Statins for kidney disease patients: Protection for the heart but no effects on kidneys
1 May 2014

Lowering LDL cholesterol through statin-based treatment did not slow kidney disease progression within five years in a study appearing in an upcoming issue of the *Journal of the American Society of Nephrology (JASN)*. The results indicate that while LDL cholesterol-lowering therapy is safe in kidney disease patients and can reduce their risk of heart disease and stroke, it does not protect their kidney health as well.

Research has shown that lowering LDL cholesterol with statins can reduce kidney disease patients’ risk of experiencing heart attacks and strokes, but it’s not clear whether it can also reduce the risk of kidney failure, which requires dialysis or kidney transplantation, in these patients.

To investigate, researchers conducted the Study of Heart and Renal Protection (SHARP), which included 6,245 nondialysis chronic kidney disease patients who were randomized to receive a placebo or cholesterol-lowering treatment with simvastatin (a statin) plus ezetimibe (a drug that inhibits the intestinal absorption of cholesterol).

Among the major findings after 5 years of follow-up:

- Simvastatin plus ezetimibe lowered LDL cholesterol by an average of approximately 1 mmol/L (39 mg/dL) compared with placebo.
- Simvastatin plus ezetimibe did not significantly reduce the need for dialysis or transplantation (33.9% cases vs 34.6% cases in the placebo group).
- Treatment had no effect on the speed at which kidney function declined over time.

"The SHARP trial was the largest ever randomized trial in chronic kidney disease and previously showed that simvastatin plus ezetimibe did reduce the risk of heart attack, stroke, vascular stenting, or bypass surgery, but it did not affect the risk of end-stage renal disease," said first author Richard Haynes, MRCP (University of Oxford, UK). "Statins had no effect—neither good nor bad—on kidney function."


Provided by American Society of Nephrology