

## Praluent® (alirocumab) - New orphan indication

- On April 1, 2021, the FDA approved Regeneron's <u>Praluent (alirocumab)</u>, as an adjunct to other low density lipoprotein cholesterol (LDL-C)-lowering therapies in adult patients with homozygous familial hypercholesterolemia (HoFH) to reduce LDL-C.
- Praluent is also approved:
  - To reduce the risk of myocardial infarction, stroke, and unstable angina requiring hospitalization in adults with established cardiovascular disease.
  - As an adjunct to diet, alone or in combination with other LDL-C-lowering therapies, in adults with primary hyperlipidemia, including heterozygous familial hypercholesterolemia (HeFH), to reduce LDL-C.
- The approval of Praluent for the new indication was based on ODYSSEY HoFH, a double-blind, placebo-controlled study in 45 adult patients with HoFH. Patients were taking maximally tolerated doses of statins with or without other lipid-lowering therapy and required additional LDL-C reduction. Patients were randomized to Praluent or placebo.
  - At week 12, the treatment difference between Praluent and placebo in mean LDL-C percent change from baseline was -36% (95% CI: -51, -20; p < 0.0001).
- The recommended dose of Praluent for the treatment of HoFH is 150 mg once every 2 weeks administered subcutaneously.
  - LDL-C should be assessed when clinically appropriate. The LDL-lowering effect of Praluent may be measured as early as 4 weeks after initiation.
  - Refer to the Praluent drug label for dosing for its other indications



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