**STATINS FOR THE PRIMARY PREVENTION OF CVD IN WOMEN**

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The use of statins in patients with manifest cardiovascular disease (CVD) is established, with similar benefit in women and men, but statin use for primary prevention of CVD is controversial particularly for women. We analyzed sex-specific outcomes in JUPITER (Justification for the Use of statins in Prevention: an Intervention Trial Evaluating Rosuvastatin) and conducted an updated meta-analysis of statin use for women in primary prevention (20,147 women, >276 CVD events, mean age 63-69 years). JUPITER was a multi-center randomized trial designed to assess the benefits and risks of statin therapy in apparently healthy individuals selected on the basis of elevated high-sensitivity C-reactive protein, a marker of higher cardiovascular risk, without a concomitant elevation in LDL cholesterol. Absolute CVD rates for rosuvastatin and placebo in JUPITER were lower for women than men, but there was similar and significant relative risk reduction in both women (by 46%) and men (by 42%). In an updated meta-analysis of statin therapy for primary prevention in women, statin allocation yielded a significant relative risk reduction in CVD by one third, similar to prior results seen in men and in secondary prevention women (Mora S et al, Circulation 2010;121:1069-77).

This session will discuss

1) statin use for primary prevention of CVD in women, and

2) the risks and benefits of statin therapy, particularly for women, and

3) lipoprotein targets of therapy (Mora S et al, JACC 2012;59:25-32; Boekholdt SM et al, JAMA 2012;307:1302-09.)