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# Greater drop in LDL seen with atorvastatin plus PCSK9 antibody

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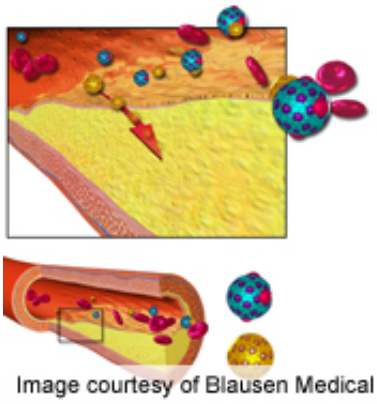


Addition of the fully human serum proprotein convertase subtilisin/kexin 9 monoclonal antibody, SAR236553, to atorvastatin is associated with greater reductions in low-density lipoprotein cholesterol levels compared with atorvastatin alone, according to a study published online Oct. 31 in the *New England Journal of Medicine*.

(HealthDay)—Addition of the fully human serum proprotein convertase subtilisin/kexin 9 monoclonal antibody, SAR236553, to atorvastatin is associated with greater reductions in low-density lipoprotein (LDL) cholesterol levels compared with atorvastatin alone, according to a study published online Oct. 31 in the *New England Journal of Medicine*.

Eli M. Roth, M.D., from the Sterling Research Group in Cincinnati, and colleagues performed a phase 2 trial involving 92 patients with LDL

cholesterol levels ≥100 mg/dL after at least seven weeks of treatment with 10 mg atorvastatin. Participants were randomized to three groups to receive eight weeks of 10 or 80 mg daily atorvastatin, plus SAR236553 once every two weeks, or eight weeks of 80 mg atorvastatin with placebo once every two weeks.

The researchers found that there was a significantly greater least-squares mean percent reduction from baseline in LDL cholesterol for treatment with 80 mg atorvastatin plus SAR236553 (73.2 ± 3.5) compared with 10 mg atorvastatin plus SAR236553 (66.2 ± 3.5) or atorvastatin plus placebo (17.3 ± 3.5). All patients who received SAR236553 attained an LDL cholesterol level

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