



THE PRIMARY EFFICACY ENDPOINT FOR ALIROCUMAB, REDUCTIONS IN LOW-DENSITY LIPOPROTEIN CHOLESTEROL

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PURPOSE

To analyse the use and outcomes of **alirocumab** treatment in patients with familial hypercholesterolemia (FH), or dyslipidemia with high/very high cardiovascular (CDV) risk, as an adjunct to diet in a tertiary-level hospital.

METHODS

Retrospective, observational study

Patients treated with alirocumab

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Variables

- Age
- Sex
- Diagnosis
- Dose variation
- Serum levels of LDL-c

(low-density lipoprotein colesterol)

Evaluation

• Inadequate control:

LDL-c ≥ 70 mg/dL after 12 weeks of treatment

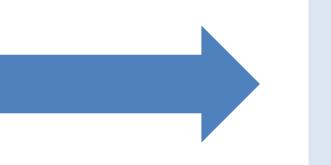
RESULTS

Patients	N=74
Mean Age	58,6 years
Sex	64% men
Diagnosis	FH or dyslipidemia with high/very high CDV risk

LDL-c Levels	N
Baseline > 150 mg/dL	80%
Reached the targeted range	40 (54%)
Reached >70 mg/dL	34 (46%)

Alirocumab starting posology:

75 mg/14 days



Increased to 150 mg/ 14 days by week 12:

9 patients (27%)

CONCLUSION

- Dosage adjustments according to LDL-c levels should be followed closely to achieve better outcomes.
- The dose should be increased to 150 mg every 2 weeks at week 12 if LDL-c is greater or equal to 70 mg/dL at week 8.
- An adequate organization and coordination between the different implicated medical services would be recommendable, as the dates for monitoring LDL-c and the optimal monitoring interval are already established.