

中文題目：HMG-CoA 還原酶抑制劑(statins)對於周邊動脈疾病的洗腎患者在肢體及心血管預後的保護效應

英文題目：Protective Effects of Statins on Limb and Cardiovascular Outcomes in Patients With Peripheral Artery Disease and End-Stage Renal Disease

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Background: Few studies have reported that statins have marginal cardiovascular (CV) benefits in patients with end-stage renal disease (ESRD). However, whether statins play a secondary preventive role in patients with peripheral artery disease (PAD) and ESRD remains unclear.

Method: This retrospective cohort study assessed the long-term protective effects of statins by using Taiwan's National Health Insurance Research Database. Propensity score matching was performed according to sex, age, index year, related comorbidities, and medications. The main outcomes were limb events and major adverse CV events (MACEs).

Results: The statin user group (n = 4,460) was compared with the propensity score-matched statin nonuser group (n = 4,460). The mean age of the matched patients was 64 years, and 40% of the patients were men. The baseline characteristics of the groups were well balanced. The statin user group had a lower rate of all-cause death [adjusted hazard ratio (aHR): 0.45, 95% confidence interval (CI): 0.42–0.48]. No significant difference in limb outcomes and MACEs was noted between the groups. However, the statin user group had a lower rate of limb amputation, stroke, and CV death, despite having a higher rate of percutaneous transluminal angioplasty for PAD.

Conclusion: This population-based retrospective cohort study demonstrated that statin therapy led to a lower risk of limb amputation, nonfatal stroke, CV death, and all-cause death in patients with PAD and ESRD.