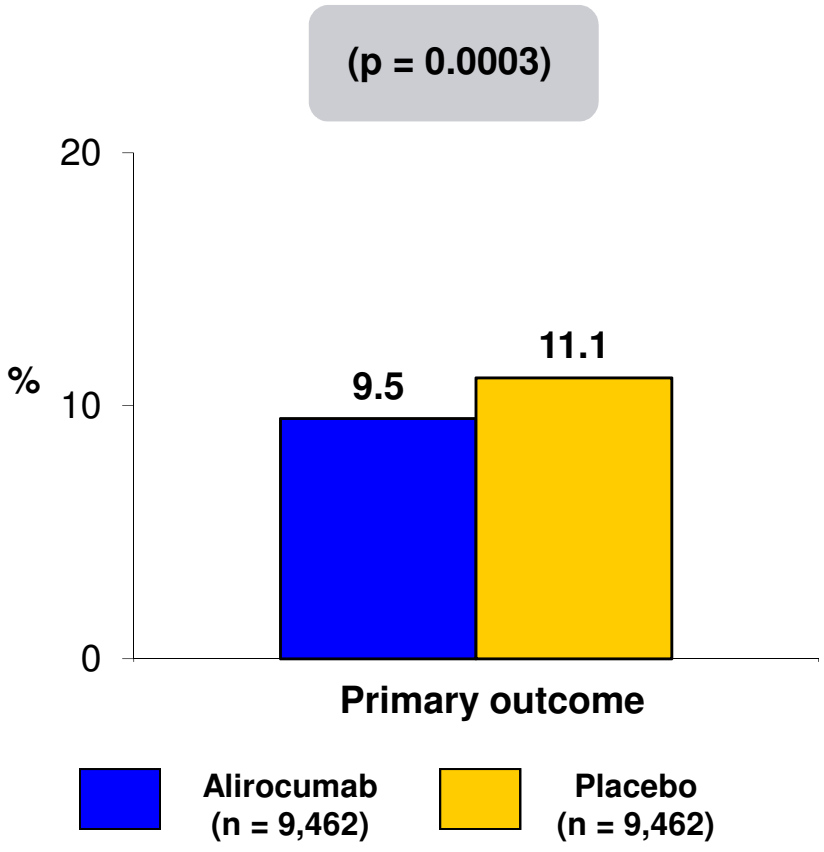
ODYSSEY OUTCOMES

Trial design: Patients 1-12 months out from an ACS event were randomized in 1:1 fashion to alirocumab q2 weeks subcutaneously or placebo. Drug was titrated to keep the LDL-C between 25 and 50 mg/dl, but above 15 mg/dl. Patients were followed for 48 months.



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Results

- Primary outcome, MACE: alirocumab vs. placebo: 9.5% vs. 11.1%, p = 0.0003; ↑ benefit if LDL ≥100
- CHD death: 2.2% vs. 2.3%, p = 0.38; all-cause mortality: 3.5% vs. 4.1%, p = 0.026
- MI: 6.6% vs. 7.6%, p = 0.006; stroke 1.2% vs. 1.6%, p = 0.01; unstable angina: 0.4% vs. 0.6%, p = 0.02

Conclusions

- Landmark trial; indicates that the use of alirocumab q2 weeks significantly reduces ischemic events, including all-cause mortality and MI, among patients with an ACS event within the preceding 1-12 months; 90% were on high dose of a potent statin
- Cost-effectiveness analyses important for these expensive medications; cost-benefit ratio may be most favorable in patient population with LDL ≥100 mg/dl

Presented by Dr. Philippe Steg at ACC 2018