

Statin therapy for patients with diabetes

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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 7 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	<ul style="list-style-type: none"> · Lovastatin · Fluvastatin · Pravastatin · Simvastatin · Rosuvastatin · Atorvastatin · Pitavastatin
Statin combination products	<ul style="list-style-type: none"> · Atorvastatin / amlodipine · Atorvastatin / ezetimibe · Lovastatin / niacin · Simvastatin / ezetimibe · Simvastatin / niacin · Simvastatin / sitagliptin
Timeframe	Standard exclusion(s)
Any time during the measurement year	<ul style="list-style-type: none"> · 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
5. Daily dose lowers LDL-C on average by $\approx \geq 50\%$	6. Daily dose lowers LDL-C on average by $\approx 30\%$ to $< 50\%$	7. Daily dose lowers LDL-C on average by $< 30\%$
8. Atorvastatin 40-80 mg 9. Rosuvastatin 20-40 mg	10. Atorvastatin 10-20 mg 11. Rosuvastatin 5-10 mg 12. Simvastatin 20-40 mg 13. Pravastatin 40-80 mg 14. Lovastatin 40 mg 15. Fluvastatin XL 80 mg 16. Fluvastatin 40 mg bid 17. Pitavastatin 2-4 mg	18. Simvastatin 10 mg 19. Pravastatin 10-20 mg 20. Lovastatin 20 mg 21. Fluvastatin 20-40 mg 22. 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/MMPPerformanceDataTechNotes.pdf>

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