

USPSTF issues recommendations regarding use of statins for the prevention of cardiovascular disease

November 13 2016

The U.S. Preventive Services Task Force (USPSTF) has issued a recommendation statement regarding the use of statins for primary prevention of cardiovascular disease in adults. The report appears in the November 15 issue of *JAMA*.

Recommendations

- The USPSTF recommends initiating use of low- to moderate-dose statins in adults ages 40 to 75 years without a history of [cardiovascular disease](#) (CVD) who have 1 or more CVD [risk factors](#) (dyslipidemia, diabetes, hypertension, or smoking) and a calculated 10-year CVD event risk of 10 percent or greater (B recommendation, indicating that there is high certainty that the net benefit is moderate, or there is moderate certainty that the net benefit is moderate to substantial).
- The USPSTF recommends that clinicians selectively offer low- to moderate-dose statins to adults ages 40 to 75 years without a history of CVD who have 1 or more CVD risk factors and a calculated 10-year CVD event risk of 7.5 to 10 percent (C recommendation, indicating this should be selectively offered or provided to individual patients based on professional judgment and patient preferences. There is at least moderate certainty that the net benefit is small).
- The USPSTF concludes that the current evidence is insufficient

to assess the balance of benefits and harms of initiating [statin](#) use in adults 76 years and older (I statement, indicating that evidence is lacking, of poor quality, or conflicting, and the balance of benefits and harms cannot be determined).

To update its 2008 recommendation on screening for lipid disorders in adults, the USPSTF reviewed the evidence on the benefits and harms of screening for and treatment of dyslipidemia in adults 21 years and older; the benefits and harms of statin use in reducing CVD events and mortality in adults without a history of CVD events; whether the benefits of statin use vary by subgroup, clinical characteristics, or dosage; and the benefits of various treatment strategies in adults 40 years and older without a history of CVD events.

The USPSTF is an independent, volunteer panel of experts that makes recommendations about the effectiveness of specific preventive care services such as screenings, counseling services, and preventive medications.

Importance

Cardiovascular disease is a broad term that encompasses a number of atherosclerotic conditions that affect the heart and blood vessels, including coronary heart disease, as ultimately manifested by myocardial infarction (MI; [heart attack](#)), and cerebrovascular disease, as ultimately manifested by stroke. Cardiovascular disease is the leading cause of illness and death in the United States, accounting for 1 of every 3 deaths among adults. Statins are a class of lipid-lowering medications that reduce levels of total cholesterol and low-density lipoprotein cholesterol (LDL-C).

Potential Benefits of Statin Use

The USPSTF found adequate evidence that use of low- to moderate-dose statins: reduces the probability of CVD events (heart attack or ischemic stroke) and mortality by at least a moderate amount in adults ages 40 to 75 years who have 1 or more CVD risk factors and a calculated 10-year CVD event risk of 10 percent or greater; and reduces the probability of CVD events and mortality by at least a small amount in adults ages 40 to 75 years who have 1 or more CVD risk factors and a calculated 10-year CVD event risk of 7.5 to 10 percent. The USPSTF found inadequate evidence to conclude whether initiating statin use in adults 76 years and older who are not already taking a statin is beneficial in reducing the incidence of CVD events and mortality.

Potential Harms of Statin Use

The USPSTF found adequate evidence that the harms of low- to moderate-dose statin use in adults aged 40 to 75 years are small. The USPSTF found inadequate evidence on the harms of initiating statin use for the prevention of CVD events in [adults](#) 76 years and older without a history of heart attack or stroke.

More information: Kirsten Bibbins-Domingo et al. Statin Use for the Primary Prevention of Cardiovascular Disease in Adults, *JAMA* (2016). DOI: [10.1001/jama.2016.15450](https://doi.org/10.1001/jama.2016.15450)

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