

# Polypill not linked to reduced cognitive decline in seniors

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A polypill (antihypertensives and a statin) does not reduce cognitive

decline but is associated with reduced functional decline for adults aged 65 years and older with cardiovascular risk factors, according to a study published online Jan. 30 in *JAMA Neurology*.

Jacqueline J. Bosch, Ph.D., from McMaster University and Hamilton Health Sciences in Canada, and colleagues examined whether a polypill could reduce cognitive and [functional decline](#) in 2,098 people aged 65 years or older, with [risk factors](#) but without cardiovascular disease.

Overall, 86 and 32 percent of participants had hypertension and impaired fasting plasma glucose levels, respectively. The researchers found that the mean baseline [systolic blood pressure](#) was 146.1 mm Hg and the mean low-density lipoprotein cholesterol level was 124.3 mg/dL; among those assigned to the polypill group, decreases of 5.7 mmHg and 24 mg/dL, respectively, were seen.

No significant differences were seen between the treatment groups in the number of participants who experienced substantive [cognitive decline](#) or dementia during a five-year follow-up. For those assigned to the polypill versus placebo or polypill plus aspirin versus double placebo, functional decline was reduced during follow-up.

"Although mean change in score for any cognitive measure was not different between groups, there was a significant difference in mean functional decline between the groups at study end for both the polypill versus placebo and the polypill plus aspirin versus placebo comparisons," the authors write.

Several authors disclosed financial ties to the pharmaceutical industry.

**More information:** Jacqueline J. Bosch et al, Effects of a Polypill, Aspirin, and the Combination of Both on Cognitive and Functional Outcomes, *JAMA Neurology* (2023). [DOI:](#)

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