

Statin use decreases the risk of Barrett's esophagus

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Statins, a class of drugs commonly used to lower cholesterol levels, significantly reduce a patient's risk of developing Barrett's esophagus, according to a new study in *Gastroenterology*, the official journal of the American Gastroenterological Association. Obese patients experienced the greatest level of risk reduction with statin use.

"Patients who received [statins](#) had a 43 percent reduction in the odds of having Barrett's [esophagus](#) compared to non-users," said study author Hashem B. El-Serag, MD, MPH, from the Houston VA Medical Center and Baylor College of Medicine, Houston, TX. "This is the first study to find a significantly lower risk of Barrett's esophagus with statin use, independent of other known risk factors. Further studies are needed to examine this association."

Researchers conducted a single-center, large case-control study of 303 Barrett's esophagus patients and 909 controls treated at the Michael E. DeBakey Veteran Affairs Medical Center in Houston, TX. They compared electronic pharmacy records during a 10-year period to ascertain medication use and evaluated the association between the use of statins and the risk of Barrett's esophagus. The findings indicate that statins may have a protective effect against the development of Barrett's esophagus. This association was independent of known risk factors, including age, race, gender, H. pylori infection and smoking status.

The protective effect of statins was especially significant among patients who were obese. Those with a body mass index greater than or equal to 30 had a 74 percent reduction in Barrett's esophagus.

Patients who had frequent gastroesophageal reflux disease symptoms had a 59 percent reduction in Barrett's esophagus odds. The researchers also found that patients who used statins for three or more years had higher risk reduction.

It is important to note that this study was conducted at a single-center VA medical center, where the patient population consisted mostly of older men, and so results may not be generalizable to a wider population. Also important, simvastatin was by far the most commonly prescribed statin in this study (94.3 percent), and, therefore, generalizability to other statins may be limited.

Statins are a class of drugs used to lower [cholesterol levels](#). While statins have been associated with a reduced risk of esophageal cancer, this is one of the first studies to look at their effect on development of Barrett's esophagus.

Barrett's esophagus affects 1 to 2 percent of the general population and is the only known precancerous lesion for esophageal cancer. Barrett's esophagus increases the risk of developing this cancer by 10- to 55-fold compared with the general population. For more information on this condition, refer to AGA's [medical position statement](#) on the management of Barrett's esophagus.

More information: Nguyen et al. Statin Use Is Associated With a Decreased Risk of Barrett's Esophagus. *Gastroenterology* 2014; 147(2): 314-323. Nguyen et al. Statin Use Is Associated With a Decreased Risk of Barrett's Esophagus. *Gastroenterology* 2014; 147(2): 314-323. www.gastrojournal.org/article/S0016-5085

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