Many patients have been asking me about getting a blood test called C-reactive protein. They have heard that reducing it lowers their chance of dying from cardiovascular disease. I really do wish this was the case but unfortunately it is not the answer to curing cardiovascular disease.

Highly specific C-reactive protein (CRP) is an acute phase reactant with a short halflife of approximately 19 hours and is a marker for inflammation. More than 25 studies published during the last 10 years have provided strong evidence that Creactive protein predicts cardiovascular risk in various scenarios, not only in initially healthy subjects, but also in those who manifest atherosclerosis. This blood protein, which only a short time ago was thought to be by many more important than cholesterol, is now regarded as just a risk factor for cardiovascular disease. Despite multiple attempts to develop drugs to lower C-reactive protein, many experts now feel that it is time to abandon that search. There was a study with 35 co-authors who developed a technique that allows one to get answers quickly about causality. The study showed that in a population, there are people who just happen to produce more C-reactive protein throughout their lives and others who just happen to produce less. If indeed C-reactive protein causes heart disease, those who make more would have more heart disease. The study did not find this. There was absolutely no association between CRP and heart disease rate. So, in other words, the association between C-reactive protein and heart disease must reflect something else. In summary, C-reactive protein is thus just a marker of inflammation and increased cardiovascular risk. There is no evidence that lowering it with medications lowers ones risk of having a heart attack or stroke.