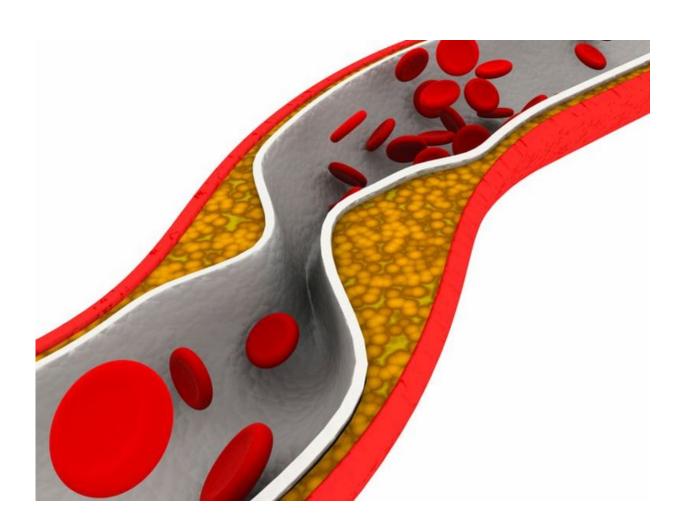


LDL reduction in hypertriglyceridemia varies per statin

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(HealthDay)—For patients with hypertriglyceridemia, low-density



lipoprotein cholesterol (LDL-C) and triglyceride (TG) reductions depend of the choice and dose of statin, according to research published in the May 1 issue of *The American Journal of Cardiology*.

Björn W. Karlson, M.D., Ph.D., from AstraZeneca and the University of Gothenburg in Sweden, and colleagues used data from the individual patient meta-analysis of statin therapy in at-risk groups: effects of rosuvastatin, atorvastatin, and simvastatin meta-analysis to examine LDL-C and TG reductions in patients with baseline TG \geq 177 mg/dL. Using 15,800 patient exposures to rosuvastatin, atorvastatin, and simvastatin, atorvastatin, and simvastatin, atorvastatin, atorvastatin, atorvastatin, atorvastatin, atorvastatin, atorvastatin, and simvastatin TG \geq 177 mg/dL. Using 15,800 patient exposures to rosuvastatin, atorvastatin, and simvastatin, atorvastatin, atorvastat

The researchers found that the mean reductions in LDL-C varied from -26.9 to -55.5 percent. Significantly greater reductions in LDL-C were seen for 10 to 40 mg rosuvastatin versus equal or double doses of atorvastatin and simvastatin (P atorvastatin. Significantly greater reductions were seen for rosuvastatin 20 to 40 mg versus equal or double doses of simvastatin (P

"In patients with hypertriglyceridemia, LDL-C reduction was substantial and dependent on the choice and dose of statin," the authors write.

Several authors disclosed financial ties to AstraZeneca, which funded the study.

More information: <u>Abstract</u> Full Text (subscription or payment may be required)

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