



Letter to the editor: The Pundit Speaks
By Randolph M. Howes, M.D., Ph.D.
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"Statin Risks: Current Status"

First things first. In November of 2010, cardiologists at Johns Hopkins Hospital found that, among healthy adults, only those with measurable buildup of artery-hardening calcium would significantly benefit from cholesterol-lowering (statin) treatment. Giving these strong drugs for "preventative-measures only" to healthy adults is not recommended. Hopkins investigators said, "Our results tell us that only those with calcium buildup in their arteries have a clear benefit from statin therapy. Those who are otherwise healthy and have no significant calcification should, with their physician, focus on aggressive lifestyle improvements instead of early initiation of statin medications. The statin drugs should not be approached like diet and exercise as a broadly based solution for preventing coronary heart disease." Note: as many as five percent of people on statins develop serious side effects, such as muscle pain and liver damage, while one in 255 will develop diabetes. The general rule is statins help people who have at least a 10 percent chance of a heart attack in the next 10 years. Last June, a report in the Journal of the American Medical Association analyzed five additional randomized trials and concluded the increased risk for diabetes was small but real for people taking higher doses of any statin. That report calculated that one fewer patient would experience a heart attack or other cardiovascular problem for every 155 patients treated for a year — and there would be one additional case of diabetes for every 498 patients treated. As they say, "You do the math." In short, we are giving massive amounts of drugs to people, who probably do not need them and we are exposing millions of people to unnecessary risks of developing serious complications from these highly touted but potentially dangerous drugs. Additionally, since statin drug manufacturers are targeting children, we have no information of the long term effects in this age group. Statins have long been known to cause severe muscle pain that on occasions becomes a serious breakdown of muscle that can lead to kidney failure, even death. A 2012 article in Archives of Internal Medicine found an increased risk of developing type 2 diabetes in older women taking statin drugs.

In the America that I love, we know that many statin users wrongly assume that pills (including statins) will let them eat whatever they want. But, the medical literature has shown for decades that a balanced nutritious diet and exercise are frequently better choices for improving overall health and cardiovascular health than gulping down pounds of pills. Personally, I had to stop statins because of serious side effects, including muscle trauma and fatigue. Some consider the cholesterol story to be a highly profitable hoax but some data supports statin use in selected patients.

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