

Statin therapy for patients with diabetes

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Achieve 90% patient statin therapy adherence with a personalized approach

Adults 40–75 years of age with diabetes, who do or do not have clinical atherosclerotic cardiovascular disease (ASCVD), should be started on a statin for primary and secondary prevention of ASCVD regardless of lipid status.¹

Studies show that statin use reduces comorbidities and mortality from heart disease and non-adherence to statins may increase cardiovascular events and even death.²

Clinicians play a powerful role in ensuring their patients are adherent to their statin therapies.

In fact, 90% of patients can be successfully adherent to statin therapy with a personalized approach.

We created [this video](#) to offer clinicians best practices in helping their patients remain adherent to their statin therapies.

The following seven strategies can help increase adherence to statin therapy in your patients:

1. Initiate statin therapy for patients with diabetes or clinical ASCVD as appropriate
 - For diabetics without ASCVD, use MODERATE INTENSITY statin for primary prevention.²
 - For diabetics with ASCVD, use HIGH INTENSITY statin for secondary prevention.¹
 - Low Intensity statins are not recommended unless unable to tolerate moderate or high intensity.⁴

Medications One of the following medications must have be dispensed to satisfy the SUPD measure.	
Drug Category	Medications
Statin medication	Lovastatin Fluvastatin Pravastatin Simvastatin Rosuvastatin Atorvastatin Pitavastatin
Statin combination products	Atorvastatin / amlodipine Atorvastatin / ezetimibe Lovastatin / niacin Simvastatin / ezetimibe Simvastatin / niacin Simvastatin / sitagliptin
Timeframe	Standard exclusion(s)
Any time during the measurement year	End-stage renal disease Hospice Rhabdomyolysis or myopathy Pregnancy, lactation, or fertility Liver disease Pre-diabetes Polycystic ovary syndrome (PCOS)

2. If a statin is not suitable for a patient, document exclusion criteria with the appropriate ICD-10 code
3. Educate patients about the long-term cardiovascular benefits of statin therapy and potential side effects
4. Try a lower dose, different statin, or consider intermittent statin therapy if there were previous statin-associated side effects

Intensity and Dose of Statin Therapy		
High Intensity	Moderate Intensity	Low Intensity
Daily dose lowers LDL-C on average by \approx \geq 50%	Daily dose lowers LDL-C on average by \approx 30% to $<$ 50%	Daily dose lowers LDL-C on average by $<$ 30%
Atorvastatin 40-80 mg Rosuvastatin 20-40 mg	Atorvastatin 10-20 mg Rosuvastatin 5-10 mg Simvastatin 20-40 mg Pravastatin 40-80 mg Lovastatin 40 mg Fluvastatin XL 80 mg Fluvastatin 40 mg bid Pitavastatin 2-4 mg	Simvastatin 10 mg Pravastatin 10-20 mg Lovastatin 20 mg Fluvastatin 20-40 mg Pitavastatin 1 mg

5. Inform patients that a significant number of generic statin medications are available for \$0 for a 90-day supply on most plans
6. Encourage patients to use their plan ID card to fill statin medications
7. Watch [this video](#) to learn best practices on helping improve statin therapy adherence and your organization's overall quality and STARS performance.

References:

- 1 2013 ACC/AHA Prevention Guideline on the Treatment of Blood Cholesterol to Reduce Atherosclerotic Cardiovascular Risk in Adults, A Report of the American College of Cardiology/American Heart Association Task Force on Practice Guidelines. *Circulation*. 2014;129:S1-S45, June 24, 2014. <https://www.ahajournals.org/doi/pdf/10.1161/01.cir.0000437738.63853.7a>
- 2 American College of Cardiology, The New 2017 American Diabetes Statement on Standards of Medical Care in Diabetes: Reducing Cardiovascular Risk in Patients with Diabetes, May 22, 2017. <https://www.acc.org/latest-in-cardiology/articles/2017/05/22/11/00/new-2017-american-diabetes-statement-on-standards-of-medical-care-in-diabetes>
- 3 CMS, 2019 Medicare-Medicaid Plan Performance Data Technical Notes. <https://www.cms.gov/Medicare-Medicaid-Coordination/Medicare-and-Medicaid-Coordination/Medicare-Medicaid-Coordination/Office/FinancialAlignmentInitiative/Downloads/MMPPPerformanceDataTechNotes.pdf>
- 4 Cochrane Database Syst Rev. 2013:CD004816

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