

Provide significant and consistent reductions in

LDL-C

for your HeFH patients¹⁻³



HeFH is considered a very high CV risk factor.⁴

For HeFH patients who are unable to reach the LDL-C target with standard therapy, the 2019 ESC/EAS guidelines recommends further LDL-C reduction with a PCSK9-i.⁴

Praluent[®]
alirocumab

75mg/150mg
(n=488)

Reduction from baseline
1.84 mmol/L (71.1mg/dL)
vs. placebo (n=244)
P<0.0001

In FH I,

-48.8%³

In FH II, up to

81%

of HeFH patients achieved their LDL-C goal with **PRALUENT[®]** at 24 weeks³



PRALUENT[®] (alirocumab) has a favourable safety profile.^{1,2,5}

Selected common adverse effects for both doses (general allergic reactions, injection site reactions*) are **comparable with control group** in clinical trials.^{1,2,5}

2 DOSES

TO CHOOSE FROM FOR YOUR PATIENT'S NEEDS



With a simple dosing regimen, **ONCE every 2 weeks^{1,2}**

Choose PRALUENT[®] for LDL Control

ABBREVIATIONS: LDL-C, low-density lipoprotein cholesterol; HEFH, Heterozygous familial hypercholesterolemia; FH, familial hypercholesterolemia

*Including erythema/redness, itching, swelling, pain/tenderness

STUDY DESIGN: ODYSSEY OUTCOMES was a randomised, double-blind, placebo-controlled phase 3 study. Patients with a recent MI or unstable angina, and on high-intensity statin (40 or 80 mg atorvastatin or 20 or 40 mg rosuvastatin, or maximally tolerated dose of one of these agents) +/- other lipid-lowering therapy but not at predefined target LDL-C were enrolled.³

THERAPEUTIC INDICATIONS: Primary Hyperlipidemia Praluent is indicated as an adjunct to diet and maximally tolerated statin therapy for the treatment of adults with heterozygous familial hypercholesterolemia or clinical atherosclerotic cardiovascular disease, who require additional lowering of LDL-C. Limitations of Use The effect of Praluent on cardiovascular morbidity and mortality has not yet been determined.

DOSAGES: The recommended starting dose of Praluent is 75 mg once every 2 weeks administered subcutaneously, since the majority of patients achieve sufficient LDL-C reduction with this dosage. An alternative starting dosage for patients who prefer less frequent dosing is 300 mg once every 4 weeks (monthly).

REFERENCES: 1. PRALUENT[®] (alirocumab) Prescribing Information Malaysia. Jan 2020. 2. PRALUENT[®] (alirocumab) Prescribing Information Singapore. Feb 2020 3. Kastelein JJP, et al. Eur Heart J. 2015;36:2996-3003. 4. Mach F, et al. Eur Heart J. 2020;41(1):111-188. 5. Schwartz GG, Steg PG, Szarek M, et al. N Engl J Med. 2018;379(22):2097-2107.

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Not relevant

Very relevant

For the full prescribing information, please scan the QR Code or visit the link provided



<https://surl.sanofi.com/praluentmy>



<https://surl.sanofi.com/praluentsg>

Full prescribing information available on request from:
Sanofi-Aventis (Malaysia) Sdn Bhd (334110-P),
Unit TB-18-1, Level 18, Tower B, Plaza 33, No. 1
Jalan Kemajuan, Seksyen 13, 46200 Petaling
Jaya, Selangor, Darul Ehsan, Malaysia.
Tel: 03 7651 0800, Fax: 03 7651 0805.

Full prescribing information available on request from:
Sanofi-Aventis Singapore Pte Ltd,
38 Beach Road #18-11, South Beach Tower,
Singapore 189767.
Tel: +65 6226 3836, Fax: +65 6535 5836.

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