

Statin Drugs Study Suggests They Are Over Prescribed

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Over the years I have been commissioned to deliver many wellness and lifestyle medicine lectures to the employees of large companies, financial institutions, as well as legal and accounting firms, in Canada and the United States. In conversation with the director of Human Resources of these corporate entities they often tell me that the single most expensive drain on the employee health benefits plan is the cost of cholesterol-lowering statin drugs. A 2012 report showed that 32 million Americans were prescribed a statin drug, which is a drug you take daily for the rest of your life.

There is good evidence that if a person has suffered a **heart attack** or stroke, or has advanced atherosclerosis (narrowing of artery with calcified plaque) statin drugs help reduce risk of a future **cardiovascular incident**. However, in patients who do not have advanced atherosclerosis, and no previous history of a **heart attack** or stroke, these drugs are unnecessary and may do more harm than good, according to recent evidence. For example, the Johns Hopkins-led Multi-Ethnic Study on Atherosclerosis, or MESA, gives clear evidence that statin drugs are over-prescribed and not required in many cases where doctors have been told to prescribe them.

The MESA study selected candidates from a pool of 7,000 ethnically diverse adults, including African Americans, Chinese Americans, Caucasians and Hispanics, and were monitored at Johns Hopkins and five other medical centers in North America. The study selected the same types of patients who were followed in the much cited JUPITER trial (short for the Justification for the Use of Statins in Primary Prevention: An Interventional Tool Evaluating Rosuvastatin, known to most people as Crestor) published in 2008, which focused on patients with a high C-Reactive Protein (CRP) blood reading (high CRP suggests inflammation in the blood vessel wall and considered to be a risk for heart attack). The JUPITER study showed that Crestor reduced the risk of heart and stroke in this population of patients.

The MESA study, which selected the same type of patient as the JUPITER study, showed, however, that only patients with advanced atherosclerosis demonstrated any clear benefit from the use of a statin drug. Researchers of the MESA study point out that promoting statin drugs as “preventive therapy” for future heart attacks in healthy men and women who don’t already have artery clogging calcium deposits, is just plain bad medicine. They caution against the over-prescribing of statin drugs because these drugs can cause hyperglycemia (an **increase in blood sugar levels**) and increase the risk of **Type 2 diabetes**. A 2012 warning on the label of statin drugs imposed by the FDA indicates they can also cause memory loss.

The new label warning was imposed because post marketing surveillance shows that statin drugs can cause memory loss, memory impairment, and/or confusion – occurring anywhere from one day after initiation of the statin to years after initiation, and is not age-specific as it occurs across a range of age groups. The new 2012 label also tells patients who experience fatigue, loss of appetite, dark urine, upper stomach pain or jaundice to notify their doctor immediately, as these symptoms can indicate the onset of a life-threatening kidney problem (Rhabdomyolysis). As well, as many as 5 percent of people on statins develop serious side effects, such as muscle pain, and one in 255 individuals develops **diabetes**.

The John Hopkins researchers highlight the fact that **high cholesterol**, along with most other cardiovascular risk factors, can be lowered in most people naturally by lifestyle changes such as exercise, a healthy diet and keeping weight under control. For individuals who have not yet had a heart attack or stroke, and do not have advanced stage atherosclerosis (with calcification), the most prudent way to reduce cholesterol, without risk of side effects, is to follow a proper diet and lifestyle plan, as outlined in my book The Meschino Optimal Living Program – 7 Steps to a healthy, fit, age-resistant body.

I have routinely lowered patients' cholesterol, triglyceride and glucose (blood sugar) levels using the Two Staple Nutrition System outlined in my book. In some cases I add Adeeva CholesterEx – a natural cholesterol and triglyceride-lowering supplement that has none of the damaging side effects of statin drugs.

Many experts agree that statin drugs are over prescribed, and that **lifestyle modification** is the most appropriate way for the majority of patients with high cholesterol to lower their reading. Yet, many doctors prescribe statin drugs in these cases, instead of providing patients with an opportunity to **lower cholesterol** using simple and natural lifestyle changes. I predict that society will pay a significant price for the over prescribing of these drugs in people who don't really need them. The risk is that the cumulative damage, over many years of daily statin drug use, may result in an escalation in the number of cases of memory loss and **Alzheimer's disease**, liver disease, **kidney damage**, muscle pain, muscle weakness and other problems. This has the potential to add up to a significant cost with respect to unnecessary human suffering.

And ask the director of Human Resources at any major company and they will tell you that statin drugs are already imposing a significant health benefit utilization cost to the company, and thus, indirectly driving up the cost of goods and service sold to consumers by the company, as well as the cost of employee health insurance.

If you have high cholesterol, triglycerides or blood sugar (glucose), I strongly suggest that you download chapter one of my book at the following link. The download is free, and will show you how to lower your blood readings using targeted nutritional practices. Whether you require a statin drug or not, the nutrition information outlined in this chapter should be incorporated into your long-term prevention plan. Here is the link to the free download: <http://www.meschinohealth.com/LP/Building A Nutrition Foundation>

References:

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