

LOVASTATIN (Altoprev) **Hyperlipidemia/prevention of cardiovascular events:** Start 20 mg PO q pm, max 80 mg/day daily or divided two times per day. Do not use with clarithromycin, cobicistat-containing products, cyclosporine, erythromycin, gemfibrozil, grapefruit juice, HIV protease inhibitors, itraconazole, ketoconazole, nefazodone, posaconazole, telithromycin or voriconazole; increases risk of myopathy. Do not exceed 20 mg/day when used with danazol, diltiazem, dronedarone, verapamil, or CrCl <30 mL/min. Do not exceed 40 mg/day when used with amiodarone. [Generic: Tabs, unscored 10, 20, 40 mg. Trade only: Tabs, extended-release (Altoprev) 20, 40, 60 mg.] ▶ ⓧ ♀X/X/X Contraindicated during pregnancy. ▶ Do not breastfeed while taking this medication. \$

PITAVASTATIN (Livalo, Zypitamag) **Hyperlipidemia:** Start 2 mg PO at bedtime, max 4 mg daily. CrCl 15 to 59 mL/min or on dialysis: Max start 1 mg PO daily, max 2 mg daily. Do not use with cyclosporine. Do not exceed 1 mg/day when given with erythromycin. Do not exceed 2 mg/day when given with rifampin. [Trade only: Tabs 1, 2, 4 mg.] ▶ L – ⓧ ♀X – \$\$\$\$\$

PRAVASTATIN (Pravachol) **Hyperlipidemia/prevention of cardiovascular events:** Start 40 mg PO daily, max 80 mg/day. Do not exceed 20 mg/day when given with cyclosporine. Do not exceed 40 mg/day when given with clarithromycin. [Generic/Trade: Tabs, unscored 20, 40, 80 mg. Generic: Tabs, unscored 10 mg.] ▶ L ⓧ ♀X/X/X; Contraindicated during pregnancy. ▶ Do not breastfeed while taking this medication. \$\$\$

ROSUVASTATIN (Crestor) **Hyperlipidemia/slow progression of atherosclerosis/primary prevention of cardiovascular disease:** Start 10 to 20 mg PO daily, max 40 mg/day. Renal impairment (CrCl <30 mL/min and not on hemodialysis): Start 5 mg PO daily, max 10 mg/day. Asians: Start 5 mg PO daily. When given with atazanavir with or without ritonavir, lopinavir with ritonavir, or simeprevir, do not exceed 10 mg/day. When given with cyclosporine, do not exceed 5 mg/day. Avoid using with gemfibrozil; if used concomitantly, do not exceed 10 mg/day. When given with colchicine, do not exceed 5 mg/day. [Generic/Trade only: Tabs, unscored 5, 10, 20, 40 mg.] ▶ L ⓧ ♀X – \$\$

SIMVASTATIN (Zocor, Flolipid) Do not initiate therapy with or titrate to 80 mg/day; only use 80 mg/day in patients who have taken this dose for more than 12 months without evidence of muscle toxicity. **Hyperlipidemia:** Start 10 to 20 mg PO q pm, max 40 mg/day. **Reduce cardiovascular mortality/events in high risk for coronary heart disease event:** Start 40 mg PO q pm, max 40 mg/day. Severe renal impairment: Start 5 mg/day, closely monitor. Chinese patients: Do not exceed 20 mg/day with niacin 1 g or more daily. Do not use with clarithromycin, cobicistat-containing products, cyclosporine, danazol, erythromycin, gemfibrozil, grapefruit juice, HIV protease inhibitors, itraconazole, ketoconazole, nefazodone, posaconazole, strong CYP3A4 inhibitors, telithromycin, voriconazole; increases risk of myopathy. Do not exceed 10 mg/day when used with diltiazem, dronedarone, or verapamil. Do not exceed 20 mg/day when used with amiodarone, amlodipine or ranolazine. Do not exceed 20 mg/day when used with lomitapide; if patient has been on simvastatin 80 mg/day for at least 1 year without muscle toxicity, do not exceed 40 mg/day when used with lomitapide. [Generic/Trade: Tabs, unscored 5, 10, 20, 40, 80 mg. Trade only (Flolipid-\$\$\$\$\$): Susp 20, 40 mg/5 mL.] ▶ L ⓧ ♀X – \$