I am concerned that the number of people with Alzheimer’s disease or dementia is increasing. I have also heard that the popular cholesterol-lowering drugs called statins may decrease the chances of getting Alzheimer’s. I find that I sometimes struggle to remember words or names; should I be worried, and should I ask my physician to prescribe statins?

You are absolutely correct about the increasing incidence of Alzheimer’s disease. This is because people live longer these days, because of advances in medical care and health screening that prolong life. It is important to note that Alzheimer’s disease (AD) involves much more than a mild inability to recall words or names, something which occurs commonly as we grow older.

In order for the diagnosis to be made, there must be significant difficulty for the patient in at least one of the following areas:

- Obvious inability to speak or understand;
- Inability to perform previously easily managed voluntary movements;
- Inability to identify common objects;
- Inability to manage the ordinary activities of daily living, such as dressing, bathing, or eating.

It is further required that additional tests, such as special images of the brain, be performed (CT or MRI), as well as certain blood tests to exclude certain medical problems that may mimic AD.

A number of situations are associated with memory problems and poor concentration; stress, lack of sleep, anxiety, and depression can affect memory. Alzheimer’s disease and other dementias usually involve significant loss of short- and long-term memory. Minor forgetfulness associated with aging occurs in many individuals who do not have dementia. Important medical causes of forgetfulness and poor concentration include some prescription drugs, head injury, alcohol, epilepsy, brain tumors, stroke, infectious diseases (including HIV), some chronic diseases, and vitamin deficiencies. The description you give fits into mild memory loss, and—although you have not given your age—may be related to getting older. You should, however, discuss the issue with your physician, who will assess the problem and the need for further tests in the context of your situation.

The question you raise about statins is important and topical. As you know, this group of drugs is used to lower the cholesterol of at-risk individuals who do not respond to lifestyle changes, which include weight loss, regular exercise, dietary changes, and smoking cessation. These medications have been shown to be very helpful in preventing and decreasing cardiovascular
events (stroke, heart attacks) in individuals with genetic cholesterol problems. These drugs may have side effects, which include liver and muscle abnormalities (Cerivastatin was withdrawn from the market because of the muscle and subsequent kidney damage it caused). The statins currently available continue to be monitored by medicine control bodies, and they are proving very useful in the appropriately monitored patients.

Initially, it was thought that the prolonged use of statins decreased the incidence of AD. These studies were all retrospective. Specific studies now conducted to test this particular outcome are casting doubt on the claim that statins prevent dementia and, specifically, AD. You should take statins only for the specific indication of lowering cholesterol under the supervision of your physician. Physical exercise and mental stimulation such as crossword puzzles have, in fact, been shown to delay the onset of AD. These activities are cheap and give many health benefits!

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