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, physical activity, not smoking 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 healthcare provider’s advice, you can help prevent these diseases.

What medicine may I be prescribed?
Various medications can lower blood cholesterol levels. Statins are recommended for most patients and have been directly associated with reducing risk for heart attack and stroke by 21 percent. Statins continue to provide the most effective LDL-lowering treatment in most cases.

Statins (HMG-CoA reductase inhibitors) prevent the production of cholesterol in the liver. Their major effect is to lower LDL (bad) cholesterol (LDL-C). 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 (CVD), including stroke, caused by atherosclerosis
- Adults with LDL-C level of greater than or equal to 190 mg/dL
- Adults aged 40 – 75 years with diabetes
- Adults, aged 40 – 75 years, with LDL-C level of 70 – 189 mg/dL and a 5% to 19.9% 10-year risk of developing CVD from atherosclerosis, with risk enhancing factors
- Adults aged 40 – 75 years, with LDL-C level of 70-189 mg/dL and a 20% or greater 10-year risk of developing CVD from atherosclerosis

Some people who do not fall into these groups may also benefit from statin therapy.

What other drugs may be prescribed?
Your healthcare provider will monitor your progress with your statin therapy and recommended lifestyle changes. If you’re having serious side effects or don’t have the desired response to statin therapy and lifestyle changes alone, they may consider other medications as well.

If you have known CVD and are already taking the highest statin you can tolerate and you’re LDL-C is still 70 mg/dL or above, one or more of the following medicines may be
prescribed. They can all be given in combination with a statin.

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

**Ezetimibe (cholesterol absorption inhibitors)** works by preventing cholesterol from being absorbed in the intestine.

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

**Fibrates** and **niacin** are triglyceride-lowering drugs and have mild LDL-lowering action, but data does not support their use as an add-on to statins. Take niacin only if your doctor prescribes it.

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.