

## Effects of the Cholesteryl Ester Transfer Protein Inhibitor Dalcetrapib in Patients with Recent Acute Coronary Syndrome

- **Background:** High levels of HDL cholesterol (HDL-C) have been shown to be associated with lower risk of coronary heart disease (CHD) events. However, reducing risk and improving outcomes by raising HDL-C levels after a coronary event is unknown.
- Methods: In this double-blind, placebocontrolled trial, 15,871 acute coronary syndrome (ACS) patients over age 45 were randomly assigned to 600 mg dalcetrapib or placebo after a placebo run-in period of 4 to 12 weeks. Patients in 935 sites in 27 countries were treated and observed for a period of 36 months. Primary endpoints included:
  - CHD death
  - non-fatal MI
  - stroke
  - -hospitalization for unstable angina
  - resuscitated cardiac arrest

Hazard Ratio of Primary Endpoints at 3 years 1.6 1.4 P=0.401.2 P=0.16 1 P=0.52P=0.80 0.8 P=0.54P=0.66 0.6 0.4 0.2 0 Composite CHD Death Non-fatal MI Unstable Resuscitated Stroke Cardiac Angina Arrest

• **Conclusions:** No significant reduction in risk of major CV events was observed with the use of dalcetrapib in patients with ACS.

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