

# Statin Therapy, Memory, and Cognition: An Updated Narrative Review

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## Abstract

Concerns that statins may impair memory and cognition have persisted since regulatory agencies highlighted rare post-marketing reports of confusion and reversible cognitive symptoms. At the same time, growing observational and meta-analytic evidence suggests that statin therapy may reduce the risk of dementia, particularly Alzheimer's disease, via vascular and pleiotropic mechanisms. This narrative review synthesizes updated data on the relationship between statin use, cognitive performance, and incident dementia, focusing on randomized controlled trials, large prospective cohorts, meta-analyses, and recent mechanistic work. Overall, randomized trials and systematic reviews have not demonstrated consistent evidence of statin-induced cognitive decline, even with intensive low-density lipoprotein cholesterol (LDL-C) lowering. Several large observational studies and recent meta-analyses report a neutral or modestly protective association between statins and dementia risk, with some signals that hydrophilic statins and long-term exposure may confer greater benefit. Small subgroups, including highly susceptible individuals or those on specific lipophilic agents at high doses, may experience idiosyncratic, largely reversible cognitive symptoms. Current evidence supports continuation or initiation of statins when indicated for cardiovascular prevention, with individualized assessment of cognitive complaints, vascular risk, age, frailty, and patient preferences.

**Keywords:** statins, memory, cognition, dementia, Alzheimer's disease, LDL cholesterol, hydrophilic statins, lipophilic statins