

## **Statins and Me.**

Your Doctor has suggested you need a medicine called a 'statin'. Should you take them?

### **What is a statin?**

Statins are medicines that work by stopping your liver from making cholesterol.

Cholesterol is important for some normal function in your body but too much of it makes sludge in the arteries (tubes that carry blood) that leads to blockage of those arteries (just like fat poured down a drain). If the arteries to the heart are blocked, it results in a heart attack. If the arteries to the brain are blocked, it leads to a stroke.

### **Should I take a statin?**

#### Easy Scenario.

Let's do an easy one to start with! If you have had a heart attack or stroke already, it is correct to take a statin as this will greatly reduce your lifetime risk of having another stroke or heart attack. The treatment with statins continues for the rest of your life. This is called '*secondary prevention*' and the vast majority of doctors would agree with this advice.

#### More tricky Scenario.

'My QRISK score is over 10% and I have been advised I need to take a statin.'

This will become more common since all GPs in Ealing now work under the 'Ealing Standard' which recommends patients to take a statin after their QRISK score reaches more than 10%.

OK. First things first. What is QRISK?

QRISK is a scoring system that takes into account your age, gender, ethnicity, postcode, blood pressure, cholesterol and height and weight. It also takes into account if you already have certain illnesses such as diabetes and rheumatoid arthritis. The computer uses all that information to generate a percentage chance of your 10 year risk of having a heart attack or stroke.

So a QRISK score of, for example 15%, means an annual risk of heart attack or stroke of 1.5%. In statistical or betting terms that is a low risk unless **you** are the one that is unlucky enough to have a heart attack or stroke.

### **Does taking a statin mean that I can never have a heart attack or stroke?**

Regrettably not! That would be a perfect medicine and there is no such thing (sadly).

### **What is the 'Number Needed to Treat'?**

The Number Needed to Treat, or NNT, is simply this. It is the number of patients required to take a medicine in order for one patient (out of all of those taking it) to benefit from that treatment.

Imagine for a moment that we could clone you and make lots of human exactly like you! (We can't – not yet!)

In order to prevent **one** heart attack, **sixty** of those clones would have to take a statin for the rest of their lives. That means **fifty nine** would have to take the statin for the rest of their lives, to no benefit to themselves, in order for one person to avoid a heart attack. We are not clever enough (yet) to work out who that one person might be and give the statin to them alone.

If we consider stroke prevention, the NNT is even greater. Of those clones, **two hundred and sixty eight** would have to take a statin for the rest of their lives in order for **one** stroke to be prevented.

### **Surely the odds are in my favour to not take a statin?**

Yes.

### ***But!!***

Heart attacks can be fatal and having a stroke can leave you completely disabled and relying on other people to do everything for you.

### **How do you manage risk?**

If you live your life trying to minimise risk and maximise your health and that is your main goal, then you are more likely to agree to take the statin since it might improve your chance to not have a heart attack or stroke.

If, however, you understand that life is a series of relative risks – every time you get into a car for drive you have a (small) chance of death and even as a pedestrian – you may feel more comfortable to not take the statin since the odds are in your favour.

### **By taking a statin, I can eat what I want?**

A very massive '**No**' here! Lifestyle goes hand in hand with good health.

Not smoking, drinking alcohol within guidelines, having a normal body weight and taking regular exercise are the most important things you can do to help yourself stay well as you get older.

### **I'm confused now and don't know what to do?**

Please talk to your GP. This leaflet is to help you think in the correct way so that **you** can make a decision with your doctor about your health. We want you to be in the driving seat of your own future in health terms.

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