

Statins recommended for primary prevention of cardiovascular disease in adults

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The U.S. Preventive Services Task Force (USPSTF) concludes that

people aged 40 to 75 years at high risk for cardiovascular disease (CVD) should receive statins. This finding forms the basis of a final recommendation statement published in the Aug. 23/30 issue of the *Journal of the American Medical Association*.

Roger Chou, M.D., from the Oregon Health & Science University in Portland, and colleagues updated the 2016 review on statins for primary prevention of CVD. Data were included from 26 studies. The researchers found that statins were significantly associated with a reduced risk for all-cause mortality, stroke, [myocardial infarction](#), and composite cardiovascular outcomes (risk ratios, 0.92, 0.78, 0.67, and 0.72, respectively); the association with cardiovascular mortality was not statistically significant. In groups defined by demographic and clinical characteristics, relative benefits were consistent, but data were limited for those older than 75 years.

Based on these findings, the USPSTF recommends that statins should be prescribed for primary prevention of CVD in adults aged 40 to 75 years with no CVD history and with one or more CVD risk factors and an estimated 10-year CVD event risk of 10 percent or greater (B recommendation). For adults aged 40 to 75 years with no history of CVD and who have one or more of these CVD risk factors and an estimated 10-year CVD event risk of 7.5 to

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