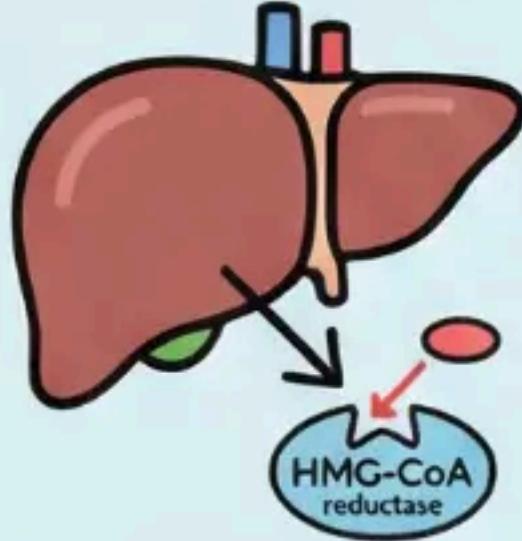


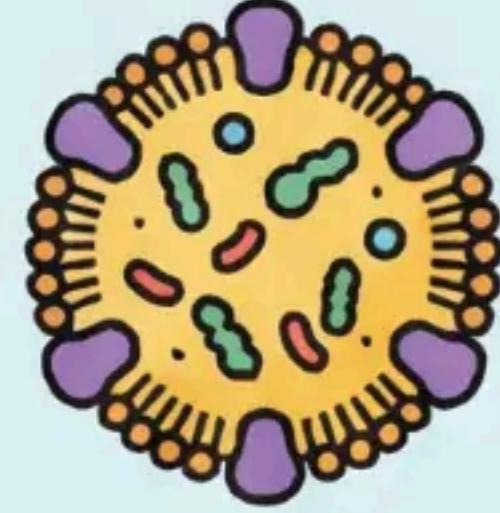
STATINS: Your Questions Answered

Evidence-Based Information for Patients

1. HOW STATINS WORK



- Block **HMG-CoA reductase** enzyme in liver that produces cholesterol
- Reduce LDL ("bad") cholesterol by 20-50% depending on dose
- May have **anti-inflammatory** effects and help stabilize plaques
- Can reduce cardiovascular events within 1-2 years of treatment



2. WHEN ARE STATINS RECOMMENDED?



✓ History of heart attack or stroke



✓ Diabetes with additional cardiovascular risk factors



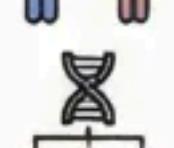
✓ High LDL cholesterol levels (typically >5.0 mmol/L)



✓ 10-year cardiovascular disease risk $\geq 7.5\%$



✓ Age 40-75 with high cholesterol and risk factors



✓ Familial hypercholesterolemia (genetic high cholesterol)

3. BENEFITS VS. RISKS



BENEFITS

POTENTIAL SIDE EFFECTS

- Reduce LDL cholesterol by 20-50%
- Reduce heart attack risk by 20-30%
- Reduce stroke risk by 20-30%
- Reduce cardiovascular death
- Generally well-tolerated
- Proven safe in millions of patients
- Decades of clinical evidence

- Muscle pain/weakness (5-10%)
- Usually mild and manageable
- Digestive problems (uncommon)
- Liver enzyme elevation (rare)
- Mental fuzziness (very rare)
- Serious events extremely rare (1 in 1-2 million)



KEY TAKEAWAY: For most people at cardiovascular risk, the benefits of statins far outweigh the risks. Side effects are manageable and often resolve with dose adjustment or switching medications. **Talk to your healthcare provider** about whether statins are right for you.