

Letter to the Editor: The Pundit Speaks

By Randolph M. Howes, M.D., Ph.D.

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“Cholesterol is No Longer a Numbers Game”

For over three decades, we were told that our risk of heart attacks and strokes were directly related to our cholesterol numbers (LDL, HDL), but that notion is changing. Gone are the recommended LDL- and non-HDL-cholesterol targets, specifically treating patients with cardiovascular disease to less than 100 mg/dL or the optional goal of less than 70 mg/dL. There is no evidence from randomized, controlled clinical trials to support treatment to a specific target number. Thus, the new guidelines make no recommendations for specific LDL-cholesterol or non-HDL target numbers for the prevention of heart disease. The new guidelines were issued by the American Heart Association and American College of Cardiology. Yet, these guidelines will more than double the population of adults taking statin drugs, because a cholesterol guideline panel has set a lower threshold for using cholesterol lowering medicines to reduce risk. They recommend using statin drugs such as Lipitor and Zocor, and they identified four groups of people they believe this will help. Such a policy would mean that one-third of adults (44 percent of men and 22 percent of women) would be told to take statins. Dr. Steven Nissen of Cleveland Clinic said, "It will be controversial, there's no question about it. For as long as I remember, we've told physicians and patients we should treat their cholesterol to certain goal levels (numbers). Those goals were never based on any kind of careful scientific study." Please note that roughly half the cholesterol panel members have financial ties to makers of heart drugs. Heart disease is the leading cause of death worldwide. Most cholesterol is made by the liver, so diet changes have a limited effect on it. Current guidelines say total cholesterol should be under 200, and LDL, or "bad cholesterol," under 100. Other drugs such as niacin and fibrates can be added to statins, but no studies prove their preventative effectiveness. Cardiologist Dr. Harlan Krumholz of Yale said, "Chasing numbers can lead us to using drugs that haven't been proven to help patients. You can make someone's lab test look better without making them better." And, statins can increase risk of muscle problems, diabetes, cognitive decline (dementia), mood swings, sleep difficulties and a change in aggression scores. Please remember, Dr. Steven Nissen of the Cleveland Clinic and Dr. Roger Blumenthal of Johns Hopkins, have said, "Although the drugs have been shown to reduce cholesterol, their manufacturers acknowledge that they've never been shown to prevent heart attacks or other life-threatening events." But, Nissen later said, "Statin have had a profound impact on heart disease mortality."

In the America that I love, AstraZeneca's Crestor had 2012 sales of \$8.3 billion. Confusion rules! Please discuss medications thoroughly with your doctor.

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