

MICHAEL H. DAVIDSON: The reason for optimism is really twofold. One, the outcome studies are both positive. And they worked as expected for the amount of LDL lowering. And we also saw a signal of reduced mortality when LDLs were above 100 with the alirocumab ODYSSEY outcome study.

So I think from an evidence perspective, it's a lot more data supporting, more aggressive intervention for people at high risk for cardiovascular disease. That's part one.

Part two is the cost reduction. It's always been kind of behind the scenes, but now it's out publicly what the costs are and how that's come down. So I think physicians or clinicians who were concerned about the cost now recognize that it's a good value. I mean, it's \$6,000 a year.

It's kind of where branded statins were at their peak. And then we're talking about value, you look at two factors. One is the baseline LDL, and the other is the risk of the patients. And you think about those two factors and how much you can reduce absolute risk, the number you need to treat becomes quite favorable. And now, the cost to reduce that risk is also in line with what we expect from therapies such as this.