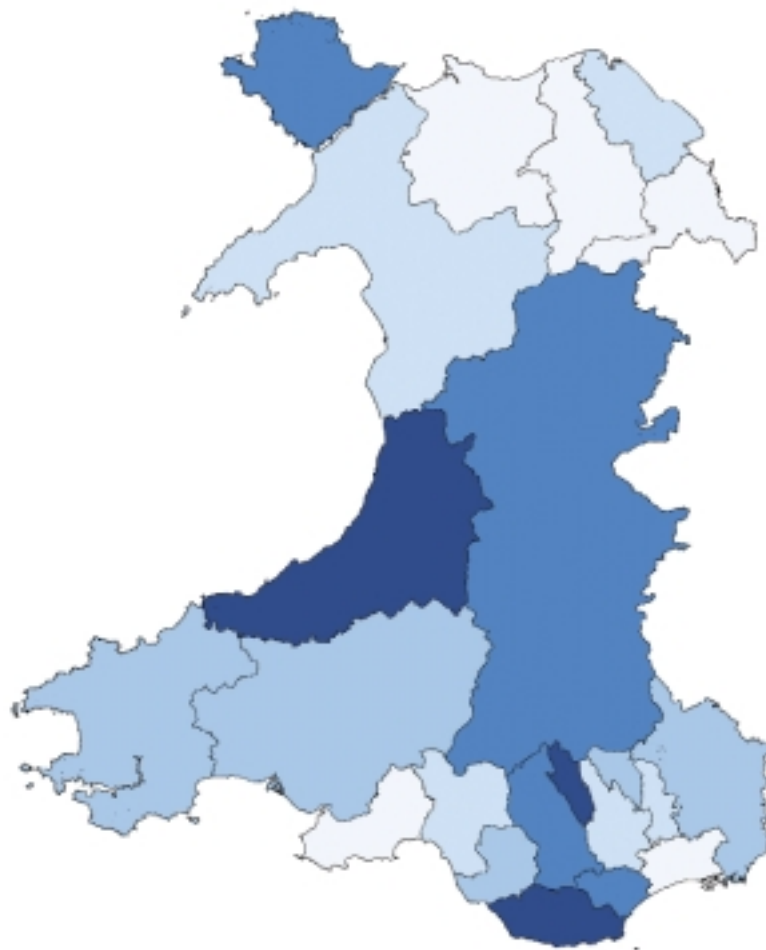
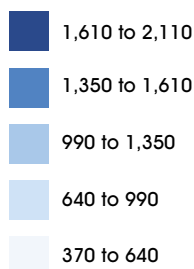


## Rosuvastatin<sup>▼</sup> prescribing

### Source

Comparative Analysis System for  
Prescribing Audit (Health Solutions Wales)  
March 2005 to February 2006  
Cost (£) per 1000 prescribing units (PUs)



### Optimising the use of statins – using statins wisely

- ◆ Statins reduce the incidence of cardiovascular events in patients with atherosclerotic disease. Patients for whom there is now evidence of effectiveness include women, patients up to 80 years of age, those with diabetes, and those with 'normal' and 'low' cholesterol levels.
- ◆ Selection of a specific statin should be based on clinical evidence and cost; generic simvastatin is a rational first-line choice for those with significant cardiovascular risk. Atorvastatin is an alternative. In a case-based survey of prescribers in Wales, 80% of respondents using statins would prescribe simvastatin; 15% would prescribe atorvastatin.<sup>†</sup>
- ◆ Rosuvastatin<sup>▼</sup> (Crestor<sup>®</sup>) should not be used routinely in general practice – there is no clinical outcome data for rosuvastatin with respect to morbidity or mortality and, as a new drug, information on use in the general population is required to determine comparative levels of safety.

<sup>†</sup> WeMeReC distance-learning module response report, Number 16, May 2005