

## Post-AMI statin use lowers subsequent HF hospitalization risk

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*MedWire News:* Patients with acute myocardial infarction (AMI) who are prescribed statin therapy prior to hospital discharge have significantly fewer subsequent hospitalizations for heart failure (HF) providing they do not have mitral regurgitation (MR), report researchers.

"Recent studies suggest that statin therapy reduces hospitalizations for HF," explain Doron Aronson (Rappaport Medical School, Technion, Haifa, Israel) and fellow investigators.

"However, few data exist regarding the role of statins in preventing HF after AMI. In addition, the potential impact of left ventricular ejection fraction (LVEF) and coexisting functional MR on the efficacy of statin therapy was not considered."

Aronson and team assessed whether treatment with statins initiated shortly after AMI reduced the risk for subsequent readmission to hospital in a group of 1563 AMI patients. The researchers also measured LVEF and grade of MR using echocardiography.

Overall, 1048 (67.1%) of the participants were prescribed statins following AMI.

Writing in the *American Journal of Cardiology*, Aronson *et al* note that during a median follow-up period of 17 months the rate of hospitalization for HF was significantly lower among patients taking statins than those not taking statins, at 6.5% versus 14.8% (multivariate hazard ratio=0.62).

The researchers found a significant affect of MR, but not LVEF, on the benefits of statin therapy. AMI patients who had hemodynamically significant MR obtained no benefit from statin therapy, whereas those without MR gained the most benefit from statin therapy.

The authors suggest that "findings specific to this subset should be validated in a larger, broader spectrum of patients with HF."

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