



Limited benefit from statins in acute coronary syndrome

Clinical question

How effective is early treatment with statins in patients with acute coronary syndrome (ACS)?

Bottom line

Compared to placebo or usual care, initiation of statin therapy within 14 days following ACS does not reduce the risk of death, myocardial infarction or stroke within 4 months, but reduces the occurrence of unstable angina at 4 months following ACS. Serious side effects from early treatment with statins were rare (0.1%), and serious muscle toxicity was mostly observed with simvastatin 80mg.

Caveat

In most of the landmark trials of statins in patients with chronic coronary heart disease (CHD), a benefit of treatment was not evident until 1–2 years after randomisation. Therefore, some of the benefit of statin treatment in the period up to 4 months after ACS may only become manifest after 4 months.

Context

Long-term therapy with statins (for at least 1 year) has been shown to reduce the risk of heart attack, stroke and all-cause mortality in patients with and without established CHD. The early period following ACS is a critical stage of CHD, with a high risk of recurrent events and death. The effects of early treatment with statins in patients suffering from ACS are unclear.

Cochrane Systematic Review

Vale N, et al. Statins for acute coronary syndrome. Cochrane Reviews, 2011, Issue 6. Article No. CD006870. DOI: 10.1002/14651858.CD006870.pub2.

This review contains 18 studies involving 14,303 participants.

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