Statins May Lower Risk of Dementia by 50%

BY MICHELE G. SULLIVAN

VIENNA — Statin treatment may reduce the risk of later dementia by more than 50%, a national Finnish study has determined.

"Disturbances in cholesterol metabolism have previously been linked to dementia development," Dr. Alina Solomon wrote in a poster presented at the International Conference on Alzheimer's Disease. However, noted Dr. Solomon of the University of Kuopio, Finland, not all studies have concluded that statins confer a protective effect against dementia onset.

Dr. Solomon and her colleagues examined this question using data extracted from the national FINRISK study, a large, population-based survey of cardiovascular risk factors among Finnish citizens. The survey began in 1972 and is conducted every 5 years. Dr. Solomon's substudy of FINRISK included data on 17,257 citizens who were included in the 1997 and 2002 cohorts, and who were at least 60 years old in 1995, when statins became available in Finland.

By the study's end at 2007, 1,551 of the subjects had developed dementia and 15,706 had not. Only 18% of those who developed dementia had taken at least 1 year of statin therapy, while 37% of those who were dementia-free had taken a statin—a significant difference.

No significant associations were found between dementia and the use of other cholesterol-lowering medications, Dr. Solomon said, suggesting that "the effect of statins in dementia is partly independent of their cholesterol-lowering effect."

Subjects who developed dementia also had significantly higher baseline total cholesterol and baseline systolic and diastolic blood pressure. But a multivariate regression model that controlled for age, gender, education, cholesterol, weight, and blood pressure still found that statins conferred a 57% risk reduction for dementia over the course of the study, Dr. Solomon said at the meeting, which was sponsored by the Alzheimer's Association.

Neither she nor her coinvestigators declared any conflict of interest. ■

PTSD History May Warrant Dementia Screen

VIENNA — Posttraumatic stress disorder nearly doubled the risk of later dementia in large cohort of male veterans, a retrospective study has determined.

The finding points to the importance of close follow-up for veterans—or any patient—with symptoms of the stress-induced disorder, Dr. Kristine Yaffe said at the International Conference on Alzheimer's disease. "It's critical to follow patients with PTSD [posttraumatic stress disorder] and evaluate them early for dementia," said Dr. Yaffe, director of the Memory Disorders Clinic at the San Francisco Veterans Administration Medical Center.

Dr. Yaffe studied the incidence of dementia in a retrospective cohort of 183,000 veterans in the Department of Veterans Affairs National Patient Care Database who did not have dementia at baseline enrollment (1997-2000). Most of the subjects (97%) were men; their mean age at baseline was 69 years. PTSD had been diagnosed in 53,155 of the subjects.

During a follow-up period from 2001 to 2007, the cumulative incidence of new-onset dementia was 11% for those veterans with PTSD and 7% for those without PTSD, a significant difference. The results did not change even when Dr. Yaffe excluded subjects with a history of traumatic brain injury, substance abuse, or depression. "Even after adjusting for demographics and medical and psychiatric comorbidities, PTSD patients in this study were still nearly twice as likely to develop incident dementia (hazard ratio 1.8) than veterans without PTSD," she said at the meeting, which was sponsored by the Alzheimer's Association.

Dr. Yaffe could not speculate on the nature of the connection between PTSD and dementia. She said she did not have any potential conflicts of interest with regard to the study.

—Michele G. Sullivan