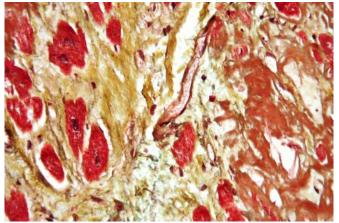


African-Americans may receive different advice on statin therapy

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Micrograph of a heart with fibrosis (yellow) and amyloidosis (brown). Movat's stain. Credit: Nephron/Wikipedia

African Americans experience a disproportionately high risk of cardiovascular disease, and statin treatment can be an important tool to lower the risk of plaque building up in the arteries.

But statin <u>guidelines</u> from different organizations vary, according to a new paper published in *JAMA Cardiology* and presented at the American College of Cardiology's annual Scientific Sessions.

The 2013 American College of Cardiology and American Heart Association guidelines dramatically increased the number of people eligible for statins. Recent guidelines developed by the U.S. Preventative Services Task Force, or USPSTF, focus on a narrower population using clinical risk factors.

"We found one in four African Americans who would have been recommended for statin therapy under the ACC/AHA guidelines would not be recommended under new USPSTF guidelines," says Venkatesh Murthy, M.D., Ph.D., co-senior

author and cardiologist at Michigan Medicine. "We wanted to determine whether the right people were being identified for statin therapy."

Murthy, an assistant professor, led a study of 2,812 African American adults who participated in the Jackson Heart Study in Jackson, Mississippi and were at risk for atherosclerotic cardiovascular disease. In 1,743 of the participants, Michigan Medicine and Harvard University researchers also analyzed the impact of calcification of the coronary arteries, which is associated with cardiovascular events, such as stroke or heart attack.

The study determined the stricter USPSTF guidelines did not identify as many individuals with coronary calcification as the ACC/AHA guidelines.

"Because the USPSTF guidelines target those with the highest risk of atherosclerotic cardiovascular disease, they also may miss some African Americans with some vascular calcification and low or moderate risk," says Ravi V. Shah, M.D., cosenior author from Massachusetts General Hospital and Harvard Medical School.

Researchers say the results support further personalization of recommendations for <u>statin</u> <u>therapy</u>, including targeted imaging.

This is the latest work to come out of the Jackson Heart Study, the largest single-site, prospective, epidemiologic investigation of <u>cardiovascular</u> <u>disease</u> among African Americans. The full study includes a cohort of more than 5,000 patients who live in rural and urban areas of three counties around Jackson, Mississippi. The subjects were each examined three times over a period of nine years, beginning in 2000.

More information: Ravi V. Shah et al, Subclinical Atherosclerosis, Statin Eligibility, and Outcomes in African American Individuals, *JAMA Cardiology* (2017). DOI: 10.1001/jamacardio.2017.0944



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