

SPEAKER 1: So who are the patients with ASCVD that I'd use a PCSK9 inhibitor in? Apart from patients who have very high levels of LDL cholesterol, when would I consider a patient who had an LDL cholesterol of 80 or 90 milligrams per deciliter, and I think that's the patient who's had recurrent events, progressive disease, the patient who's got polyvascular disease. So a patient who's not only had coronary events, but has got evidence of peripheral arterial disease, perhaps a prior stroke, patient with diabetes.

And the reason I think that is because we see that not only are those patients at a much higher risk of having a cardiovascular event the future than just your average ASCVD patient, but they derive a greater clinical benefit from use of PCSK9 inhibitors on top of a statin. We know the absolute risk reduction is greater. The number needed to treat to prevent event is much smaller. And so, really, the math makes that pretty simple, that it's those high risk CVD patients that are going to derive the greatest benefit. And so I'd consider starting these agents even when the LDL cholesterol doesn't look too bad.