


1. Statin-Fibrate Combination Therapy

My experience with gemfibrozil and statins in combination therapy is entirely different from that reported by Holoshitz et al. I have directed a lipid clinic here in Bowling Green, Ohio, since 1973. As knowledge about goals of dyslipidemia therapy has improved over the years, my lipid clinic’s goals of therapy have required more and more aggressive treatment strategies, with the result that only one treated patient of mine has sustained a transmural acute myocardial infarction in the past 8 years.

When lovastatin became available in 1987, I began using statins in patients who had already been treated with fibrates (exclusively gemfibrozil). Over the 15 years of using statin-gemfibrozil combination therapy, my patients have experienced 4 cases of rhabdomyolysis. After my fourth case of rhabdomyolysis in patients receiving statin-gemfibrozil combination therapy (about 5 years ago), I stopped prescribing gemfibrozil and now exclusively prescribe the only fibrate available in the United States: fenofibrate. My experience was reported at the 2004 Annual Scientific Assembly of the American Academy of Family Physicians in Orlando, Florida. I have about 60 patients receiving statin-fenofibrate therapy.

The statins involved in these 4 cases of rhabdomyolysis were simvastatin (2 cases), lovastatin (1 case), and cerivastatin (1 case). Since switching fibrate prescriptions exclusively to fenofibrate, no patient of mine has had rhabdomyolysis. None of my patients have sustained any statin-fibrate-related hepatopathy. (One patient died after liver failure with extended-release niacin, despite serial monitoring of liver tests, in the late 1980s.)

My clinic is the longest lived lipid clinic in this area, undoubtedly in northern Ohio, and possibly in the entire state of Ohio. At about 250 patients, my lipid clinic is among the larger clinics in Ohio. As a result of my experience with gemfibrozil-statin combination therapy, I consider the use of gemfibrozil in combination with any statin to be contraindicated and would recommend the use of fenofibrate instead.