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SHORT TERM COMPARISON BETWEEN SAFETY AND EFFICACY OF ROSUVASTATIN 40 MG AND ATROVASTATIN 80 MG IN PATIENTS WITH ACUTE CORONARY SYNDROME

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Background: Dyslipidemia is one of the most serious modifiable risk factors for acute coronary syndrome which is the most leading cause of mortality and morbidity worldwide.

Aim: The aim of this study is to assess the short-term safety and efficacy of full dose rosuvastatin and atrovastatin in patients with acute coronary syndrome.

Patients & Methods: Single center, prospective, randomized study included 100 patients who were randomized from first 24-hour of admission to either atorvastatin 80 mg daily (group 1) or rousvastatin 40 mg daily (group 2). Primary outcomes included levels of inflammatory markers (ESR, Hs-CRP and TLC) after four weeks of treatment and lipid profile after three months. Secondary outcomes included recurrent myocardial infarction, recurrent angina, stroke and side effects.

Results: At admission, both groups were of comparable age without statistically significant difference regarding risk factors (diabetes, hypertension, smoking and obesity) Echocardiography (EDV, ESV and EF), laboratory parameters of inflammation and lipid profile. After one month, there was an insignificant difference between rousvastatin and atorvastatin in the reduction of ESR, Hs-CRP or TLC. After three months, rousvastatin showed statistically significant reduction in the level of LDL-C, TG, $p<0.001$ and significant increase in HDL-C, $p<0.001$ when compared to Atorvastatin and at the same time the rousvastatin group was safer regarding liver enzymes elevation, p value was <0.001 and 0.01 for ALT and AST .

Conclusions: Our findings demonstrated that rosuvastatin 40 mg/day is safer and more effective than the atorvastatin 80 mg/day in the terms of lipid parameters and inflammatory biomarkers.

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