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F275 JACC March 27, 2012 Volume 59, Issue 13



WHICH TYPE OF STATINS, HYDROPHILIC STATINS OR LIPOPHILIC STATINS, IS BETTER FOR DIABETIC PATIENTS AFTER ACUTE MYOCARDIAL INFARCTION?

i2 Poster Contributions McCormick Place South, Hall A Saturday, March 24, 2012, 9:30 a.m.-Noon

Session Title: Adjunct Pharmacology

Abstract Category: 21. Pharmacotherapy - Interventional Aspects

Presentation Number: 2536-636

Authors: <u>Ryu Shutta</u>, Masami Nishino, Ayano Ishiyama, Naotaka Okamoto, Akihiro Tanaka, Takeshi Masaki, Naoki Mori, Atsushi Kikuchi, Daisuke Nakamura, Takahiro Yoshimura, Yasuharu Lee, Masayuki Taniike, Nobuhiko Makino, Hiroyasu Kato, Yasuyuki Egami, Jun Tanouchi, Yoshio Yamada, Hisaki Morita, Yasuhiko Sakata, Issei Komuro, Osaka Rosai Hospital, Sakai, Osaka, Japan, Osaka University, Japan

Background: Statins have beneficial effects on cardiovascular diseases. However, it is unclear which type of statins, hydrophilic statin (Hydrostatin) or lipophilic statin (Lipo-statin), are better for diabetic patients after acute myocardial infarction (AMI). In this study, we investigated type of statins and the effects on protection of major adverse cardiac events (MACE).

Methods: 1020 diabetic patients after AMI who received statins were enrolled. We divided them into two groups (Hydro-statin group (n=472) and Lipo-statin group (n=548)). Multivariate-adjusted hazard ratios (adjusted HR) and 95% confidence interval (95% CI) were estimated by means of multivariate analyses with MACE. We compared lipid profiles, hemoglobin A1C (HbA1C), high sensitive-C reactive protein (hs-CRP) and ejection fraction (EF) and left ventricular end-diastolic diameter (LVDd) measured by echocardiography at chronic phase among representative 100 patients.

Results: Serum LDL-C level were significantly lower in Lipo-statin than Hydro-statin (p=0.031). The other parameters were similar between two groups. However, multivariate analyses showed Hydro-statin significantly reduced the incidence of MACE than Lipo-statin (12.5% vs. 17.3%, adjusted HR: 0.636, 95% CI: 0.437-0.926, p=0.018).

Conclusions: Although lipid profile could not be improved, hydrophilic statin may be better than lipophilic statin on protection against cardiovascular events in diabetic patients after AMI.