

# The Medical Letter®

## On Drugs and Therapeutics

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### IN BRIEF

#### Atorvastatin for Stroke Prevention

Statins have been shown to reduce the risk of stroke in patients at high risk for cardiovascular disease ([Treat Guidel Med Lett 2005; 3:15](#)). A recent issue of The New England Journal of Medicine includes the results of a study sponsored by the manufacturer in which 80 mg of atorvastatin (*Lipitor* – Pfizer) or placebo was given to 4731 patients without coronary artery disease who had had a stroke or transient ischemic attack (TIA) within one to six months before study entry ([The Stroke Prevention by Aggressive Reduction in Cholesterol Levels \[SPARCL\] Investigators. High-dose atorvastatin after stroke or transient ischemic attack. N Engl J Med 2006; 355:549](#)). Patients were not required to have elevated cholesterol levels to enroll. The authors conclude that the study results support starting atorvastatin treatment soon after a stroke or TIA.

The primary study endpoint was a nonfatal or fatal stroke. During a median follow-up of 4.9 years, patients treated with atorvastatin had 265 strokes compared to 307 strokes with placebo. Patients treated with atorvastatin had 56 fewer ischemic strokes and 22 more hemorrhagic strokes. They also had 39 fewer coronary events. There were 216 deaths among patients treated with atorvastatin and 211 among those treated with placebo.

Whether patients with a recent ischemic stroke or TIA would be as well protected against a recurrence and against coronary events by a lower dose of atorvastatin or by another less potent statin remains to be determined. The risk of myopathy and rhabdomyolysis with statins is dose-related; atorvastatin is the second-most potent statin on the US market (rosuvastatin is the most potent), and 80 mg is its maximum dose. Statins have an antithrombotic effect, and an increase in hemorrhagic stroke in patients with cerebrovascular disease treated with statins has been reported previously ([Heart Protection Collaborative Study, Lancet 2004; 363:757](#)).

It is doubtful whether patients with a recent hemorrhagic stroke should be treated with statins at all, let alone a maximum dose of atorvastatin.

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