

Statin Use in Persons with Diabetes (SUPD)

The Centers for Medicare and Medicaid Services (CMS) Drug Safety and Accuracy of Drug Pricing Measure

The clinical importance of prescribing statin therapy to patients with diabetes to lower their risk of atherosclerotic cardiovascular disease (ASCVD) has been established in medical literature.

Measure Definition

Patients 40-75 years of age who were dispensed at least two diabetes medication fills who received a statin medication fill in the current measurement year.

Exclusions from the Measure

Patients are excluded if they:

- Are diagnosed with end-stage renal disease (ESRD).
- Are in hospice care any time in the measurement year.

The American Diabetes Association (ADA) recommends the following statin therapies for patients ages 40 and older who have been diagnosed with diabetes

Generic Statin Therapy		
Atorvastatin	Lovastatin	Pravastatin
Rosuvastatin	Simvastatin	

Please document the statin prescribed in the medical record including the date it was prescribed.

Tips to Overcome Barriers to Statin Therapy

Barrier	Solution
Patient has Type 1 diabetes	The ADA and the American College of Cardiology/American Heart Association guidelines recommend statin therapy for the primary prevention of ASCVD events for both Type 1 and Type 2 diabetes.
Patient's LDL is within normal range	<ul style="list-style-type: none"> • Statins should be considered in all patients diagnosed with diabetes who are ages 40 years and older regardless of LDL levels, according to current ADA guidelines. • LDL levels should still be monitored, since an elevated LDL is a risk factor and monitoring can help assess patient adherence to treatment.
Myalgia	<p>Myalgias are common and may not be medication related.</p> <ul style="list-style-type: none"> • Try a lower dose or less frequent dosing • Evidence supports the use of a very low dose or less-than-daily regimen, such as every-other-day simvastatin or once-weekly rosuvastatin • Try a brief period of discontinuation. Consider a rechallenge with a reduced dose of the same or a different statin • Try a different statin that is more hydrophilic, such as pravastatin, rosuvastatin or fluvastatin
Patient's ASCVD Risk Calculator ACC/AHA estimates a <7.5% 10-year ASCVD risk	This tool has limited use in patients with diabetes since diabetes itself confers an increased risk for ASCVD and all diabetics over the age of 40 should be on a statin.

Drug interaction with concomitant medication	<ul style="list-style-type: none"> • Consider statins with less potential for drug interactions, such as rosuvastatin, pravastatin or fluvastatin. • • Simvastatin, lovastatin and atorvastatin may have more drug interactions.
Patient believes that red yeast rice is superior to statin therapy	The FDA has issued warnings against taking this supplement because of lack of standardized preparation, efficacy, and safety data.
Elevated liver enzymes	<ul style="list-style-type: none"> • The statin could be continued at a lower dose or less frequent dosing. • • If the statin is held, the same statin can be reinitiated at a lower dose or a different statin can be initiated once liver function returns to normal. • • Elevated liver enzymes in diabetes are often due to nonalcoholic fatty liver, which may improve with better glycemic control. It is reasonable to reinitiate the same statin at a lower dose or try a different statin once liver function returns to normal.
Statin may increase HbA1c	Increased HbA1c and fasting serum glucose have been reported with statin use. This risk is considered minimal compared to the cardiovascular benefits seen with statin therapy.
Statin may cause dementia	There is no definitive data to support the concern that statins cause dementia. Conversely, statin use appears to reduce the incidence of dementia.

Sources

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