

Cholesterol drugs lower risk of stroke for elderly too

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Elderly people who take a cholesterol drug after a stroke or mini-stroke lower their risk of having another stroke just as much as younger people in the same situation, according to research published in the September 3, 2008, online issue of *Neurology*, the medical journal of the American Academy of Neurology.

"Even though the majority of strokes and heart attacks occur in people who are 65 and older, studies have found that cholesterol-lowering drugs are not prescribed as often for older people as they are for younger people," said study author Seemant Chaturvedi, MD, of Wayne State University in Detroit, MI, and a Fellow of the American Academy of Neurology. "These results show that using these drugs is just as beneficial for people who are over 65 as they are for younger people."

The study involved 4,731 people age 18 and older who had a recent stroke or transient ischemic attack, or mini-stroke. The 2,249 people age 65 and older were in one group, with an average age of 72, and the 2,482 people under age 65 made up the other group, with an average age of 54. Within each group, about half of the people received the cholesterol-lowering drug atorvastatin and about half received a placebo. The participants were then followed for an average of four and a half years.

LDL, or low-density lipoprotein "bad" cholesterol, was lowered by an average of 61 points during the study for the elderly group, and by 59 points for the younger group. Those in the younger group reduced their risk for another stroke by 26 percent; the risk was reduced by 10 percent

in the elderly group.

"We tested to see whether age had any effect on how well the treatment worked, and we did not find any differences between young people and older people," Chaturvedi said. "It's estimated that 20 percent of the U.S. population will be 65 or older by 2010, so it's important that we identify ways to reduce the burden of strokes and other cerebrovascular diseases in this group. This is a step in that direction."

Source: American Academy of Neurology

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