American Heart Association:

INITIATION OF HIGH INTENSITY STATIN THERAPY

- Any adult patient (including diabetes patients) \(<75\) years of age who have clinical Arteriosclerotic Cardiovascular Disease (ASCVD), which include acute coronary syndrome, history of myocardial infarction (MI), stable or unstable angina, coronary or other arterial revascularization, stroke, transient ischemic attack (TIA), peripheral arterial disease of atherosclerotic origin.

- Patients with Type 2 Diabetes, age \(40 - 75\) years of age, who have estimated 10-year ASCVD risk \(\geq 7.5\%\) (LDL-C \(70 - 189\) mg/dL).

- Any adult (including diabetes patients) \(\geq21\) years of age with primary LDL-C \(\geq190\) mg/dL (10-year ASCVD risk estimation is not required).

- Rationale
  - Statins reduce the relative risk of ASCVD events
    - Similarly in individuals with and without diabetes
• In primary and secondary prevention in those with diabetes
• High-intensity statins reduce ASCVD events more than moderate intensity statins.

• Use high dose intensity statin therapy that is maximally tolerated
• Examples of High intensity statins are *Atorvastatin 40 - 80 mg, Rosuvastatin 20 (40) mg. See Table 1

* Bold statin dosages were evaluated in Randomized Controlled Trials (RCTs), which demonstrated a reduction in major cardiovascular (CV) events. Statins and doses approved by the US FDA but not tested in the RCTs reviewed are listed in italics.

INITIATION OF MODERATE INTENSITY STATIN THERAPY
• For patients with Diabetes Age 40 - 75 years of age WITHOUT additional atherosclerotic cardiovascular disease risk factors or LDL-C 70 - 189 mg/dL.
• In adults with diabetes, who are <40 or >75 years of age, it is reasonable to evaluate the potential for ASCVD benefits and for adverse effects, for drug-drug interactions, and to consider patient preferences when deciding to initiate, continue, or intensify statin therapy.
• Examples of Moderate intensity statins are *Rosuvastatin (5) 10 mg, Atorvastatin 10 (20) mg, Simvastatin 20-40 mg, Pravastatin 40 (80) mg, Lovastatin 40 mg, Fluvastatin 40 mg bid, Pitavastatin 2-4 mg, Fluvastatin XL 80 mg. See Table 1

* Bold statin dosages were evaluated in RCTs, which demonstrated a reduction in major CV events. Statins and doses approved by the US FDA but not tested in the RCTs reviewed are listed in italics

ADA: Diabetes Patients and Statin Therapy

LIPID PROFILE
• Obtain a lipid profile at initiation of statin therapy and periodically thereafter as it may help to monitor response to therapy.
• Calculate the Atherosclerotic Cardiovascular Disease (ASCVD) Risk using the AHA/ACC Risk calculator in patients 40 – 75 years without additional ASCVD risk factors: http://tools.acc.org/ascvd-risk-estimator/

INITIATION OF HIGH INTENSITY STATIN THERAPY

• Patients of ALL AGES with DIABETES AND Atherosclerotic CardiOvascular Disease (ASCVD), recommend high-intensity statin therapy, which should be added to lifestyle modification therapy.

• Lifestyle modifications are the foundation of ASCVD prevention include adhering to a heart healthy diet, regular exercise habits, avoidance of tobacco products and maintenance of a healthy weight

INITIATION OF MODERATE INTENSITY STATIN THERAPY

• For patients with DIABETES AGE 40 - 75 years of age WITHOUT additional atherosclerotic cardiovascular disease risk factors, it is recommended that they use moderate intensity statins and lifestyle modification therapy.

Table 1* High and Moderate-Intensity Statin Therapy

<table>
<thead>
<tr>
<th>High-Intensity Statin Therapy (Lowers LDL cholesterol by ( \geq 50% ))</th>
<th>Moderate-Intensity Statin Therapy (Lowers LDL cholesterol by 30 to &lt;50%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Atorvastatin 40 – 80 mg</td>
<td>Atorvastatin 10 to 20 mg</td>
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<tr>
<td>Rosuvastatin 20 – 40 mg</td>
<td>Rosuvastatin 5 to 10 mg</td>
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<td>Fuvastatin XL 80 mg</td>
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<td>Pitavastatin 2 to 4 mg</td>
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</table>

*Once-daily dosing
References


