WHAT ARE CHOLESTEROL-LOWERING MEDICATIONS?

If your doctor has decided that you need to take medicine to reduce high cholesterol, it’s because you’re at high risk for heart disease or stroke. Usually the treatment combines healthy lifestyle changes including diet and physical activity, and medicine.

Most heart disease and many strokes are caused by a buildup of fat, cholesterol and other substances called plaque in the inner walls of your arteries. The arteries can become clogged and narrowed, and blood flow is reduced. If a blood clot forms and blocks blood flow to your heart, it causes a heart attack. If a blood clot blocks an artery leading to or in the brain, a stroke results.

By following your doctor’s advice, you can help prevent these diseases.

What type of medicine may I be prescribed?

Various medications can lower blood cholesterol levels. Statins are recommended for most patients because they are the only cholesterol-lowering drug class that has been directly associated with reduced risk for heart attack and stroke.

Statins [HMG-CoA reductase inhibitors] prevent the production of cholesterol in the liver. Their major effect is to lower LDL cholesterol. Some names are lovastatin, pravastatin, simvastatin, fluvastatin and atorvastatin.

You should talk to your doctor about the risks and benefits of statin therapy if you fall into one of the following groups:

- Adults with known cardiovascular disease, including stroke, caused by atherosclerosis
- Adults with diabetes, aged 40-75 years with an LDL (bad) cholesterol level 70-189 mg/dL
- Adults with LDL (bad) cholesterol level of greater than or equal to 190 mg/dL
- Adults, aged 40 – 75 years, with LDL (bad) level of 70-189 mg/dL and a 7.5% or greater 10-year risk of developing cardiovascular disease from atherosclerosis

Some people who do not fall into these four major categories may also benefit from statin therapy.

Learn more about cholesterol at: heart.org/cholesterol
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What other medications may be prescribed?

Your healthcare provider will monitor your progress with your statin therapy and recommended lifestyle changes. If you are having serious side effects or don’t have the desired response to statin therapy and lifestyle changes alone, he or she may consider other medications as well.

- **Bile acid binders (resins)** cause the intestine to get rid of more cholesterol. Some names are cholestyramine, cholestipol and colesevelam.

- **Fibrates** are especially good for lowering triglyceride (blood fat) levels and, to a lesser extent, raising HDL (good) cholesterol levels. Some names are gemfibrozil, clofibrate and fenofibrate.

- **Niacin (nicotinic acid)** is a B vitamin that limits the production of blood fats in the liver. Take this only if your doctor has prescribed it. It can lower total cholesterol, LDL (bad) cholesterol and triglyceride (blood fat) levels. It can also raise HDL (good) cholesterol levels.

- **PCSK9 Inhibitors** bind to and inactivate a protein in the liver in order to lower LDL (bad) cholesterol. They can be given in combination with a statin. Some names are alirocumab and evolocumab.

- **Selective cholesterol absorption inhibitors**, like ezetimibe, work by preventing cholesterol from being absorbed in the intestine.

Your doctor will work with you to decide which medicine, or combination of medicines, is best for you. Always follow your doctor’s instructions carefully, and let the doctor know if you have any side effects. Never stop taking your medicine on your own!

How do I know if my medicine is working?

Your doctor will test your blood cholesterol level when needed. Together with your doctor, set a goal and ask how long it may take to reach that goal.

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