

## POSITION STATEMENT FOR OMEGA-3 FATTY ACID COMPOUNDS PRESCRIBING IN POST MI PATIENTS

The prescribing of Omega-3 fatty acid compounds in the NHS for patients post MI in primary care in Lancashire is not recommended.

### Overview

BNF 66 states that omega-3 fatty acid compounds comprise omega-3-acid esters (e.g. *Omacor*<sup>®</sup> and *Prestylon*<sup>®</sup>) and Omega-3-marine triglycerides (e.g. *Maxepa*<sup>®</sup>) therefore this position statement covers the generic and each of these brands as well as any others that may fall into this category.

Updated NICE clinical guideline (NICE CG172<sup>1</sup>) states on page 14 section 1.2.3  
'Do not offer or advise people to use the following to prevent another MI:

- *Omega-3 fatty acid capsules*
- *Omega-3 fatty acid supplemented foods.*

*If people choose to take omega-3 fatty acid capsules or eat omega-3 fatty acid supplemented foods, be aware that there is no evidence of harm.'*

Although the new guidance still recommends patients should adopt a Mediterranean style diet it goes on to state that we should not routinely recommend eating oily fish solely to prevent another MI, although it may form part of a Mediterranean style diet.

A Cochrane systematic review<sup>2</sup> of trials included 36,913 participants and 41 cohort analyses. Pooled trial results did not show a reduction in the risk of total mortality or combined cardiovascular events in those taking additional omega-3 fats (with significant statistical heterogeneity). A sensitivity analysis, which retained only studies at low risk of bias, reduced heterogeneity and again suggested no significant effect of omega-3 fatty acids.

### Recommendation

The NICE guidance is clear, Omega-3 fatty acid compounds should not be used for secondary prevention post MI. Other secondary prevention measures should be implemented for the Lancashire population. Patients should be encouraged to adopt a Mediterranean style diet, to attend cardiac rehabilitation and to take the appropriate prescribed medications. If they have chosen to use an Omega-3 fatty acid compound they should be informed that although it is not advised, there is no evidence of harm.

### References

1. NICE clinical guideline 172: Secondary prevention in primary and secondary care for patients following a myocardial infarction
2. Cochrane Review. Omega 3 fatty acids for prevention and treatment of cardiovascular disease. Cochrane Database of Systematic Reviews 2004, Issue 4. Art. No.: CD003177

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