Aged over 70 and healthy? A daily aspirin won't help

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Aspirin has been linked to a greater risk of serious bleeding JONATHAN BRADY/PA

Taking aspirin every day does not significantly reduce the risk of a heart attack or stroke in healthy people over 70, a study has found.

It also fails to extend life free of disability or dementia and may even increase the risk of dying early, according to the researchers.

There is evidence that aspirin can help to prevent heart attacks and strokes in people with heart problems, and doctors had hoped that the same would be true for the general population. However, studies in younger people showed that the risks outweighed the benefits and the new research confirms that the same is true for the elderly.

The study, involving more than 19,000 people, found that the medicine was linked to a greater risk of serious bleeding.

John McNeil, of Monash University in Melbourne, the lead researcher, said that many older people may be taking aspirin unnecessarily. The results have been published in The New England Journal of Medicine.

The study enrolled 19,114 people, mostly over the age of 70. About half were told to take a 100mg low dose of aspirin every day and the rest were given a placebo.

Five years later the rate of dementia, disability and cardiovascular events such as heart attacks, strokes and coronary heart disease were similar in both groups. Of those who took aspirin, 3.8 per cent experienced serious bleeding compared with 2.8 per cent in the other group. Of those who took aspirin, 5.9 per cent died during the study compared with 5.2 per cent of the placebo group. The deaths were mainly from cancer and may be coincidental.

Professor McNeil said: "Despite the fact that aspirin has been around for more than 100 years we have not known whether healthy older people should take it as a preventive measure to keep them healthy for longer.

"It means millions of healthy older people around the world who are taking low dose aspirin without a medical reason may be doing so unnecessarily because the study showed no overall benefit to offset the risk of bleeding."

Taking aspirin is not recommended as a preventive strategy for people without heart conditions by the NHS. It is, however, used to prevent further illness in those with existing conditions. Professor McNeil said that the new results did not apply to those people.

Stephen Evans, professor of pharmacoepidemiology at the London School of Hygiene and Tropical Medicine, said the increased death rate in the aspirin group was surprising: "Previous studies have not shown such increases and reductions in bowel cancer have been seen in some studies. The authors, rightly, suggest treating the unexpected effects with caution."