

Health Notes by Evelyn E. Ames Statins: Should You Be Concerned? Questions to Ask!

A request has been to provide information about statins and to address the issue of side effects, especially muscle weakness, that patients should ask their health care providers. To know more about why statins are prescribed, plus additional information not covered in **Health Notes**, take an interactive tutorial at <http://www.nlm.nih.gov/medlineplus/tutorials/managingcholesterol/hlm/index.htm> as well as Medline Plus site: <http://www.nlm.nih.gov/medlineplus/cholesterol.html>.

Statins: According to the National Institutes of Health, there are currently five statin drugs on the market in the United States: lovastatin, simvastatin, pravastatin, fluvastatin, and atorvastatin (cerivastatin was withdrawn from the market by the manufacturer in August 2001). A new drug being heavily advertised on TV is Zetia (suggested to help lower cholesterol by reducing the amount that is absorbed by the intestines). Ezetimibe, brand name, is a cholesterol absorption inhibitor. This type of medicine is often given in combination with a statin. The combination of ezetimibe and simvastatin (brand name: Vytorin) is an example. Descriptions and names of common cholesterol-lowering medicines (statins, resins, fibrates, niacin (nicotinic acid), and Cholesterol absorption inhibitors are found at <http://familydoctor.org/801.xml>. Statins are usually given in a single dose at the evening meal or at bedtime. The main reason is that the body makes more cholesterol at night than during the day.

Side Effects of Statins: Information from NIH suggests that statins are well tolerated by most patients, and serious side effects are rare. A few patients experience an upset stomach, gas, constipation, and abdominal pain or cramps; these symptoms usually are mild to moderate and generally go away as the body adjusts. Rarely do patients develop abnormalities in blood tests of the liver. Also rare is the side effect of muscle problems. The symptoms are muscle soreness, pain, and weakness. The following information about side effects, especially the serious effect of muscle weakness, comes from Mayo Clinic cardiologist, Gerald Gau and his colleagues.

Question: How do you know if you have rhabdomyolysis from statin use? What are the symptoms?

Answer Rhabdomyolysis is a rare but potentially life-threatening side effect of statins. The most common signs and symptoms of rhabdomyolysis include:

- Severe muscle aching — in which all your muscles may hurt and be tender to the touch
- Muscle weakness
- Dark or cola-colored urine from muscle breakdown products

Explanation: “At high doses, statin medications can impair production of certain proteins involved in muscle metabolism and function. This may result in muscle pain and tenderness (statin myopathy). If you notice muscle aching — but it’s not severe — you should stop taking the medication and contact your doctor. Muscle aching usually goes away within a couple of weeks after stopping the statin drug. In severe cases, statins may cause muscle cells to break down (rhabdomyolysis). If you have signs and symptoms of rhabdomyolysis, stop taking the medication immediately and seek medical treatment without delay.” “The risk of rhabdomyolysis increases with the dose of statins. In addition, certain drugs when taken in combination with statins increase the risk of rhabdomyolysis. These include: Gemfibrozil (Lopid), Niacin at doses greater than 1.5 grams a day, Verapamil, and Amiodarone.

What about Atorvastatin? (Other Names: Caduet® (combination with amlodipine), Lipitor® Site for this information is <http://www.safemedication.com/displaydrug.cfm?id=600045> **How should this medicine be used?** It is usually taken once a day with or without food and around the same time every day. The doctor may start a patient on a low dose of atorvastatin and gradually increase the dose, not more than once every 2–4 weeks. **What special precautions should be followed?** Before taking atorvastatin,

- tell your doctor and pharmacist if you are allergic to atorvastatin or any other medications.
- tell your doctor and pharmacist what prescription and nonprescription medications, vitamins, nutritional supplements, and herbal products you are taking or plan to take. Be sure to mention any of the following: antifungal medications such as itraconazole (Sporanox) and ketoconazole (Nizoral);

cimetidine (Tagamet); cyclosporine (Neoral, Sandimmune); digoxin (Lanoxin); erythromycin (E.E.S., E-Mycin, Erythrocin); other cholesterol-lowering medications such as fenofibrate (Tricor), gemfibrozil (Lopid), and niacin (nicotinic acid, Niacor, Niaspan); and spironolactone (Aldactone).

- tell your doctor if you have liver disease. Your doctor will probably tell you not to take lovastatin.
- tell your doctor if you drink large amounts of alcohol and if you have ever had liver disease.
- if you are having surgery, including dental surgery, tell the doctor or dentist that you are taking atorvastatin.
- ask your doctor about the safe use of alcoholic beverages while you are taking atorvastatin. Alcohol can increase the risk of serious side effects.

What side effects can Atorvastatin cause? Tell the doctor if any of these symptoms are severe or do not go away: diarrhea, headache, difficulty falling asleep or staying asleep, dizziness, joint pain, sore throat, and upper respiratory infection. Some side effects are serious. The following symptoms are uncommon, but if you experience any of them, call the doctor immediately: muscle pain, tenderness, or weakness, lack of energy, fever, chest pain, swelling of the hands, feet, ankles, or lower legs, nausea, extreme tiredness, unusual bleeding or bruising, loss of appetite, pain in the upper right part of the stomach, flu-like symptoms, yellowing of the skin or eyes, rash, hives, itching, difficulty breathing or swallowing, swelling of the face, throat, tongue, lips, eyes, hands, feet, ankles, or lower legs, hoarseness, pain during urination, frequent urge to urinate. If you experience a serious side effect, you or your doctor may send a report to the Food and Drug Administration's (FDA) MedWatch Adverse Event Reporting program online [at <http://www.fda.gov/MedWatch/report.htm>] or by phone [1-800-332-1088].

Question: Can statins affect the libido? A topic of debate on many online message boards, cardiologists at Mayo Clinic report “there is no scientific evidence that statins reduce sex drive in either men or women.... Loss of libido has many potential causes, including aging, illness, chronic pain, medications and depression.... If you believe that your loss of sex drive coincides with the start of statin use and no other cause can be identified, your doctor may recommend switching medications to see if it makes a difference.”