



STATIN DRUGS AND RISK OF ADVANCED PROSTATE CANCER

In addition to the well-known cardiovascular benefits from using statin medication for patients with elevated cholesterol levels, there is now evidence that statins can benefit patients with prostate cancer as well.

In the *Journal of the National Cancer Institute*, Volume 98, Number 24, December 20, 2006, pages 1819-1825, the authors, Elizabeth Platz, et. al., investigate the association of statin use with total and advanced prostate cancer. They analyzed data from an ongoing, prospective study involving approximately 35,000 U.S. male health professionals who were cancer free in 1990, and were followed through 2002.

During 376,939 person years of follow-up, there were 2,579 cases of prostate cancer found. Three hundred and sixteen of them were advanced (either locally advanced, metastatic, or fatal). The relative risk for advanced disease was reduced by approximately 50% in patients who were current statin users, and of metastatic or fatal disease, there was more than a 60% reduction for current statin use compared with no current use.

Risk of advanced disease was even lower with longer statin use. For men treated with a statin for five or more years, there was a 74% reduction in risk of developing advanced prostate cancer. There was not a reduction in the overall risk of prostate cancer, but a marked reduction in the risk of advanced, and especially metastatic, or fatal prostate cancer.

The authors explain that men who currently use statin drugs had about half the risk of advanced prostate cancer, and less than half the risk for metastatic or fatal prostate cancer, compared to men who did not currently use one of the statin drugs. The longer that a man used a statin drug, the lower the risk for developing advanced prostate cancer. They noted that longer term users also had a lower risk of high-grade disease, although this latter figure did not quite achieve statistical significance.

One of the most intriguing findings to me was the analysis that in men who had used statins for at least five years, the total number of cases of prostate cancer that developed remained relatively large at 126. However, for developing advanced or metastatic disease, the number of cases with long-term ever

STATIN DRUGS.....

Page 2

statin use was only 3. Even more remarkably, with long-term statin use, the number of men who developed fatal disease was **ZERO**. The expected number of men who should have developed metastatic or fatal cases statistically was at least 8. The lack of men with metastatic or fatal prostate cancer among the longer term users was not due to a small number of person years at risk, but instead, can best be explained by a deficit of these cases in the long-term statin users. The population of long-term statin users was expected to have at least 8 cases of metastatic or fatal prostate cancer during their time at risk when compared with the never users. This study suggested that statin use is associated with reduced risk of clinically important, advanced prostate cancer in a population that reported a high prevalence of routine PSA screening. Remember that the population studied consisted exclusively of U.S. health care professionals who have a higher rate of PSA screening than the general population.

For those of you who have been procrastinating, and have not allowed treatment with a statin medication, you now have even more motivation to start taking a statin medication today. Not only do statins reduce the risk of cardiovascular complications in men with elevated lipid levels, you now have this additional benefit regarding the risk for developing advanced, metastatic, or fatal prostate cancer.

Dr. Bob urges you to please strongly consider beginning treatment with a statin if you have any elevated cardiovascular risk factor(s).

As always -

Be happy,

Be well,

Live long and prosper,

DR. BOB

****** None of the above should be construed as medical advice or consultation, and anything discussed in this paper is meant for information only. All medical treatments, consultations, decisions and recommendations can only be made by the patient and his/her treating physician. There are side effects associated with all medicines, and the reader is reminded to discuss the risks, benefits, and alternatives of every medication with their prescribing doctor before taking any medicine.

1/2/07