice. National and international guidelines on cardiovascular risk prevention differ concerning appraisal of the individual risk and lipid targets. The EULAR recently released recommendations for cardiovascular risk management in patients with inflammatory arthritis.