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The LDL-C-Lowering Landscape: Navigating Current and Future Therapeutic Options

Announcer:
Welcome to DataPulse from AHA 2025 Scientific Sessions on ReachMD. This activity, titled “The LDL-C-Lowering Landscape: Navigating Current and Future Therapeutic Options” is provided by Global Learning Collaborative.

Dr. Kausik Ray:
Welcome to Lipid 360. I'm Professor Kausik Ray, professor of public health and a consultant cardiologist at Imperial College, London. Now, one of my main areas of interest, and it should be yours, is cardiovascular disease. And atherosclerotic cardiovascular disease remains the number one killer in the entire world. Although we know a lot about it, we know when it starts early in life and it progresses, there's not much that we're actually doing to shift these curves and the event rates that are occurring. And that really is something that I think we can all change.

So central to this is the role of cholesterol lowering and LDL cholesterol in particular. And what we've learned over the years is that although statins are foundational and they’re the first treatments that we use, many of our patients are getting treatments when they've got more advanced atherosclerosis. So this means as soon as we're aiming for lower cholesterol goals in those higher-risk patients, it's mathematically impossible in about 80% of patients to get to those goals without additional treatments. And this is where all of these non-statin, lipid-lowering treatments come in.

We've got treatments like ezetimibe, which are oral treatments. We've got PCSK9 inhibitors, which are either monoclonals or sRNA-based. And these can give you another 50% or so further lowering over and above what is achievable with a statin. So now you're getting about 75% lowering of LDL cholesterol. And we’ve got other oral agents, like bempedoic acid that may give you 18% to 25% lowering. And coming in the future, we've got other novel therapies which are incredibly exciting. Obicetrapib, belonging to a class of agents called a CTP inhibitor, and oral PCSK9-lowering therapies.

But what we have to do is learn to use those in conjunction with other treatments that we've got so that we can potentially reduce LDL cholesterol levels from anywhere between 60%, 75%, and 90%. So the key take-home, I think, for you is think about this learning resource, Lipid 360, as a center for updated information about assessing risk, how to integrate current treatments into clinical practice to manage your patients better.

I'm Kausik Ray and thank you for watching.

Announcer:
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