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Long-Term Use of Statins Linked to Heart Disease: Studies

A new expert review suggests that long-term use of statins may be inadvertently aiding the enemy by accelerating coronary artery calcification.



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By [Vance Voetberg](#)

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For decades, statins have been heralded as the reliable heroes in the battle against heart disease, the leading cause of death in the United States and globally. However, this seemingly flawless reputation has been called into question.

A new expert review suggests that long-term use of statins may be inadvertently aiding the enemy by accelerating coronary artery calcification instead of providing protection.

Statins Deplete Heart-Protecting Nutrients

The review, published in [Clinical Pharmacology](#), suggests statins may act as “mitochondrial toxins,” impairing muscle function in the heart and blood vessels by depleting coenzyme Q10 (CoQ10), an antioxidant cells use for growth and maintenance. Multiple studies show statins inhibit CoQ10 synthesis, leading many patients to supplement.

CoQ10 is vital for producing ATP, the cell’s fundamental energy carrier. Insufficient CoQ10 inhibits ATP production, resulting in an energy deficit that the review authors say “could be a major cause for heart muscle and coronary artery damage.

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“We believe that many years of statin drug therapy result in the gradual accumulation of mitochondrial DNA damage,” according to the authors.

A 2022 study published in Biophysical Journal linked reduced ATP to heart failure.

A 2008 study published in BioFactors reaffirms the statin–CoQ10 link. Researchers evaluated 50 statin patients for side effects like fatigue and muscle pain. All then stopped statins and supplemented CoQ10 for 22 months on average.

Side Effect	Prevalence at Initial Visit (before starting CoQ10)	Prevalence at Final Visit (after taking CoQ10)
Fatigue	84%	16%
Muscle Pain	64%	6%
Breathlessness	58%	12%
Memory Loss	8%	4%
Nerve Pain	10%	2%

Source: Study of statin adverse effects published in BioFactors

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Heart function improved or held steady for the majority of patients. The researchers conclude statin side effects, including statin cardiomyopathy, “are far more common than previously published and are reversible with the combination of statin discontinuation and supplemental CoQ10.”

Statins Deplete Vitamin K, Raising Heart Calcification Risk

Statins impair the production of vitamin K, an essential vitamin in managing calcification, according to the review. Optimal vitamin K2 intake helps avoid plaque buildup of atherosclerosis—thickening or hardening of the arteries—and keeps calcification risk low.

Coronary calcification happens when calcium accumulates in the walls of the coronary arteries that provide oxygen to the heart. This plaque buildup is a sign of early coronary artery disease, which can block blood flow and trigger a heart attack.

A 2021 study published in the Kaohsiung Journal of Medical Sciences found a connection between statin use, coronary artery calcification, and vitamin K2 deficiency. The results shed light on how statins may spur arterial calcium accumulation by inhibiting vitamin K. The study's findings were “in agreement with the existing evidence about positive association between statins and vascular calcification,” the authors added.

Statins also damage selenoproteins, carriers of the mineral selenium essential for heart health.

Statins were also linked to increased calcification in a 2022 study published in Arteriosclerosis, Thrombosis, and Vascular Biology. However, the authors proposed that statins may encourage calcification by heightening inflammation rather than nutrient deficiency.

Physicians Overlook Statins as Driver of Heart Failure: Experts

Based on emerging evidence on statins' potential cardiac downsides, the authors of the new review warn that “physicians in general are not aware that statins can cause heart failure and are clearly not recognizing it.” Though doctors readily diagnose heart failure in statin users, they usually attribute it to factors like age, high blood pressure, or artery disease.

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Doctors prescribing cholesterol drugs “cannot ignore the moral responsibility of ‘informed consent,’” the researchers wrote, noting that patients deserve full disclosure of side effects like cardiovascular disease or heart failure.

With over a million annual heart failure hospitalizations in the United States, the condition is often referred to as an epidemic—and it may be that “statin drug therapy is a major contributing factor,” according to the review.

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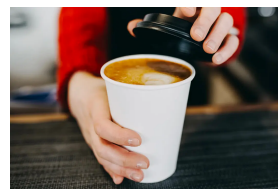
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