Statin medicines

This brochure gives you information on high cholesterol and the medicines most commonly used to manage it. You'll learn how these medicines compare and get important information about side effects and safety. You'll also receive self-care tips to help you feel better.
What is high cholesterol?

Cholesterol is a type of fat in your blood. Your body needs it for many things, such as making new cells. But having too much cholesterol in your blood over time can lead to a heart attack or stroke.

Your body makes the cholesterol you need, but your body may make too much cholesterol. You also get cholesterol from the foods you eat.

A simple blood test measures how much cholesterol you have in your blood. The test results are given in milligrams per deciliters (mg/dL) of cholesterol, but most people just say the numbers. The test usually tells you how much total cholesterol, good cholesterol, and bad cholesterol you have.

- **Total cholesterol below 200 is best.** If your cholesterol is 200 to 239, it is borderline high. If it is 240 or above, it is high.
- **LDL, or bad, cholesterol** can clog your arteries and cause a heart attack or stroke. The higher your LDL cholesterol is, the higher your risk for a heart problem. What your LDL should be depends on many things, such as your blood pressure and whether you smoke, have diabetes, or have a family history of heart disease.
- **HDL, or good, cholesterol** lowers heart attack risk, so higher HDL is better. HDL cholesterol should be above 40 in men and above 50 in women. An HDL level below 40 increases your risk of heart problems. If your HDL is above 60, you have a lower risk of heart attack.

More information

For more on high cholesterol, cholesterol tests, deciding whether to take statin medicine, and tips on activities and eating, go to [www.aarp.org/rxoptions](http://www.aarp.org/rxoptions) and enter A546 in the search box.
Triglycerides are another type of fat in the blood that can affect your health. High triglycerides and low HDL cholesterol are part of metabolic syndrome, which is a group of health problems that makes you more likely to have a heart attack, stroke, or diabetes. Ask your doctor for more information about this.

What can I do to help myself?

There are many things you can do to help lower your bad cholesterol, raise your good cholesterol, and lower your chance of having a heart attack or stroke.

- **Do not smoke.** Smoking can increase the chance that you will have a heart attack. If you need help quitting, talk to your doctor about stop-smoking programs and medicines.

- **Eat many types of foods every day.** Good choices include fruits, vegetables, whole grains (like oatmeal), dried beans and peas, nuts and seeds, soy products (like tofu), and fat-free or low-fat dairy products. Eat more fish, poultry, and soy protein and less red meat.

- **Stay away from butter and oils.** Don't use butter, margarine, or hydrogenated or partially hydrogenated oils. Instead, use olive and canola oils. (Canola oil margarine without trans fat is fine.)

- **Cook smart.** Bake, broil, or steam foods instead of frying them.

- **Be physically active.** Exercise raises your good (HDL) cholesterol level. Exercise for 30 to 60 minutes on most, preferably all, days of the week. Pick an activity you enjoy.

- **Watch your weight.** Stay at a healthy weight or lose weight by making changes in what you eat and how active you are. If you are overweight, losing just a small amount of weight, even 5 to 10 pounds, can reduce your chance of a heart attack or stroke.
Which medicines treat high cholesterol?

Statins are the type of medicine used most often to lower bad cholesterol. They can reduce your chance of a heart attack or stroke. How much statin medicine you take depends on your risk of heart attack or stroke. Your doctor may suggest a higher dose of a statin if you are at moderate to high risk. You may be at higher risk if you smoke, have high blood pressure or are using high blood pressure medicine, have low good (HDL) cholesterol, have family members who have had heart disease, or are a man age 45 or older or a woman age 55 or older.

Not everyone with high cholesterol needs a statin. Your doctor may use expert guidelines when deciding whether you should use statins. Your doctor may suggest other medicines or suggest combining a statin with another medicine.

Other medicines for high cholesterol that your doctor may prescribe include:

- Bile acid binders, such as cholestyramine (Questran) and colesvelam (Welchol). They lower LDL cholesterol.
- Fibric acid derivatives, such as fenofibrate (Tricor) and gemfibrozil (Lopid). They raise HDL cholesterol and lower triglycerides.
- Nicotinic acid (niacin), such as Niacor or Nicolar. It raises HDL cholesterol and lowers LDL cholesterol and triglycerides.
What are some common statins?
The table below lists some common statins. Not all statins are listed. Your doctor may have prescribed a statin not listed here based on your needs.

<table>
<thead>
<tr>
<th>Brand name</th>
<th>Generic name</th>
<th>Generic available?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lipitor</td>
<td>atorvastatin</td>
<td>No</td>
</tr>
<tr>
<td>Lescol,</td>
<td>fluvastatin</td>
<td>No</td>
</tr>
<tr>
<td>Lescol XL</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mevacor</td>
<td>lovastatin</td>
<td>Yes</td>
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<tr>
<td>Pravachol</td>
<td>pravastatin</td>
<td>Yes</td>
</tr>
<tr>
<td>Crestor</td>
<td>rosuvastatin</td>
<td>No</td>
</tr>
<tr>
<td>Zocor</td>
<td>simvastatin</td>
<td>Yes</td>
</tr>
<tr>
<td>Advicor*</td>
<td>niacin and lovastatin</td>
<td>No</td>
</tr>
<tr>
<td>Vytorin*</td>
<td>ezetimibe and simvastatin</td>
<td>No</td>
</tr>
</tbody>
</table>

*Advicor combines the statin lovastatin with niacin, which helps raise good (HDL) cholesterol and helps lower LDL cholesterol and triglycerides. Vytorin combines the statin simvastatin with ezetimibe, which reduces the amount of cholesterol the intestines absorb.
What are generic medicines?

All medicines contain an active ingredient, which is the same as the generic name. The active ingredient is what makes the medicine “work.”

What is a brand name?

When drug companies develop a new medicine, they patent it so no one else can make it or sell it for a certain amount of time. The brand name is the name the drug company gives to the medicine. It is the first name most people hear for a medicine because of advertising in magazines and on television.

But I’ve heard more than one brand name, haven’t I?

After a medicine patent expires, other companies can make and sell the medicine. Sometimes these companies call it by the generic name, the name of the active ingredient. But companies also can give it their own brand names. This means a medicine made with one active ingredient can have many names.

For example:

- Lovastatin is the active ingredient and generic name for one statin.
- Altoprev and Mevacor are both brand names for lovastatin.
Are brand-name medicines better than generic medicines?

Generic medicines work the same way brand-name medicines work, but they usually cost less. Your doctor may be able to prescribe a generic medicine if it's available and right for you.

A generic medicine may be available for some forms of a medicine, but not for others.
Are some statins better than others?

Is one medicine really more effective than another? The Drug Effectiveness Review Project (DERP)* tries to answer that question.

Research on atorvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, and simvastatin has been reviewed. Some DERP findings are listed below.**

• All statins reduce LDL cholesterol. How much a statin reduces LDL cholesterol depends on how much you take. Some statins require higher doses to get the same results as others at lower doses.
• Statins sometimes can cause muscle or liver damage. No differences were found among the statins when it comes to these side effects. Tell your doctor right away if you have any severe muscle pain, weakness, or brown urine.

* DERP (www.ohsu.edu/drugeffectiveness) began in 2001 when the state of Oregon started funding research on the effectiveness and safety of comparable drugs. Since then, other states and nonprofits have joined with Oregon to fund and use the research. DERP does not accept funding from drug companies.

** All evidence-based DERP reports can be found at www.ohsu.edu/drugeffectiveness/reports/final.cfm. DERP has not reviewed the content of this brochure.
What do I need to know?

Before taking statins

• Tell your doctor if you have other medical problems, such as kidney or liver disease. Your doctor most likely will want to test your liver before you start taking statins.

• Tell your doctor if you are taking large amounts of niacin (a B₃ vitamin supplement). Taking large amounts of niacin may increase your chance of liver damage.

• Some medicines interact with statins and could increase the chances of side effects. Tell your doctor if you are taking antibiotics (such as erythromycin), medicines that weaken your immune system (such as cyclosporine), antifungal medicines (such as Nizoral), or other medicines to treat high cholesterol or triglycerides, such as fenofibrate (Tricor), gemfibrozil (Loid), or niacin (Nicolar or Nicor).
Taking statins

• If you stay at a healthy weight, exercise, and eat less fat and more fruits and vegetables, you may be able to lower your LDL cholesterol with less statin medicine.

• Keep track of your LDL cholesterol levels. After you start taking statins, you’ll want to see how much the statins lower your LDL cholesterol. Talk to your doctor about the results. You and your doctor may need to adjust your medicine.

• Talk to your doctor or pharmacist about when to take statins. Some statins may work best if you take them in the evening, because this may be when your body makes cholesterol. If you take them at this time, they may be more effective.

• Some statins may work better than others for people with other medical problems, such as kidney failure. Talk to your doctor about the best statin for you.

• How much a statin reduces LDL cholesterol depends on how much you take. Some statins require higher doses to get the same results as others at lower doses. For example, most people need to take a higher dose of pravastatin or lovastatin to get the same results as a lower dose of atorvastatin.
Safety

- You may need regular blood tests to check your liver. Your doctor will tell you how often you need them. Your doctor may suggest fewer checkups over time, depending on the results.

- Talk to your doctor or pharmacist about whether you can drink grapefruit juice while you’re using a statin. Grapefruit juice can increase the level of these medicines in your blood. Having too much of a medicine in your blood raises your chance of having serious side effects.

- Some medicines and herbal products (such as St. John’s wort) interact with statins and could raise your chance of side effects.

- Taking higher doses of statins raises your chance of having side effects. But remember that some statins require higher doses to get the same results as other statins at lower doses.

- Keep all medicines out of the reach of children.
What about side effects?

All medicines have side effects. Talk to your doctor or pharmacist about what side effects to expect when you take statins. Ask if there are any serious side effects you should report to your doctor.

Usually the benefits of the medicine are more important than minor side effects. But if side effects continue to bother you and you are wondering whether you should continue to take the medicine, call your doctor.

Possible side effects

You may have a headache or have digestive problems such as an upset stomach, gas, constipation, or belly pain. Talk to your doctor right away if you have severe muscle pain or weakness or brown urine, which are rare side effects.

Serious side effects

Call your doctor or 911 right away or go to the emergency room if you have any of the following rare side effects:

- You have a hard time breathing, get hives, or have swelling of your face, lips, tongue, or throat. These are signs of an allergic reaction.
How can I manage my medicines?

Avoid side effects and interactions
Medicines are more likely to interact, cause side effects, or harm you if:

• You are taking high doses.
• You have another health problem.
• Your health or a health problem you have is not stable (is changing).
• You are taking many medicines that your body processes in a similar way.

The best way to manage your medicines and help your doctor, pharmacist, or other health care professional is to keep a personal medication record (PMR). The PMR gives you a place to list all the medicines you take, the doses, and how they are taken. This includes over-the-counter medicines and dietary supplements. Sharing this list with your health care providers will help you avoid drug interactions.

You also can put all your medicines in a bag and take them with you when you see your doctor. Include all supplements, herbs, vitamins, and minerals you are taking.

Using one pharmacy makes drug interactions less likely. The pharmacist will know which medicines you are taking and watch for interactions. Some pharmacies will keep your PMR up to date for you.
Work with your doctor and pharmacist

Here are some questions you can ask:

• What is the name of this medicine? What does it do? What are the side effects? What should I do if I forget to take it?

• When do I start and stop taking this medicine? How do I take it? How should I store it?

• At what time do I take this medicine? Should I take this medicine before meals, after meals, with meals, or on an empty stomach? Should I avoid certain foods or drinks with this medicine?

• Will this medicine work safely with other medicines I am taking?

• Can I do anything instead of or along with taking my medicine to help my symptoms?

• Is there another medicine I can use? Does it work well, and is it safe? Is there a generic or less expensive medicine I can take?

More information

Go to www.aarp.org/rxoptions and enter A095 in the search box, or select the code from the drop-down menu next to the search box. You’ll get more on working with your doctor and forms to help you manage your medicine.
AARP and Walgreens: Knowledge You Can Trust

AARP and Walgreens are working together to put adults 50 and over in charge of their medicine, health, and lives. Through this alliance, AARP and Walgreens will work together to ensure that Americans 50+ have the tools that they need to take greater control of their health. A primary focus of the alliance will be to help educate the nation’s 50+ population about the wise use of medicines.

Know Your Rx Options brochures

- Acid Reflux (GERD)
- Allergic Rhinitis
- Chronic Pain
- Dementia and Alzheimer’s Disease
- High Blood Pressure
- High Cholesterol
- Insomnia
- Nausea and Vomiting
- Osteoarthritis
- Urinary Incontinence

Visit the AARP-Walgreens Alliance Web site at www.aarp.org/walgreens.

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