

ULF I think we have clearly two determinants on who will benefit most from PCSK9 inhibition. And this is on the one
LANDMESSER: hand, the patients who have very high absolute cardiovascular risk, and on the other hand, patients who have very high cholesterol levels. And these two factors, I think, we have to understand in the clinical setting.

So if I have a patient who was a younger patient with coronary disease who has diabetes, polyvascular disease-- additional factors-- where it's clear he has a particular high absolute risk, this patient I really would like to bring substantially down. And here, the threshold that has been discussed in Europe is certainly if the patient remains above an LDL of 100, that will be a patient who would be considered for PCSK9 inhibition.