

I'm 57 years old and had had bypass surgery 5 years ago. I'm taking Lipitor 10 mg daily to keep my bad cholesterol (LDL) around 100. Is my doctor being aggressive enough with my medication?

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We now have evidence that lowering your LDL cholesterol to a level far below 100 may slow the progression of atherosclerosis and in fact may cause reversibility of plaque in arteries. A recent study demonstrated a reversal of plaque if LDL was maintained below 62 for a long period of time. We know that by increasing Lipitor to as high as 80 mg per day or, perhaps, changing to a combination of a statin drug plus Zetia, we can very often achieve such a dramatic lowering of cholesterol. The drug Vytorin combines a statin and Zetia in the same pill, at a lesser cost.

More than 10 million Americans take statin today and most cardiologists feel that these drugs are underutilized. Lowering bad cholesterol to below 100 had been shown in many studies to reduce the risk of heart attack and stroke. In some of these studies, this risk reduction approaches 35-40 % and is easy to achieve. Aggressively lowering the level of LDL cholesterol to below of 62 takes careful monitoring, often maximizing the dose of a statin or using a combination therapy. We can only anticipate that one could expect a further reduction for all cardiovascular events if we were able to achieve this goal.

Statin drugs do not provide significant risk of liver damage, if the physician carefully monitors liver function tests while upping the dose of the medication. Muscle aches and pains are common side effects of statins and somewhat dose related. Fortunately, most patients now are aware of the side effect of leg pain, back pain, and other muscle discomfort these drugs may cause. Upon stopping a statin drug, muscle aches most commonly go away in 2-4 weeks. All in all, the small risk of statin drug therapy is far outweighed by the benefit of these potent medications.