Despite the fact that guidelines recommend the initiation of high-intensity statin therapy in patients with acute coronary syndrome (ACS), target levels are not achieved in a large number of patients. Evolocumab, a rapidly acting, low-density lipoprotein cholesterol (LDL-C) lowering drug had so far not been studied in the acute phase of acute coronary syndrome (ACS).

The "Evolocumab for Early Reduction of LDL-Cholesterol Levels in Patients with Acute Coronary Syndromes" (EVOPACS) study was conducted to assess the feasibility, safety, and efficacy of evolocumab when initiated during in-hospital phase of acute coronary syndrome. Findings of the trial were just presented at the #ESCCongress in Paris today.

The trial was conducted with 308 patients who were hospitalised for ACS with elevated LDL-C levels. Study participants were randomly assigned to receive subcutaneous evolocumab 420mg or placebo. The dose was administered in-hospital and once again, after 4 weeks, on top of atorvastatin. The primary endpoint of the study was calculated in terms of change in LDL-C from baseline to 8 weeks.

78% of the study patients had not previously been on statin treatment. Findings of the study show that LDL-C levels decline from 3.61 mmol/L to 0.79 mmol/L at week 8 in the patient group that received evolocumab compared to a decline from 3.42 mmol/L to 2.06 mmol/L in the placebo group. LDL-C levels of <1.8 mmol/L were achieved in 95.7% of patients in the evolocumab group at week 8 compared to only 37.6% in the placebo group.

These findings clearly show that evolocumab, when added to high intensity statin therapy, resulted in substantial reduction in LDL-C levels and was well tolerated.

Source: JACC
Image Credit: iStock

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