

SPEAKER: I work as an interventional cardiologist, and so I think I have somewhat of an angle of view of lipid-lowering therapy in general and PCSK9 inhibitors in particular. I mean, interventional cardiology in coronary artery disease has been a tremendous advance, saving thousands of lives over many years, and it's a remarkably effective tool for improving prognosis and relieving symptoms.

That being said, it's a palliative procedure. We're plumbing the arteries to try to alleviate symptoms and issues related to obstructive coronary artery disease but we know that coronary artery disease is a systemic process. It's a chronic process that started well before we investigated the coronary arteries in a given patient.

And among the patients we treat, we know that we're fixing one segment or a couple of segments in the coronary artery tree, but we're definitely not addressing the systemic arterial disease, particularly true in the highest risk patients, patients with extensive coronary artery disease, patients with diabetes, patients with polyvascular disease. And previous and ongoing analysis of the Outcomes trials with PCSK9 inhibitors have indeed shown that these types of patients with multi-vessel disease, extensive or severe coronary artery disease, diabetes, polyvascular disease, are patients who have a greater absolute risk of adverse cardiovascular outcomes and who derive a greater absolute benefit of intensive therapy with these new potent agents for lipid lowering.