

Re: Statin-associated Muscle Problems

Source: <http://sci.tech-archive.net/Archive/sci.med.cardiology/2005-06/msg01109.html>

- *From:* "Sharon Hope" <shope@xxxxxxxx>
 - *Date:* Sun, 26 Jun 2005 11:01:19 -0700
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<Hawki63@xxxxxxxxxxxxxxxx> wrote in message
[news:Xjkve.4026\\$Bx6.2643@xx](mailto:news:Xjkve.4026$Bx6.2643@xx)
>
> "Sharon Hope" <shope@xxxxxxxx> wrote in message
> news:sd6dnU5kysuoSiHfRVn-oO@xxxxxxxxxxxxxxxx
>> Yes, but did you have a muscle biopsy showing ragged red fibers? That,
>> due to a placebo effect, would be an apples to apples comparison for
>> those who have had such diagnosis of their statin myopathy.
>
>
> that makes no sense...even if I did have a muscle biopsy showing ragged
> red fibers,,it could not be placebo effect..
>
> if never on a statin...such a biopsy could not be blamed on a statin
>
> or am I missing your drift??

Actually you made my point.

Yes, muscle pain is often just muscle pain.

However, your muscle pain on placebo would/did not bear up under diagnosis.

It is difficult (even with the pain scale) to compare pain among patients. Some patients actually commit suicide due to chronic pain (a friend of a friend IME). Others withstand incredible pain.

Your anecdote about the pain was interesting, and a reminder of the placebo effect (and its inverse).

However, I was trying to remind you that what you considered pain may or may not compare to other statin patient's muscle pain.

I've told it before, but my husband's explanation of his statin pain came up in the course of bumping his finger. He had that morning reached to pick up a fallen palm frond and accidentally jammed a splinter from the stalk end (about the width & thickness of the wide end of a flat toothpick) up under his fingernail and all the way through longitudinally to the quick, erupting

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through the skin at that end of the nail. Palm fronds are fibrous and expand with moisture, so the splinter swelled, adding pressure under the nail, and attempts to remove it left some pieces under the nail.

Later in the day, as he reached for something and bumped the finger he expressed pain, then turned to me to explain. You know, he said, this finger really hurts, but the level of constant pain I am in from the Lipitor is so high that, except for the moment when I got the splinter, and times like this when I actually bump it, the pain from this splinter is low enough by comparison that it is overcome by the chronic pain I feel every hour, day and night, from the statin.

Maybe your placebo pain was that strong, but I doubt it. Maybe your placebo pain went on for over 7 1/2 years, as my husband's Lipitor pain has – every minute of every day, 24 hours per day, 365 days per year, 366 on leap years – but I doubt it.

And, certainly as you have confirmed, your placebo pain was not confirmed by muscle biopsy to be structurally demonstrable, as is the muscle pain of countless statin myopathy and myositis sufferers.

Nor, although you do not say so, was your muscle pain confirmed to be myopathy due to statin-induced mitochondrial dysfunction as confirmed by chromatographic evaluation of exhalation gasses on a treadmill, as was my husband's Lipitor-induced myopathy, myositis, and mitochondrial damage.

Therefore, although your point is a good reminder that sometimes we can talk ourselves into a cause for muscle pain that may just have been the result of normal daily life, it is very wrong of you to imply to a person who is taking statins and publicly complaining of muscle pain that they, like you, may just be imagining the cause to be statin adverse effects.

- 1) The degree of pain is not comparable
- 2) There is the option of muscle biopsy to show statin muscular and mitochondrial damage
- 3) There are metabolic tests to show statin mitochondrial damage
- 4) There are the published statistics that show (most recently published by paper presentation at the International CoQ10 Society conference, the Canadian radio broadcast on statins, and Dr. Cohen's book) that muscle pain and muscle damage is the #1 adverse effect of statins and of the 3 most common adverse effects of statins – muscle, cognitive, and neurological damage – patients are experiencing at least one of the three at a rate of between 15% to 30%.

Thus, even though you had some muscle pain and were not on a statin, that fact does nothing to discredit the pain felt by those on statins. Further, it is ABSOLUTELY NOT proof that their pain is unrelated to the statin.

As a nurse you are certainly a humanitarian, and I know you did not mean to imply you were disputing the person with muscle pain statin adverse effects. I just wanted to help you make that fact clear.

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Muscle pain and statin muscle pain are both very real. The causes of one has nothing to do with the other. The verification of one has nothing to do with the verification of the other.

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>>
>> <Hawki63@xxxxxxxxxxxx> wrote in message
>> [news:p70ue.2346\\$Bx6.1459@xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx](mailto:news:p70ue.2346$Bx6.1459@xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx)
>>>
>>> "Rita" <nitany_98@xxxxxxxx> wrote in message
>>> news:cc1hb1hpnkod4lkfsc7nkdm156j3g49bjt@xxxxxxxx
>>>> On Tue, 21 Jun 2005 21:10:21 GMT, <Hawki63@xxxxxxxxxxxx> wrote:
>>>>
>>>>
>>>>>remember...I got the same muscle aches you did...on placebo!!!
>>>>>
>>>> You did? Had your read about this possible side effect?
>>>>
>>>>
>>>> Hi Rita...
>>>>
>>>> ever hear that nurses and doctors make the worst patients??
>>>>
>>>> tis true...
>>>>
>>>> actually had also watched hubby go thru bad aches and pains with
>>>> Lipitor.....now has none with Pravachol
>>>>
>>>> also btw..once I went on REAL Lipitor...never an ache...amazing what the
>>>> mind can do
>>>>
>>>> I personally...my h.o. only...don't think the statin route has enough to
>>>> offer you...me either maybe..it made me crazy to know my 93 year old MIL
>>>> was on Lipitor!!
>>>>
>>>>
>>>>> I'll admit when I began experiencing muscle aches and pains from
>>>>> Zocur I conjured up every possible alternative explanation I could
>>>>> think of. The first time it happened I was feeling relatively
>>>>> poorly because of an onset of an allergy complex that made me
>>>>> feel overall rotten and my appetite for food was greatly
>>>>> diminished.
>>>>>
>>>>> I quit Zocor after 3 months on it, and gradually began to feel
>>>>> better. Got the allergy thing under control, began gaining back
>>>>> weight and had no muscle aches or pains after 2 months off the
>>>>> statin.
>>>>>

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>>>> Resumed the statin and within two weeks muscle pains and weakness
>>>> came back full force.

>>>>

>>>> Quit it again after an other 2 weeks, and now am beginning to feel
>>>> much better -- able to walk several blocks without pain, nightly
>>>> excruciating leg and foot cramps have stopped entirely.

>>>>

>>>> Twice burned and I'm off them for good. A gamble, perhaps, but
>>>> one I'm willing to take, given the conflicting data about the
>>>> wisdom of people aged 75, and especially women, taking statins
>>>> in the first place.

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• *Follow-Ups:*

- ◆ **Re: Statin-associated Muscle Problems**
◇ *From:* Hawki63

• *References:*

- ◆ **Re: Statin-associated Muscle Problems**
◇ *From:* Bill
- ◆ **Re: Statin-associated Muscle Problems**
◇ *From:* Jason
- ◆ **Re: Statin-associated Muscle Problems**
◇ *From:* Bill
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- ◆ **Re: Statin-associated Muscle Problems**
◇ *From:* Sharon Hope

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◇ From: Hawki63

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