ALIROCUMAB AND EVOLOCUMAB: RESULTS IN CLINICAL PRACTICE

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BACKGROUND

Hypercholesterolemia is a well-established risk factor for developing coronary heart disease and increasing the risk of cardiovascular events (RCE). Alirocumab and evolocumab, proprotein convertase subtilisin-kexin type 9 (PCSK9) inhibitors, can complement the management of patients who do not achieve target cholesterol levels with standard treatment or intolerance to it.

AIM AND OBJECTIVES

To evaluate the effectiveness of alirocumab and evolocumab in reducing LDL-cholesterol (LDL-c) and RCE in patients with poorly controlled hyperlipidemia.

MATERIAL AND METHODS

- Observational and retrospective study which included every patient treated with Alirocumab y evolocumab
- March 2016 and September 2019
- Demographics and clinical variables: sex, age, drug, dose, frequency of administration, previous hypolipemic treatment, causes of suspension and analytical parameters at the start of treatment, 12 weeks and 24 weeks (total cholesterol (TC), LDL-c, HDL-cholesterol and triglycerides).
- To assess RCE using the Framingham scale was also recorded whether patients were diabetic or smokers.
- To assess effectiveness we calculated the percentage reduction (PR) of TC, LDL-c and RCE.
- Adverse effects (AE) were recorded to assess safety.

RESULTS

- 46 patients were included.
- 76% males
- Average age: 60.8 years (SD:11.1)

At drug initiation 71.7% of patients were on high-dose statins 76.1% were on ezetimibe as an adjuvant

The median duration of treatment was 27.2 months (0.2-43.8)

<table>
<thead>
<tr>
<th>PR at 12 weeks of treatment</th>
<th>PR at 24 weeks of treatment</th>
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<tbody>
<tr>
<td>TC</td>
<td>31.1%</td>
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<tr>
<td>LDL-c</td>
<td>49.3%</td>
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<tr>
<td>RCE</td>
<td>34.1%</td>
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<table>
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<tr>
<th>Mean baseline values</th>
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<tbody>
<tr>
<td>TC</td>
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<tr>
<td>LDL-c</td>
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<tr>
<td>HDL-c</td>
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<td>Triglycerides</td>
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8 PATIENTS RECORDED EA:

- hypertransaminase mia
- syncope
- flu-like syndrome
- arthralgias
- headache

CONCLUSION

- PCSK9 inhibitors are an effective and safe therapeutic tool in the control of LDL-c and cardiovascular risk.
- In our patients, more pronounced reduction in parameters was observed in the first 12 weeks, and was maintained afterwards.
- In addition, results obtained were similar to those of the clinical trials.