

Statins - Are they right for me?

Information for patients

What are statins?

Statins are a class of medicine used to lower cholesterol. While some of the cholesterol in your blood comes from food, most is made in the body, by the liver. Statins work by reducing the amount of cholesterol made by the liver and also by helping the liver remove some of the cholesterol that is already in the blood. Statins have now been shown to reduce the risk of heart attack and stroke in both people living with and without HIV.

Why are statins recommended?

The British HIV Association (BHIVA) recommends that everyone living with HIV aged 40 and over would benefit from taking a statin to reduce their risk of heart disease. This is even if their cholesterol blood test is normal, or their risk of heart disease is low. Your risk of heart disease increases with age, smoking, having a BMI over 30 and a family history of heart disease.

The new guidance comes from the results collected from REPRIEVE study that was presented at the International AIDS Society Conference on HIV science in July 2023.



Randomized Trial to Prevent Vascular Events in HIV

The REPREIVE study - Reducing cardiovascular risk in people living with HIV

Research has shown that people living with HIV (PLWHIV) are at increased risk of heart disease, compared to HIV negative individuals. REPREIVE was a large randomised controlled study in PLWHIV, which looked at whether taking statin treatment had an impact on reducing cardiac and related events (e.g. heart attacks, unstable angina, strokes and peripheral vascular disease, etc). REPRIEVE enrolled almost 8000 PLWHIV worldwide, between the ages of 40-75 years, most of whom were stable on antiviral treatment. REPRIEVE results showed that cardiac and related events were reduced by 35% in the group given statin treatment, compared to those without. This relative cardiac risk reduction was present even for individuals estimated at low baseline risk.

Following publication of the REPREIVE study results, the British HIV Association (BHIVA) recommends that everyone living with HIV aged 40 and over should consider taking a statin to reduce their risk of heart disease. This is even if their cholesterol blood test is normal, or their risk of heart disease is estimated as low. Statin treatment is however most important for those considered at high risk of heart disease. A person's risk of heart disease can be increased by a number of factors including increasing age, smoking, having a BMI over 30, having high blood pressure, having diabetes, having high cholesterol and/or a family history of heart disease.

Side effects

Like most drugs, statins can have side effects. Common side effects of statins include headaches, tiredness, sleeping pattern change, muscle cramps and gastrointestinal effects (feeling sick, constipation or diarrhea). A small proportion of individuals taking statin treatment and at risk of diabetes may

develop diabetes earlier while on statins. Even for these individuals however, statin therapy will reduce their overall risk of heart disease. Statins can also cause more serious side effects such as liver inflammation (hepatitis), pancreatic inflammation (pancreatitis) and tendon and neurological problems but these are uncommon or rare. If you are worried about side effects, you can discuss this further with your GP.

Interactions

Statins can sometimes interact with other medication, including HIV antiretrovirals. If you decide you wish to start a statin, your HIV clinician will recommend to your GP what statin choice and dose will be suitable to use together with your HIV antivirals. Your GP will check that any selected statin will also not interact with any of your other (non-HIV) medication.

Different types of statins

Some of the more common statins used in the UK are Atorvastatin, Simvastatin, Rosuvastatin and Pravastatin. There are some circumstances where a different one might need to be prescribed or the dose adjusted for example side effects or interactions. Your GP will discuss this with you if this is required.

Other ways to reduce your risk of heart disease

There are many ways you can improve your lifestyle to reduce your risk of heart disease:

- Stop smoking
- Lose weight if your BMI is over 30
- Take regular exercise
- Follow a healthy balanced diet Manage stress
- Get the recommended amount of sleep at night.

Your GP or practice nurse can give you information about reducing your risk of heart disease, quitting smoking and improving your diet.

More information

For more information about statins you can visit: www.nhs.uk/conditions/statins/

And for more information about the REPRIVE Study you can visit: www.reprievetrial.org

For more information on the use of statins please speak to your clinician or GP.

HIV TEAM The Chalmers centre 2a Chalmers street Edinburgh EH3 9ES 07580852672

