



By The British Polio Fellowship Expert Panel

1. Introduction

Statins such as rosuvastatin, pravastatin or atorvastatin are a group of drugs that can help reduce the level of cholesterol in the blood. They have been shown to reduce the risk of cardiovascular disease (CVD), a major cause of illness and death world-wide.

As with many drugs, there can be side effects when taking statins, one being the risk of muscle aches and pains. In very rare cases, they can cause muscle weakness, inflammation and damage. Polio survivors already have muscle issues such as weakness, pain and loss of function; anything that may make this worse is of course a concern.

So, what should you do if you are recommended to take a statin? Firstly, discuss in detail with your GP. Make sure they understand your present condition due to prior polio:

- any muscle fatigue, aching or muscle pain
- do you have Post Polio Syndrome
- what your physical activity level is
- any medications you are already on.

Secondly, ask them to explain your cardiovascular risk and the benefits of reducing your cholesterol - this is likely to be assessed using a tool such as QRISK2.

If you decide on a trial of statins, ask for your levels of creatine

kinase (CK) to be measured before taking the drug. Increased amounts of CK are released into the bloodstream when there is muscle damage. These levels can be above normal already in people who have had polio and the starting level is needed to work out if taking statins is likely to cause further damage.

Your CK levels also need to be monitored while taking the statin to look for any changes. Discuss any side effects promptly with your GP; options are that you can try a lower dose, a different statin, or a different kind of cholesterol-lowering drug. There are several available in the UK.

There are also lifestyle changes you can make which could help lower your cardiovascular risk and your GP could help by referral to other professionals.

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