

Responding to Statin Myths

Myth: Statins can cause memory loss, cognitive decline or dementia.

Response: Taking a statin is not any more likely to cause dementia or cognitive decline than if you do not take a statin. Statins taken long-term could improve cognitive function due to their ability to help prevent strokes and protect the health of the arteries in the brain.

Myth: Statins can cause cancer.

Response: There is no increased cancer or cancer-related death rate associated with statins or reducing your cholesterol.

Myth: Statins will make me sick.

Response: You may experience diarrhea, nasal congestion and/or headaches when starting to use statins. These side effects should go away as your body adjusts to the medication. Contact your doctor if these symptoms last more than 2 weeks or if you are considering stopping the medication. There are other options available.

Myth: Statins can cause cataracts.

Response: There is no conclusive evidence that statin use is associated with increased risk of cataracts. There has been no occurrence of statins causing cataracts in high-quality human trials.

Myth: Statins cause diabetes.

Response: There is evidence that statins may be associated with the progression of diabetes in patients who already have higher than normal blood sugar levels (prediabetes or diabetes range). All major guidelines recommend statin therapy in diabetic patients ages 40 to 75 years old because the benefits greatly outweigh the risks of moderately higher blood sugar levels.

Myth: Statins can be expensive.

Response: Statin medications are very affordable. Blue Advantage® has worked to cover your cost of a statin to make it as affordable as possible. All statins on the Blue Advantage drug list are \$0. This includes the most commonly used statins like atorvastatin, rosuvastatin, simvastatin and others.

Myth: Only people with high cholesterol benefit from taking a statin.

Response: Statin use is not limited to only treating high cholesterol. Individuals with diabetes and normal cholesterol levels can significantly reduce their risk of heart attack and/or stroke by taking a statin.

Myth: If I take a statin, I will experience muscle pain.

Response: Most people on a statin do not experience any muscle pain issues. Though possible, less than 5% have reported such issues as a side effect of taking a statin. For nine out of 10 people, muscle pain attributed to statins is caused by other factors such as arthritis. Rhabdomyolysis may occur in less than one in 23,000 who are being treated with a statin.

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