

Understanding Task Force Draft Recommendations

This fact sheet explains the U.S. Preventive Services Task Force's (Task Force) draft recommendation statement on statin use to prevent cardiovascular disease. It also tells you how you can send comments about the draft recommendation to the Task Force. Comments may be submitted from February 22, 2022, to March 21, 2022. The Task Force welcomes your comments.

Statin Use for the Primary Prevention of Cardiovascular Disease in Adults

The Task Force issued a **draft recommendation statement** on *Statin Use for the Primary Prevention of Cardiovascular Disease in Adults*.

The Task Force recommends that people between ages 40 and 75 who are at high risk of a first heart attack or stroke take a statin. People between ages 40 and 75 who are at increased risk, but not at high risk, of a first heart attack or stroke may benefit from statins. They should talk with their healthcare professional and decide together if taking a statin is right for them. More research is needed on whether people 76 years of age or older should start taking a statin to prevent a first heart attack or stroke.

The recommendation applies to adults ages 40 or older without a known history, or signs or symptoms, of heart disease or stroke. It does not apply to people who have very high levels of "bad" cholesterol or a family history of high cholesterol. People in these groups may require statins regardless of age or risk factors.

Facts About Statins to Prevent CVD

Heart disease and stroke are the leading causes of death in the United States. In 2019, there were an estimated 667,000 deaths from heart disease and stroke.

Statins are an important tool for preventing heart attacks and strokes. For some people, taking a statin can help prevent a first heart attack or stroke and prolong life.

Whether someone should take a statin largely depends on their age and risk of a heart attack or stroke. Age is one of the strongest risk factors; the older you are, the higher your risk of having a heart attack or stroke. Other risk factors include high cholesterol, high blood pressure, diabetes, smoking, lack of physical activity, and an unhealthy diet.

Regardless of age or risk of heart disease and stroke, everyone can lower their risk by quitting smoking, exercising more, and eating a healthier diet.



What are statins?

Statins are a daily medication that prevent cholesterol from forming in the body or being made in the body. Statins lower "bad" cholesterol (LDL) and can help lower blood fats (triglycerides). They can also raise "good" cholesterol (HDL).

What is cardiovascular disease (CVD)?

A variety of conditions related to the heart and blood vessels, including different types of heart diseases and stroke.

Statin Use to Prevent Cardiovascular Disease

Potential Benefits and Harms of Statins to Prevent Cardiovascular Disease

For those between ages 40 and 75, the Task Force found that taking a statin can prevent a first heart attack or stroke and prolong life. Those at high risk of having a heart attack or stroke are more likely to experience benefits from taking a statin than those who are at increased risk but not at high risk.

For this recommendation, risk is based on (1) a person's estimated chance of having a first heart attack or stroke over the next 10 years and (2) whether they have an additional risk factor. Your healthcare professional will help you figure out your risk using a CVD risk estimator. To do so, they will look at your health history—whether you have high cholesterol, diabetes, or high blood pressure; your age and sex; whether you smoke, and more.

- Being at *high risk* means you have a 10% or higher chance of having a first heart attack or stroke in the next 10 years AND have one of these risk factors: high cholesterol, diabetes, high blood pressure, or you smoke.
- Being at *increased risk* means you have a 7.5% to 10% chance of having a first heart attack or stroke in the next 10 years AND have one of these risk factors: high cholesterol, diabetes, high blood pressure, or you smoke.

For those 40 to 75 years of age, the Task Force found that statin use is generally safe.

For those 76 or older, there is not enough evidence on the benefits and harms of starting a statin to prevent a first attack or stroke.

Anyone who is concerned about their risk of having a first heart attack or stroke should talk with their healthcare professional about the best way to reduce their risk.

The Draft Recommendation on Statin Use to Prevent Cardiovascular Disease in Adults: What Does It Mean?

Here is the Task Force's draft recommendation on statin use to prevent a first heart attack or stroke, also known as CVD. It is based on the quality and strength of the evidence about the potential benefits and harms of preventive medication for this purpose. It is also based on the size of the potential benefits and harms. Task Force recommendation grades are explained in the box at the end of this fact sheet.

When the Task Force issues a **B Grade**, it recommends a preventive medicine because it has more potential benefits than potential harms. When the Task Force issues a **C Grade**, it recommends that healthcare professionals decide together with their patients about a preventive medicine after taking a person's individual situation into account. An **I Statement** means that there is not enough evidence to recommend for or against the preventive medicine.

Before you send comments to the Task Force, you may want to read the [draft recommendation statement](#). The recommendation statement explains the evidence the Task Force reviewed and how it decided on the grade. An [evidence document](#) provides more detail about the scientific studies the Task Force reviewed.

Statin Use to Prevent Cardiovascular Disease

1 The USPSTF recommends that **clinicians** prescribe a statin for the **primary prevention** of **cardiovascular disease (CVD)** for adults who are aged 40 to 75 years, have one or more of the following CVD risk factors: **dyslipidemia**, diabetes, **hypertension**, or smoking, and have an estimated **10-year risk of a cardiovascular event of 10% or greater**. **B Grade**

2 The USPSTF recommends that clinicians **selectively offer** a statin for the primary prevention of CVD for adults who are aged 40 to 75 years, have one or more of the following CVD risk factors: dyslipidemia, diabetes, hypertension, or smoking, and have an estimated **10-year risk of a cardiovascular event of 7.5% to 10%**. The likelihood of benefit is smaller in this group than in those with a 10-year risk of 10% or greater. **C Grade**

3 The USPSTF concludes that the **current evidence is insufficient** to assess the balance of benefits and harms of initiating a statin for the primary prevention of CVD events and mortality in adults 76 years and older. **I Statement**

Notes

1 clinicians
Health care professionals who provide medical care to patients.

primary prevention

Preventing disease before it starts, in this case, before a first heart attack or stroke occurs.

cardiovascular disease (CVD)

A variety of conditions related to the heart and blood vessels, including different types of heart diseases and stroke.

dyslipidemia

Blood cholesterol that is higher or lower than the normal range. For purposes of this recommendation, the Task Force focused on high blood cholesterol.

hypertension

High blood pressure.

10-year risk of a cardiovascular event of 10% or greater

A 10% or higher chance of having a first heart attack or stroke over the next 10 years. A healthcare professional estimates 10-year risk using a CVD risk estimator.

2 selectively offer
Taking a person's individual situation into account to see if potential benefits outweigh potential harms before deciding whether to offer a medicine.

10-year risk of a cardiovascular event of 7.5% to 10%

A 7.5% to 10% chance of having a first heart attack or stroke over the next 10 years.

3 current evidence is insufficient
There is not enough information to make a recommendation.




Statin Use to Prevent Cardiovascular Disease

What is the U.S. Preventive Services Task Force?

The Task Force is an independent, non-federal, volunteer group of national experts in prevention and evidence-based medicine. The Task Force works to improve the health of people nationwide by making evidence-based recommendations about clinical preventive services, such as screenings, counseling services, and preventive medicines. The recommendations apply to people with no signs or symptoms of the disease being discussed.

To develop a recommendation statement, Task Force members consider the best available science and research on a topic. For each topic, the Task Force posts draft documents for public comment, including a **draft recommendation statement**. All comments are reviewed and considered in developing the final recommendation statement. To learn more, visit the **Task Force website**.

[Click Here to Learn More About Cardiovascular Disease and Statins](#)

-  **Keep Your Heart Healthy**
(MyHealthfinder)
-  **Heart Disease and Stroke**
(Centers for Disease Control and Prevention)
-  **Statins**
(MedlinePlus)

USPSTF Recommendation Grades	
Grade	Definition
A	Recommended.
B	Recommended.
C	Recommendation depends on the patient's situation.
D	Not recommended.
I statement	There is not enough evidence to make a recommendation.

[Click Here to Comment on the Draft Recommendation](#)



The Task Force welcomes comments on this draft recommendation.



Comments must be received between February 22, 2022, and March 21, 2022.



All comments will be considered for use in writing final recommendations.