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Abstract

HMG-CoA reductase inhibitors (Statins) are effective lipid-lowering drugs for the treatment of dyslipidemia patients with type 2 diabetes mellitus (T2DM). These patients are suggested to reach targeted level of low density lipoprotein (LDL) for further coronary heart disease (CHD) prevention. Unfortunately LDL measures may not adequately evaluate cardiovascular risk since insulin resistance drives a number of changes in lipid metabolism which apolipoprotein-B (apoB)-containing atherogenic particles predominate. ApoB should be considered as an index of residual risk, a potential parameter of treatment efficacy and a treatment target to minimize risk of CHD. The aim of the study is to compare the efficacy of the two most given statin, simvastatin and atorvastatin, in lowering lipid profile and apoB of T2DM patient with dyslipidemia. We conducted an observational, cohort study to compare the efficacy of simvastatin 20 mg/day (n=11 patients) and atorvastatin 10 mg/day (n=7 patients). Patients who met criteria (LDL >100 mg/dL, TG >150 mg/dL) were given 6 weeks-treatment of statin. To evaluate the efficacy, lipid profile (total cholesterol, LDL, triglycerides/TG) and apoB were all measured at week 6. Simvastatin therapy was associated at week 6 with an insignificant increase of LDL and insignificant decreases of total cholesterol, TG, and apoB (p>0.05). Atorvastatin therapy showed an insignificant decrease of TG and insignificant increases of total cholesterol, LDL, and apoB and (p>0.05). No significant difference was observed between six weeks-treatment of simvastatin 20 mg/day and atorvastatin 10 mg/day. (FMI 2013;49:139-145)

Keyword: simvastatin, atorvastatin, lipid, apolipoprotein, B, diabetes,

Dafar Pustaka: