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ADDITIONAL BENEFITS OF ROSUVASTATIN/EZETIMIBE COMBINATION THERAPY

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Abstract

Control of blood cholesterol level is one of the most effective strategies for atherosclerotic cardiovascular disease (ASCVD) prevention. In fact, many clinical trials have clearly demonstrated that low-density lipoprotein cholesterol (LDL-C) lowering, primarily with statins, reduces major ASCVD risk and mortality. However, available data indicate that a lot of patients fail to achieve LDL-C goals, and this is particularly frequent in patients at very high ASCVD risk. Furthermore, owing to side effects, a significant percentage of patients cannot tolerate high intensity statin therapy.

Ezetimibe is the first of a new class of cholesterol absorption inhibitors that impairs dietary and biliary cholesterol absorption at the brush border of the intestine without affecting the absorption of triglycerides or fat-soluble vitamins. Ezetimibe added to statin therapy results in an additional 15–20% reduction in LDL in primary hypercholesterolemia. Moreover, combination therapy of ezetimibe with the lowest statin dose was shown to be as effective as statin monotherapy at the highest dose and ezetimibe has been well tolerated.

IMPROVE-IT trial clarified the benefits of extremely tight lipid control with ezetimibe and statin combination therapy for individuals at very high or extreme risk

Additionally, studies have recently shown that the concentration of apoB and apoB/A1 in the blood are risk factors for atherosclerosis and are more potent predictors than LDL-C in predicting the risk of cardiovascular disease. In a local study, the Rosuvastatin/Ezetimibe combination treatment showed a statistically significant decrease in the rate of change(%) of ApoB/ApoA1 compared to the Rosuvastatin monotherapy.

In patients with Hypercholesterolemia who require thorough lipid management to prevent cardiovascular events, the combination of Rosuvastatin and Ezetimibe is considered to effectively control lipid levels through the inhibition of the synthesis of lipid and the suppression of absorption.

Keywords

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