

Should nursing home residents nearing the end of life continue taking statins?

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Cardiovascular disease (also called heart disease) is one of the most common medical conditions older adults face. In nursing homes, almost half of all older adult residents have been diagnosed with problems affecting the heart and/or blood vessels.

In spite of this, we know very little about how effective a class of popular [heart disease](#) medications may be for those 75 and older. Known as statins, these medications are prescribed to reduce the amount of cholesterol in your blood. High blood levels of cholesterol can damage your heart's [blood vessels](#) and lead to the formation of blood clots, which can cause stroke and heart attacks.

The reason we have a knowledge gap as to how well statins work in [older adults](#) is because early medical studies that examined [statin](#) therapy for heart disease prevention included few adults age 75 and older. More recent trials that did include older adults often found that [statin therapy](#) did not help prevent these individuals from developing heart disease.

Why? It's possible that, as we age, our sensitivity to medications may change. For instance, myopathy (muscle pain and weakness) is a commonly reported side effect of statins. This side effect may have a heightened effect on older adults who are already frail, which could speed up physical decline.

A team of researchers conducted a study to learn more about statin use among older adults, especially those nearing the end of their lives. Their

study stemmed from concern about unclear statin prescribing guidelines for people over age 75, and a lack of information on the medications' uses in nursing homes. The study, published in the *Journal of the American Geriatrics Society*, evaluated statin use by people with life-limiting conditions across nearly all U.S. nursing homes. The researchers hoped to identify statin use among nursing home residents who were unlikely to benefit from treatment.

This appears to be the first nationwide study to report statin use across U.S. nursing homes among older adults not likely to benefit from continued use.

The researchers noted the following facts as background for their research:

- As of 2016, the U.S. Preventive Services Task Force declined to offer statin recommendations for adults older than 75, due to a cited lack of evidence to support any recommendation in this age group. Despite this, statin use has been on the rise in older age groups. In the U.S., approximately half of the 75-and-older population were prescribed statins from 2012 to 2013, a nearly 20 percent increase over the past decade.
- Little is known about statin prescribing patterns in nursing homes, where most residents have multiple chronic conditions including Alzheimer's disease/dementia and physical frailty. A few previous studies had suggested that statin use in nursing homes is common and occurs even when people have life-limiting illnesses.
- What's more, recent evidence suggests that stopping (deprescribing) statins for people with a limited life expectancy could potentially improve quality of life. In fact, the American Medical Directors Association does not recommend prescribing statins to people with a limited life expectancy, due in part to

potential harm in older adults.

In their study, researchers examined information from long-stay nursing home residents near the end of life who resided in Medicare- and Medicaid-certified nursing home facilities. Participants were age 65 and older with life-limiting illness diagnoses or limited life expectancy.

The key findings were:

- Even with life-limiting illness, over a third of these U.S nursing home residents were on some form of oral statin [medication](#) as of September 2016.
- While [statin use](#) varied by life-limiting illness classification, other medical diagnoses were not strongly associated with the use of statins. This included assessments of people with a documented prognosis less than six months.
- Polypharmacy (taking several different medications) appears to remain an issue in U.S. nursing homes. More than 50 percent of the study's participants were on six or more non-statin prescription medications. And 10 to 20 percent were on 11 or more non-statin medications, depending on age. It appeared that the more non-statin medications residents were on, the more likely they were to be on statins.

More information: Deborah S. Mack et al, Prevalent Statin Use in Long-Stay Nursing Home Residents with Life-Limiting Illness, *Journal of the American Geriatrics Society* (2020). [DOI: 10.1111/jgs.16336](https://doi.org/10.1111/jgs.16336)

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