

No statins before heart surgery, study suggests

May 5 2016, by Steven Reinberg, Healthday Reporter



(HealthDay)—Taking cholesterol-lowering statins right before heart

surgery, once touted as a way to prevent common postoperative complications, has no benefit and may even cause harm, a new study suggests.

In that setting, Crestor (rosuvastatin) did not prevent either the [abnormal heart rhythm](#) known as [atrial fibrillation](#) or [heart](#) damage, and it was linked to a slightly increased risk of kidney damage, researchers said.

"There are many valid reasons why one may want to take statins, but prevention of [postoperative complications](#) in cardiac surgery is not one of them," said lead researcher Dr. Barbara Casadei. She is a professor of cardiovascular medicine at the University of Oxford in England.

"Our study is consistent with the idea that well-established beneficial effects of [statin therapy](#), such as the reduction in heart attacks and strokes, are only achieved by long-term treatment with these drugs," she added.

For the study, Casadei and her colleagues randomly assigned more than 1,900 patients who were having elective heart surgery to take Crestor or a placebo before surgery.

The researchers found that patients given Crestor had lower levels of cholesterol and C-reactive protein (another marker for heart trouble) after surgery, compared with patients given a placebo.

However, the percentages of those who developed atrial fibrillation were essentially the same in patients given Crestor (21.1 percent) and those given a placebo (20.5 percent), the investigators found.

And further analyses showed that Crestor was associated with a 5.4 percent greater chance of mild kidney damage, when compared with a placebo.

The cause of the [kidney damage](#) isn't known, said Casadei, since the study was not designed to show cause-and-effect. However, her team plans to study that issue further, she added.

"The risk of kidney injury is relatively small, but considering that the benefit of statin treatment before a heart operation is zero, one may well consider stopping statins for a few days before surgery," Casadei said.

The report was published May 5 in the *New England Journal of Medicine*.

Dr. Gregg Fonarow, a professor of cardiology at the University of California, Los Angeles, said the study findings should not deter patients from taking statins to prevent heart attacks and strokes.

"Current guidelines recommend that all patients with cardiovascular disease, including patients after coronary artery bypass surgery, receive statins to lower the risk of fatal and nonfatal heart attacks and strokes," he said.

Beyond the intermediate and long-term benefits of statins, a number of small clinical trials have suggested an additional short-term benefit of starting or continuing statin therapy before [heart surgery](#). However, many of these studies may have had problems that clouded the findings, Fonarow noted.

"This new trial suggests that there is no compelling reason to initiate statin therapy just before cardiac surgery," he said.

"However, long-term treatment with statins is essential to lower the intermediate and long-term risk of fatal and nonfatal cardiovascular events in patients with cardiovascular disease," Fonarow added.

More information: Visit the [American Heart Association](#) for more on statins.

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