

What Are Cholesterol-Lowering Medications?

If you have been told you need cholesterol-lowering medication, it's because you're at high risk for heart attack or stroke. Treatment usually combines healthy lifestyle changes and medication.

Most heart attacks and many strokes are caused by a buildup of plaque in the inner walls of your arteries. The arteries become clogged and narrowed, which reduces blood flow. 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.

You can help prevent a heart attack or stroke by working with your health care team to reduce your cholesterol and other risk factors.



What medication may I be prescribed?

Various medications can lower blood cholesterol levels. Statins (HMG-CoA reductase inhibitors) are recommended for most patients. Statins are effective for lowering LDL (bad) cholesterol. They have been directly associated with reducing the risk of heart attack and stroke.

Statins prevent the production of cholesterol in the liver. Some names of statins are:

- Lovastatin
- Fluvastatin
- Pravastatin
- Atorvastatin
- Simvastatin

Talk to your health care professional about the risks and benefits of statin therapy if you are in one of the following groups:

- Adults with known cardiovascular disease (CVD), including stroke, caused by atherosclerosis
- Adults ages 40-75 years with diabetes
- Adults with LDL-cholesterol (LDL-C) level of 190 mg/dL or higher

- Adults, ages 40-75 years, with LDL-C level of 70-189 mg/dL and a 5% to less than 20% 10-year risk of developing CVD from atherosclerosis, with risk-enhancing factors
- Adults ages 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 adults who aren't in these groups also may benefit from statin therapy.

Children and teens ages birth-19 with familial hypercholesterolemia, an inherited defect in how the body recycles LDL (bad) cholesterol, should also be assessed for statin therapy.

What other drugs may be prescribed?

Your health care professional will monitor your progress on your statin therapy. They may change the dose or add other medications if you:

- Are having serious side effects
- Don't have the desired response to statin therapy and lifestyle changes

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

Ezetimibe (cholesterol absorption inhibitors) works by preventing cholesterol from being absorbed in the intestine. It's the most commonly used non-statin agent.

PCSK9 inhibitors are powerful LDL-lowering drugs. There are two forms: monoclonal antibodies and small interfering RNA (siRNA). The monoclonal antibodies type bind to and inactivate a protein in the liver to lower LDL (bad) cholesterol. Some names are:

- Alirocumab
- Evolocumab

The siRNA type works differently and lowers LDL levels by stopping the liver from producing PCSK9. The available siRNA is called inclisiran.

Adenosine triphosphate-citrate lyase (ACLY) inhibitors block the production of cholesterol in the liver. They are used in combination with lifestyle changes and statins to further decrease LDL cholesterol in adults with hereditary high cholesterol and people with heart disease who need to further lower their LDL. Some names are:

- Bempedoic acid
- Bempedoic acid and ezetimibe

Bile acid sequestrants force the liver to use cholesterol from your blood to make more bile acid, which reduces your cholesterol level. Some names are:

- Cholestyramine
- Colesevelam
- Colestipol

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

Your health care professional will work with you to decide which medication, or combination of medications, is best for you. Always follow their instructions, and let them know if you have any side effects. Never stop taking your medication on your own!

How do I know if my medicine is working?

Your health care professional will test your blood cholesterol levels as needed to monitor your progress.

HOW CAN I LEARN MORE?

- 1 Call 1-800-AHA-USA1 (1-800-242-8721) or visit heart.org to learn more about heart disease and stroke.
- 2 Sign up for our monthly *Heart Insight* e-news for heart patients and their families at HeartInsight.org.
- 3 Connect with others sharing similar journeys with heart disease and stroke by joining our Support Network at heart.org/SupportNetwork.

Do you have questions for the doctor or nurse?

Take a few minutes to write down questions for the next time you see your health care professional.

For example:

How often should I have my cholesterol checked?

Should I avoid any foods or other medicines?

MY QUESTIONS:

We have many other fact sheets to help you make healthier choices to reduce your risk of heart disease, manage your condition or care for a loved one. Visit heart.org/AnswersByHeart to learn more.