

Statins fail to reduce mortality rate in sepsis patients with ARDS

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Despite previously-reported observational and basic science evidence suggesting the use of statins may improve outcomes in patients with sepsis and acute respiratory distress syndrome (ARDS), a double-blinded clinical trial of rosuvastatin in those patients was futile, and the study was halted.

The findings are published in the May 18, 2014 *New England Journal of Medicine*, along with accompanying editorials evaluating the research's goals and outcomes. The primary investigator and lead author of the study is Jonathon D. Truwit, M.D., professor of medicine and enterprise chief medical officer and senior administrative dean at Froedtert & the Medical College of Wisconsin.

Despite improvements in supportive care for ARDS, the mortality rate remains high, one in four patients die. Sepsis is the major reason patients develop ARDS. Statins have been shown to reduce inflammation and prevent ARDS in basic science studies, and have also been reported in observational studies to improve outcomes in patients with [sepsis](#) and ARDS.

In this study, patients received either the [rosuvastatin](#) or a placebo, and the study was double-blinded. After 745 of the proposed 1000 patients had been enrolled in the multi-center trial, the study was halted because there was no significant difference between the study groups. Further, the rosuvastatin therapy may have contributed to hepatic and renal organ dysfunction.

"While this therapy did not lead to better outcomes, it is important that we evaluate possible therapies for conditions such as ARDS because it adds to our knowledge about this condition, which has a high mortality rate for patients. The information gathered in this study will guide further basic and clinical research to ultimately improve our care for critically ill [patients](#)," said Dr. Truwit.

Provided by Medical College of Wisconsin

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