Setting the Record Straight on Statins

CardioSmart
AMERICAN COLLEGE of CARDIOLOGY

Statins are the gold standard for lowering cholesterol and reducing the risk of heart disease, heart attacks and stroke. They are a key part of treatment for people with existing heart disease too. But there is a lot of misinformation about statins.

Here are some common statin myths, debunked:

MYTH

FACT

What we know from the research and experts

If I eat healthy, exercise, and feel fine, I don't need a statin.

Eating healthy and staying active is important. But for many people, these healthy habits by themselves may not lower cholesterol enough to reduce the chance of heart attack and stroke. And, unlike an antibiotic or a pain reliever, you may not "feel" the effects of a statin, but it's working to protect your heart.

Action step: Combining lifestyle changes and a statin offers the best protection.

Statins are only necessary for people with very high cholesterol.

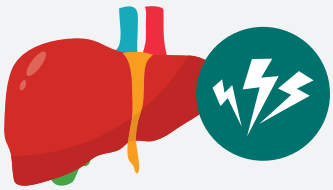
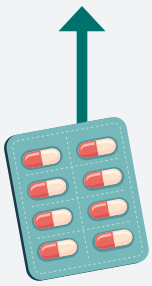
Statins are recommended not only based on your cholesterol level, but also on an estimate of how likely you are to develop heart or blood vessel diseases. Even mildly elevated cholesterol can be harmful when you have other risk factors too. For example, things like age, blood pressure, diabetes, weight, smoking history, and prior heart events or stroke.

Action step: Ask your care team about your heart disease risk.

Statins cause muscle pain, weakness and other side effects.

Most people – about 9 out of 10 – do NOT have muscle aches from taking a statin. If aches do occur, they're usually mild, affect large muscles (not joints), and can often be managed and reversed by lowering the statin dose or stopping it. You may also be able to lower the amount you take or try a different statin – there are many to choose from.

Action step: Talk with your care team about any concerns and ask which statin is best for you.

MYTH	FACT
Dietary supplements can lower cholesterol just as well as statins. 	Dietary supplements are not recommended. There is limited evidence that they can lower cholesterol or prevent heart disease. Some supplements – such as red yeast rice – can even cause harm. **Action step: Always check with your care team before starting any vitamins and supplements.**
Statins will affect my memory or ability to think clearly. 	Studies have not shown a relationship between statin use and problems with memory or thinking. Some studies even suggest statins may be linked to a lower chance of dementia, likely due to improved blood flow to the brain. **Action step: Talk with your care team if you have concerns about memory or thinking.**
Statins cause diabetes. 	Studies show statins may cause a small rise in blood sugar in some people. This is most likely in people who are already likely to develop diabetes. The rise in blood sugar is small. The heart benefits of statins – a lower chance of heart attack and stroke – far outweigh the risk. **Action step: If you have concerns, talk with your care team and keep up with regular checkups.**
Statins harm the liver. 	Liver problems from statins are very rare. Because liver issues are so uncommon, routine or repeated liver tests are not needed unless symptoms occur. Your care team may check your liver before starting treatment. **Action step: Tell your care team if you have liver disease or notice symptoms like unusual fatigue, dark urine, or yellowing of the skin or eyes.**
Statins are overprescribed and not needed much of the time. 	Statins are recommended based on a person's short- and long-term risk (chance) of having a heart attack or stroke. The higher your risk, the more likely you are to benefit from a statin. So, it's not just about your cholesterol numbers, though cholesterol is an important indicator. **Action step: If a statin is recommended, ask your care team to explain why.**

For more information, visit ***CardioSmart.org/QA-statins***