

Session. Focus on dislipidemie e prevenzione cardiovascolare

Efficacia e sicurezza dell'acido bempedoico: risultati del programma CLEAR

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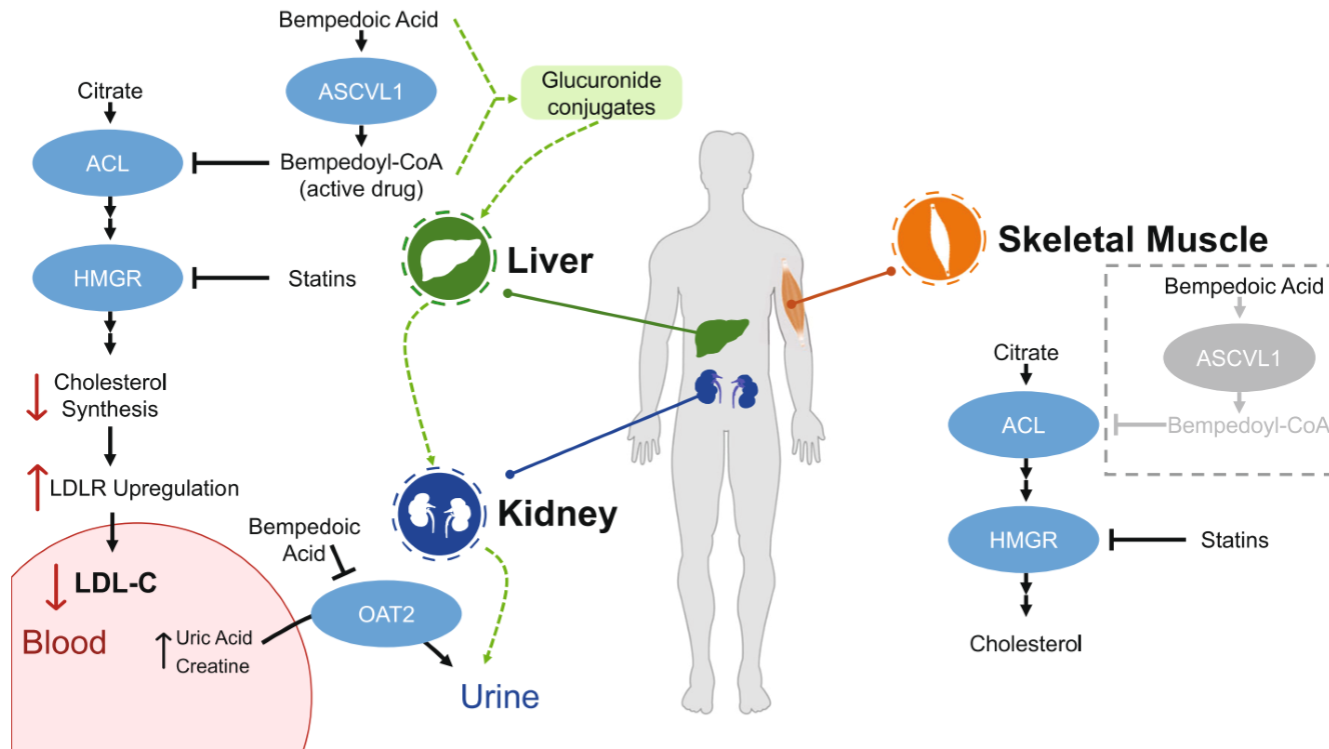
U.O.C. Cardiologia, Ospedale S. Maria delle Croci, Ravenna

ESC Working Group Thrombosis e nome

Lecture fees from and/or consulting for Daiichi Sankyo



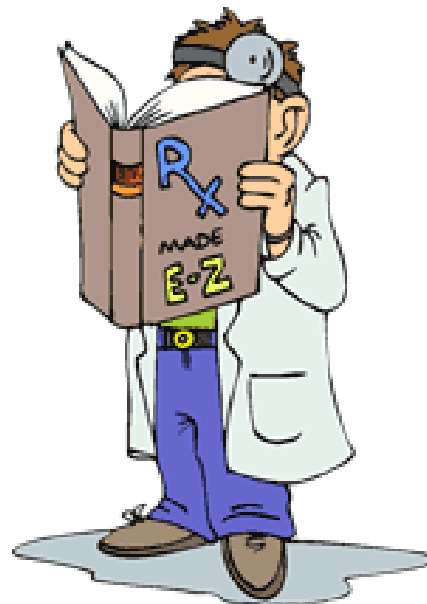
Mechanism of action



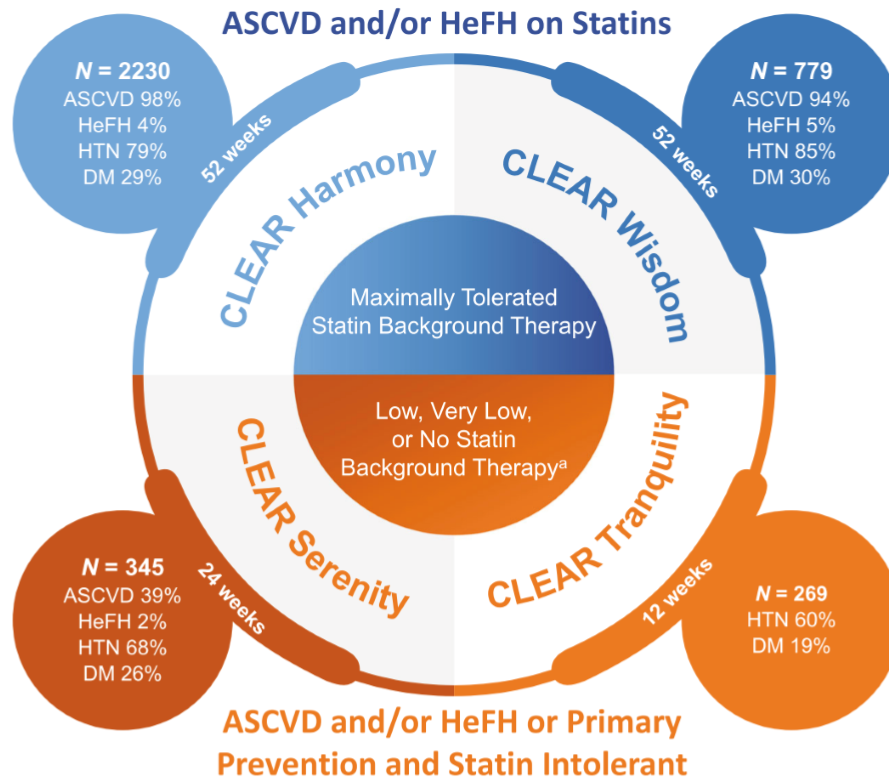
Ballantyne CM et al. Cardiovascular Drugs Therapy 2021;35:853-64



Thus, is bempedoic acid
effective and safe in
reducing LDL-C?



The CLEAR program

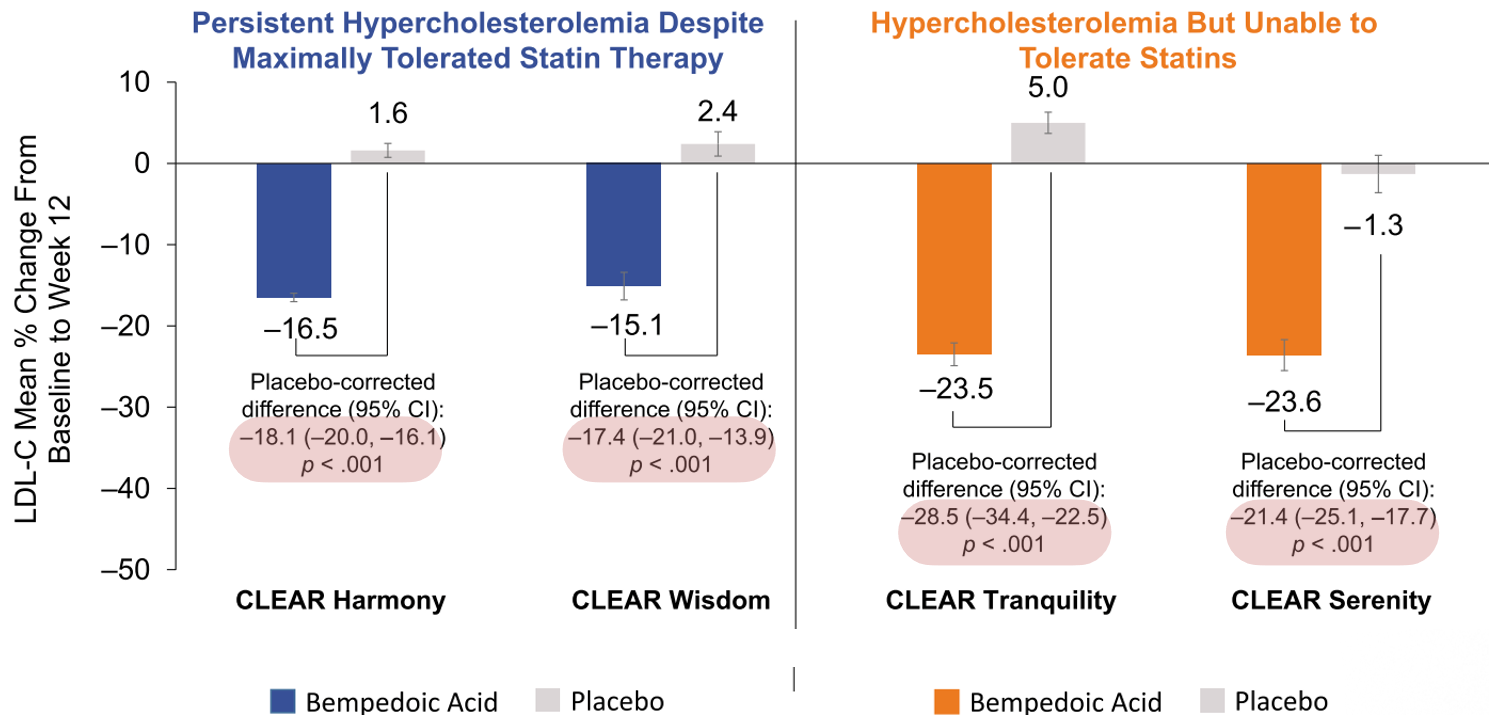


a Low-dose statin therapy = average daily dose of rosuvastatin 5 mg or atorvastatin 10 mg, simvastatin 10 mg, lovastatin 20 mg, pravastatin 40 mg, fluvastatin 40 mg, pitavastatin 40 mg. Very low-dose statin therapy = average daily doses less than above

Adapted from Ballantyne CM et al. Cardiovasc Drugs Ther 2021;35:853-64



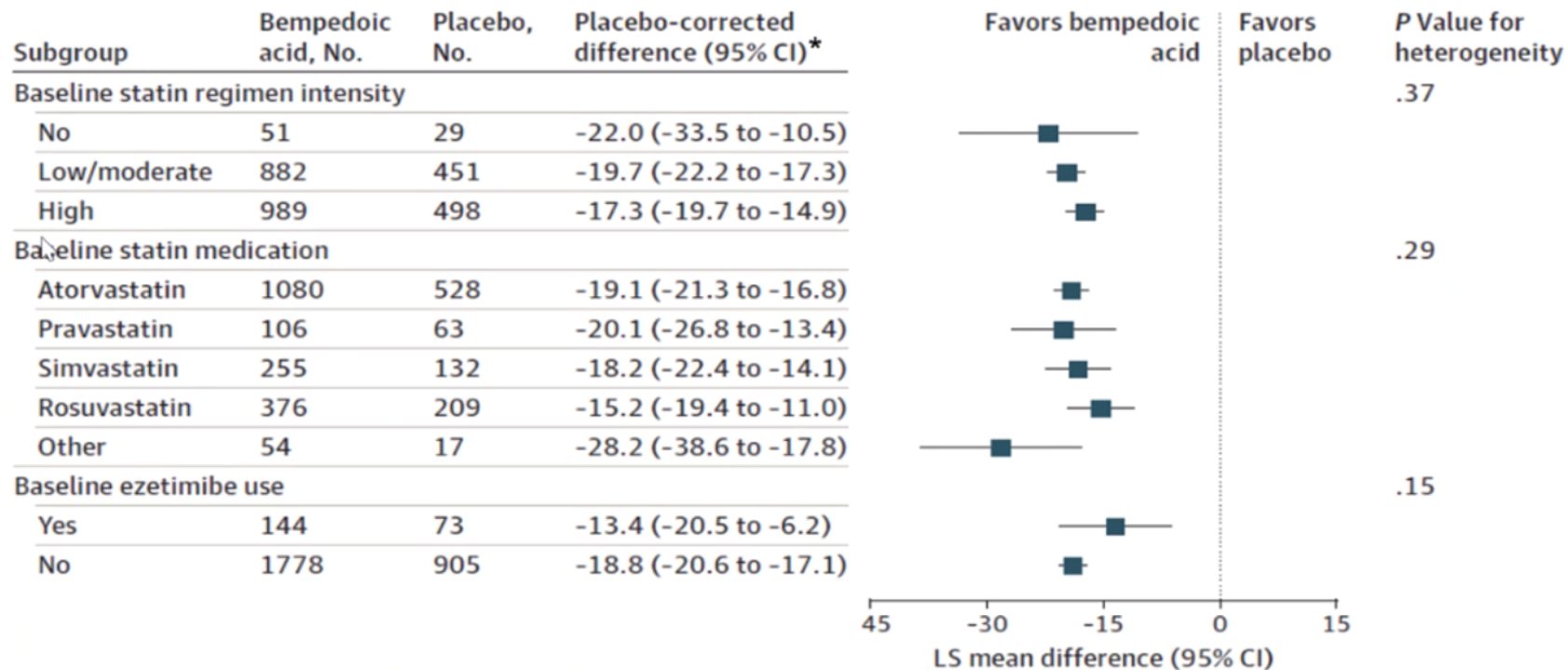
LDL-C reduction



Adapted from Ballantyne CM et al. Cardiovasc Drugs Ther 2021;35:853-64



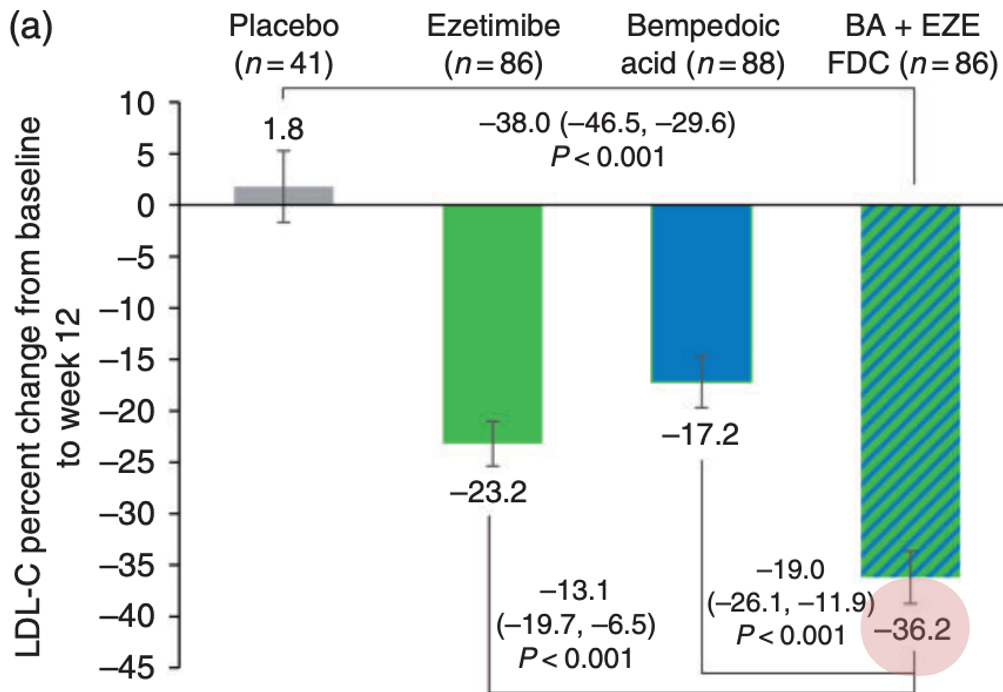
Independent of ...



Banach M et al. JAMA Cardiol 2020;5:1124-35



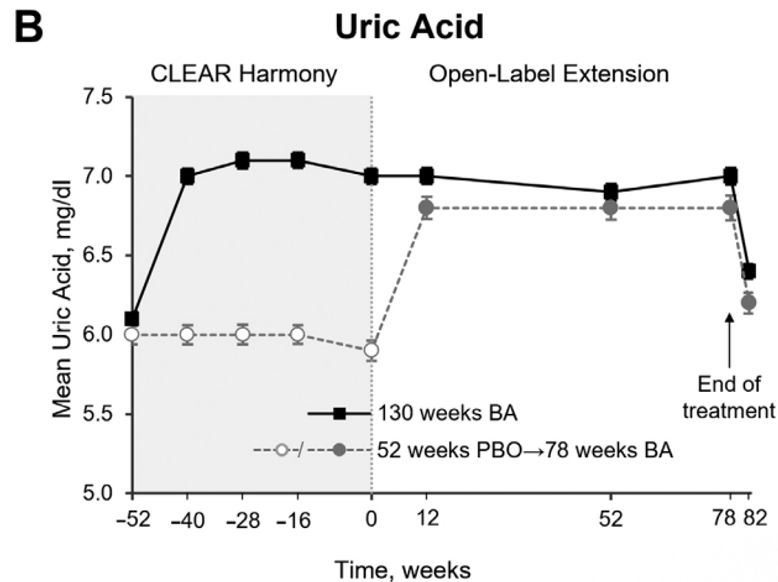
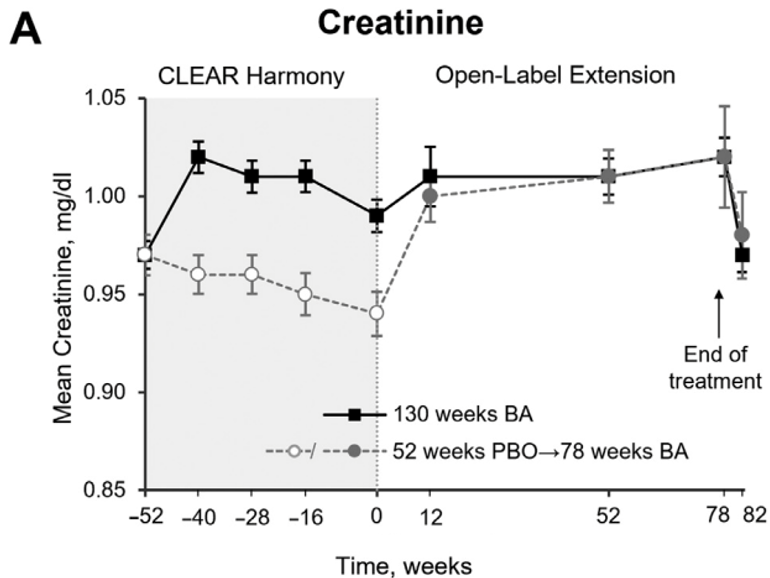
- Phase 3, double-blind clinical trial enrolling pts. at high CV risk
- Randomization (2:2:2:1) to fixed-dose combination vs. bempedoic acid 180 mg vs. ezetimibe 10 mg vs. placebo in addition to stable background statin therapy



Ballantyne CM et al. Eur J Prev Cardiol 2020;27:593-603



Phase 3, open-label extension study following the CLEAR Harmony
1,462 pts.



Ballantyne CM et al. Am J Cardiol 2022;174:1-11



The CLEAR Outcomes trial

**Multicenter, International, Double-Blind,
Placebo-Controlled, Randomized Trial**

OBJECTIVE: To evaluate the effect of bempedoic acid on CV outcomes in statin-intolerant patients at high risk of or with established atherosclerotic CV disease (ASCVD).

13,970
PATIENTS

INCLUSION CRITERIA: Age 18-85 years, established ASCVD or high-risk primary prevention, unable to tolerate ≥ 2 statins or unwilling to attempt a second statin, fasting LDL-C >100 mg/dL



BEMPEDOIC ACID
(N=6,992)

VS.

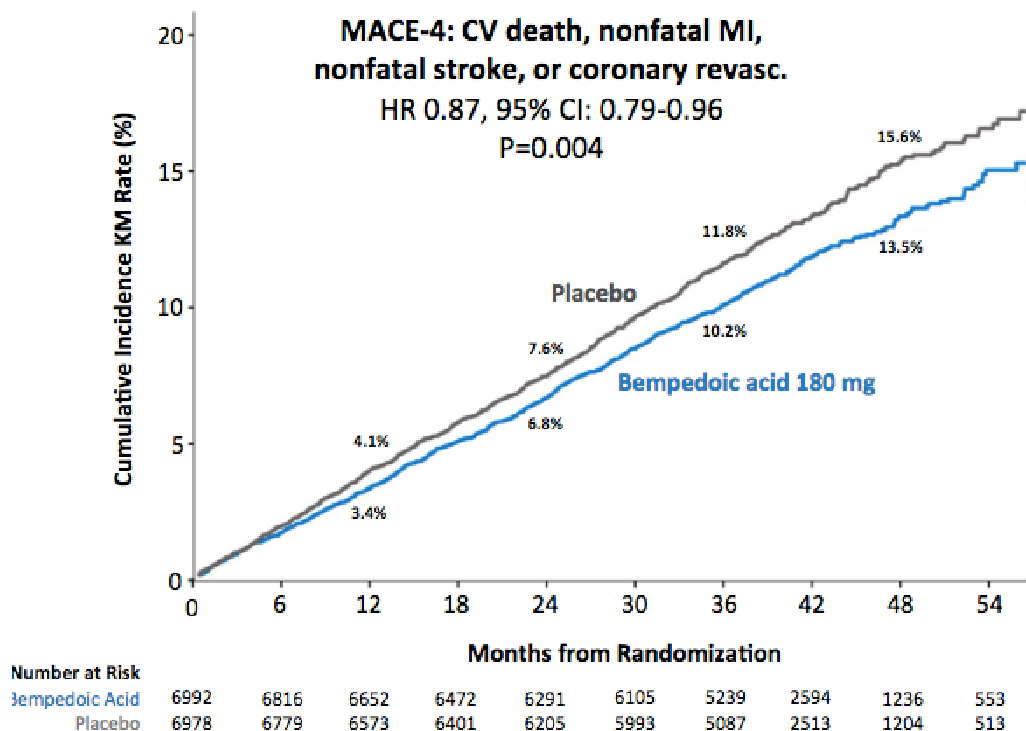


PLACEBO
(N=6,978)

Nichols SJ et al. Am Heart J 2021;235:104-12



Primary outcome

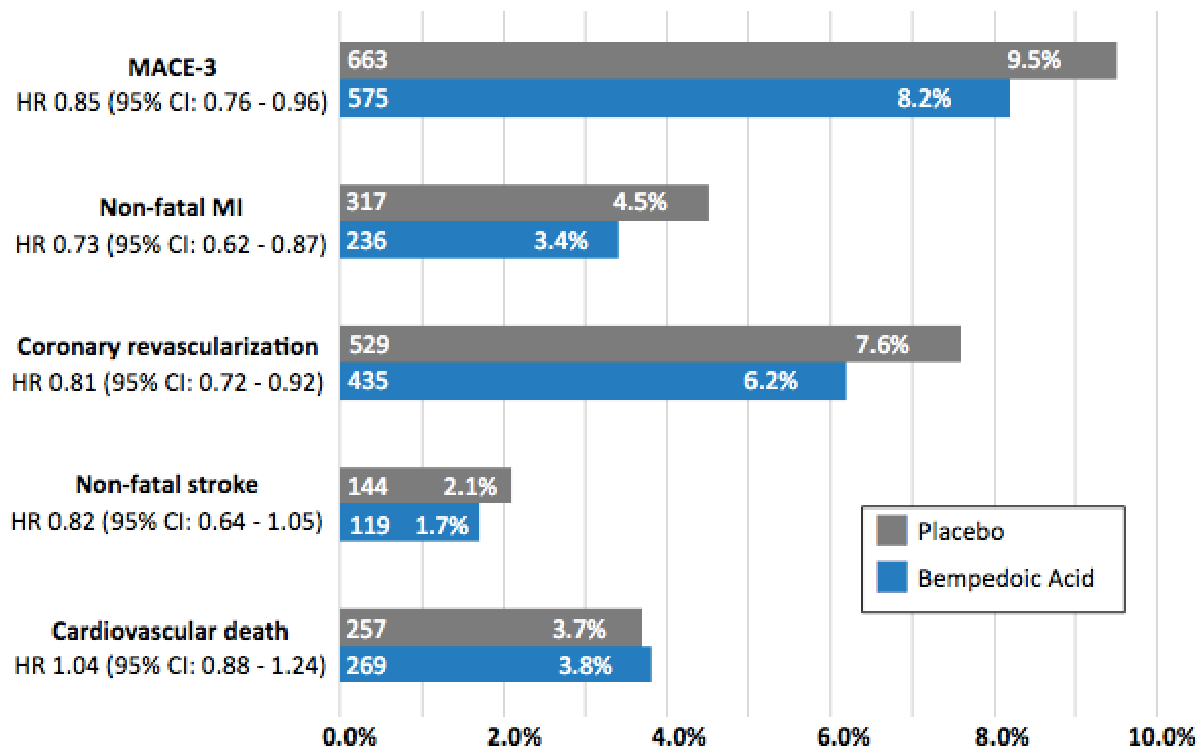


Note: This Kaplan Meier (KM) Curve presents the time to first occurrence for each of the components of MACE-4.

Nissen SE et al. N Engl J Med 2023;388:1353-64



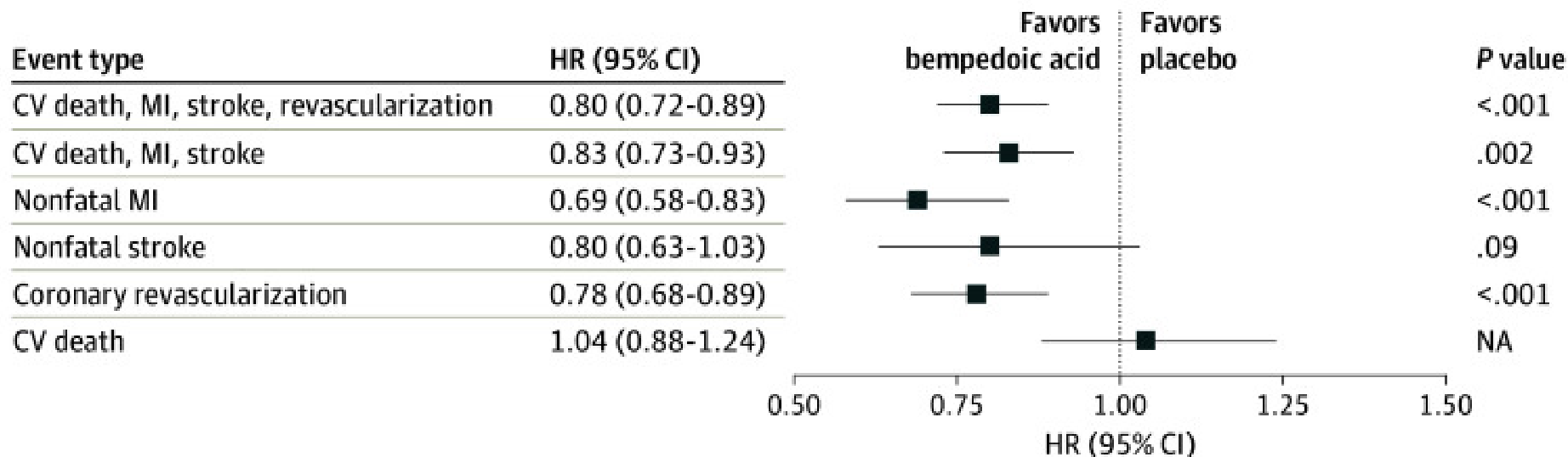
Key secondary outcomes



Nissen SE et al. N Engl J Med 2023;388:1353-64



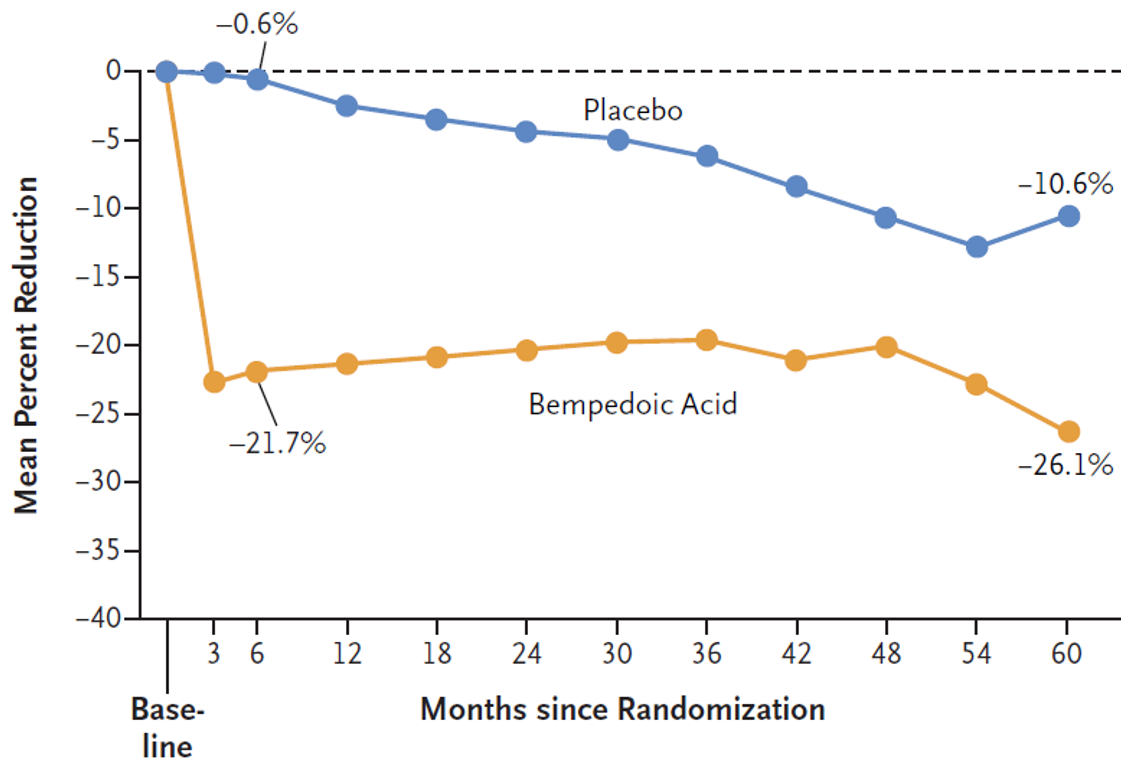
Effect on total events



Nicholls SJ et al. JAMA Cardiol 2024;9:245-53



LDL-C levels



Nissen SE et al. N Engl J Med 2023;388:1353-64



Event	Bempedoic acid	Placebo
Any adverse event that started or worsened after the first dose of a trial agent (%)	86.3	85.0
Adverse event leading to discontinuation of the trial regimen (%)	10.8	10.4
Renal impairment (%)	11.5	8.6
Myalgia (%)	5.6	6.8
Discontinuation of the trial regimen because of myalgia (%)	1.8	1.9
Hyperuricemia (%)	10.9	5.6
Gout (%)	3.1	2.1

Adapted from Nissen SE et al. N Engl J Med 2023;388:1353-64



Recommendations	Class	Level
Bempedoic acid is recommended in patients <i>who are unable to take statin therapy</i> to achieve the LDL-C goal	I	B
The addition of bempedoic acid to the maximally tolerated dose of statin with or without ezetimibe should be considered <i>in patients at high or very high risk</i> in order to achieve the LDL-C goal	IIa	C

Mach F et al. Eur Heart J 2025;46:4359-78



Nel programma CLEAR, l'acido bempedoico è risultato:

- efficace nel ridurre in modo rilevante e protratto i valori di LDL-C
- efficace nel ridurre significativamente gli eventi cardiovascolari avversi (nel pz. intollerante a statine)
- ben tollerato relativamente a effetti collaterali

