

Significantly improved chance of heart attack survival with high-potency statin treatment

20 February 2014, by Roddy Isles

(Medical Xpress)—A study looking at the data of thousands of patients who suffered heart attacks has suggested treatment with high-potency statins offers a significantly improved chance of survival compared to those taking normal statins.

The study, led by the University of Dundee, also found a combination of [statins](#) and the drug [ezetimibe](#) showed no improved survival rate, although researchers caution this finding needs further testing.

'There is presently a lot of interest in ezetimibe as a potential treatment for heart [patients](#),' said Professor Chim Lang, from the Division of Cardiovascular and Diabetes Medicine at the University of Dundee Medical School.

'Ezetimibe has been shown to be very effective at lowering cholesterol but we do not know its effect on survival. The key question really is whether it is better than statins, especially high potency statins such as rosuvastatin or atorvastatin.

'What our study has showed, looking at the data from thousands of patients in the UK, is that patients who switched from normal statin treatment to high potency statins lived longer.

'Those who had ezetimibe added did not appear to have a better outcome. So for the moment the data supports the use of high potency statins, one of which, atorvastatin, is now off patent and is cheap and effective.'

Results of the study have been published online in the journal *Heart*.

Data for the study was drawn from the UK's Clinical Practice Research Datalink. Researchers looked at the data for patients who had survived 30

days after their first [heart attack](#), who had not received prior statin or ezetimibe therapy, and who were started on a statin within that period of their attack.

The data of 9597 patients was used. 6990 of those were treated with simvastatin, 1883 had switched to a more potent statin, and 724 were given an ezetimibe/statin combination.

Data for the group was analysed for an average 3.2 years from the start point of their first [heart](#) attack. During that time there were 1134 deaths.

The results showed that patients who switched to a high-potency statin had a 28% lower risk of death compared to those who received simvastatin. There was no observed benefit of adding ezetimibe.

Provided by University of Dundee

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