

Statins May Reduce COVID-19 Severity



Findings from a new study published in PLOS ONE show that patients taking statins had a 41% lower risk of in-hospital death from COVID-19.

Statins are used to reduce blood cholesterol levels by blocking liver enzymes responsible for making cholesterol. This category of drugs is widely prescribed worldwide. According to the CDC, 93% of patients who use a cholesterol-lowering drug use a statin.

Since the beginning of the pandemic, there has been significant speculation that drugs that affect the body's ACE2 receptor could influence the risk of COVID-19. Statins fall in this category of drugs. It was initially thought that statins could inhibit SARS-CoV-2 infection through their anti-inflammatory effects and binding capabilities, and could potentially stop the progression of the virus.

This was further investigated by a research team at UC San Diego who used data from the American Heart Association's COVID-19 Cardiovascular Disease Registry. The researchers analysed medical records of 10,541 patients admitted for COVID-19 in the U.S. from January through September 2020, at 104 different hospitals.

Their analysis confirms that statins are associated with a reduced risk of death from COVID-19 among patients hospitalised for COVID-19. The most benefit was observed among patients using statins and with a history of cardiovascular disease or high blood pressure. Findings show that statins were associated with a 32% lower risk of death among COVID-19 inpatients with a history of cardiovascular disease or hypertension. Researchers compared outcomes for patients who used statins with similar patients who did not. They found that statins stabilise the underlying diseases for which they are prescribed, thus making patients more likely to recover from COVID-19.

Overall, these findings provide evidence that statins may play a role in lowering a patient's risk of death from COVID-19. Statin use prior to hospital admission for COVID-19 resulted in a more than 50% reduction in the risk of developing a severe infection.

Source: [PLOS ONE](#)

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