

Utilizing a lower dose statin. Continuing the same statin but at a lower dose is often an effective strategy because SAMS are typically dose-related. Partial dose tolerance allows for individual treatment plans utilizing statins. LDL-C-lowering efficacy with statins is greatest with the lowest daily dose which may achieve 2/3 of its maximum LDL-C lowering effect with an additional 5-6% reduction from baseline with each doubling of dose. Therefore, even at the statin's lowest daily dose, many patients will achieve substantial LDL-C lowering while improving tolerability. Starting with the lowest daily dose of a high potency statin (i.e., atorvastatin 10 mg or rosuvastatin 5 mg) offers a moderate intensity response, which can result in an impressive 33-45% reduction in LDL-C (Table 11). Over 50% reduction in LDL-C can be achieved, even when a high dose statin is not tolerated, by adding either ezetimibe or other non-statin pharmacotherapies in combination with low to moderate-intensity statin treatment (Figure 5). The results of the RACING study demonstrated that compared to treatment with rosuvastatin 20 mg daily, open label treatment with low dose rosuvastatin 10 mg daily in combination with ezetimibe 10 mg daily was associated with a lower rate of drug discontinuation (4.8% combination vs 8.2% monotherapy, $p<0.0001$) and greater achievement of LDL-C < 70 mg/dL at years 1, 2, and 3 (73%, 75%, and 72% combination vs 55%, 60%, and 58% monotherapy, respectively, all $p<0.0001$).⁶⁶

In cases of persistent intolerance during low-dose statin therapy, utilization of an intermittent statin dosing regimen (non-daily statin dosing) may be needed to facilitate patient tolerability. In these circumstances, it is recommended to use statins with a longer half-life (i.e., atorvastatin and rosuvastatin as evidenced in the literature but likely also pitavastatin based on its pharmacokinetic properties) to ensure plasma and hepatic levels are sufficiently sustained to induce meaningful LDL-C lowering. Though limited data exist, there are accounts of 20-40% LDL-C lowering depending on the dose and dosing interval.⁶⁵ To optimize medication adherence, which is a concern with this dosing