

Statin Intolerance is Real



There is no doubt that statins have revolutionised cardiovascular care during the last two decades and have proven to be an effective and an inexpensive way to reduce LDL cholesterol.

However, everyone cannot take statins and many complain of side effects including muscle pain, weakness and cramping. Many patients have to discontinue statins even if it increases their risk of heart attack or stroke.

Resistance to statins has been a controversial issue because there are no biomarkers for the muscle problems that patients complain about. Some believe that the problem may be psychological. However, a new study shows that statin intolerance is indeed very real and that newer drugs could have a strong impact on these patients' high cholesterol. The study is published in *JAMA*.

The study found that 42.6 percent of patients who complained of muscle pain while taking two different statins experienced the same symptoms when given a statin during the study. The same patients had no such complaint when administered a placebo. LDL cholesterol levels in these patients reduced by more than half when they were given evolucumab, a PCSK9 inhibitor for 24 weeks as compared to a 16.7 percent reduction with ezetimibe. PCSK9 inhibitors were approved by the FDA last year but only for small groups of people including those with an inherited disease that elevates LDL cholesterol levels.

"This problem of statin intolerance is one of the most vexing problems for both patients and physicians in cardiovascular medicine," said Steven E. Nissen, chairman of the Department of Cardiovascular Medicine at the Cleveland Clinic. He believes that this new study offers hope for people who cannot take statins because of side effects.

Mary Norine Walsh, vice president of the American College of Cardiology and medical director of Heart Failure and Cardiac Transplantation at St. Vincent Heart Center in Indianapolis also feels that the results from this study are encouraging and offer an option for patients who are statin-intolerant.

However, this may not be happening for a while. Not only do these drugs require FDA approval to be used in a broader patient population but they are also more expensive. In addition, statin intolerance is also quite subjective and to date, the two therapies have not been compared against each other. There is also the question of the 26.5 percent of statin-intolerant patients who complained of muscle pain while taking placebo.

Source: JAMA

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