

**SPEAKER:** So I'm an endocrinologist. I've been doing lipids for 35 years now. I have a very strong focus on genetic hyperlipidemia. And so I get a lot of people referred to me who have heterozygous familial hypercholesterolemia. They have starting LDLs, off meds, anywhere from 200 to 450, 500.

And so those people come to me. They may or may not be on medication. They may or may not have had events. But they come to me, they end up on as much statin as I can get them on with the addition of ezetimibe. And in many cases, the LDLs are still 161, 190, anywhere up above 100.

And particularly in those who've already had evidence of coronary disease-- and many of them have premature coronary disease. Some of these patients have had coronary disease starting in their 30's, mid-30's. And so simply, it is a no-brainer. You have a patient who had his first stent at age 29 or 35, has a baseline LDL 250, 350, on atorva 80 and ezetimibe 10, or rosuvastatin 40 and ezetimibe 10, the LDL is 160. That person needs to be on a PCSK9 monoclonal antibody.

And many of those, even though you think about the PCSK9s as a sort of 40% to 70% decrease in LDL, some of those patients actually get down to 20 to 30. And I have patients who I've had on PCSK9s for several years now since I had them in clinical trials, and some of them who had had multiple stents have not had an event in several years. So clearly we're seeing a benefit in those familial hypercholesterolemia patients. And I think that was shown in some of the long-term trial, even before the Outcomes trials, although those were small numbers. So those are clearly people who need to do it.

The other person would be maybe not clearly genetic hyperlipidemia. Maybe the starting LDL was in the range of 181, 190. They're on as much statin as they can take. I get a little bit further drop with ezetimibe. They have fairly recent coronary disease. Many of them are younger also, in their 40's and 50's, and they've had stents, and they've had bypass surgery. And those are also people where I would like to get the LDL well below 70. So they're starting out maybe 70 to 100, and they get a nice response to the PCSK9 monoclonal antibody.