

# ***Will Future Therapies Help to Further Lower LDL Cholesterol?***

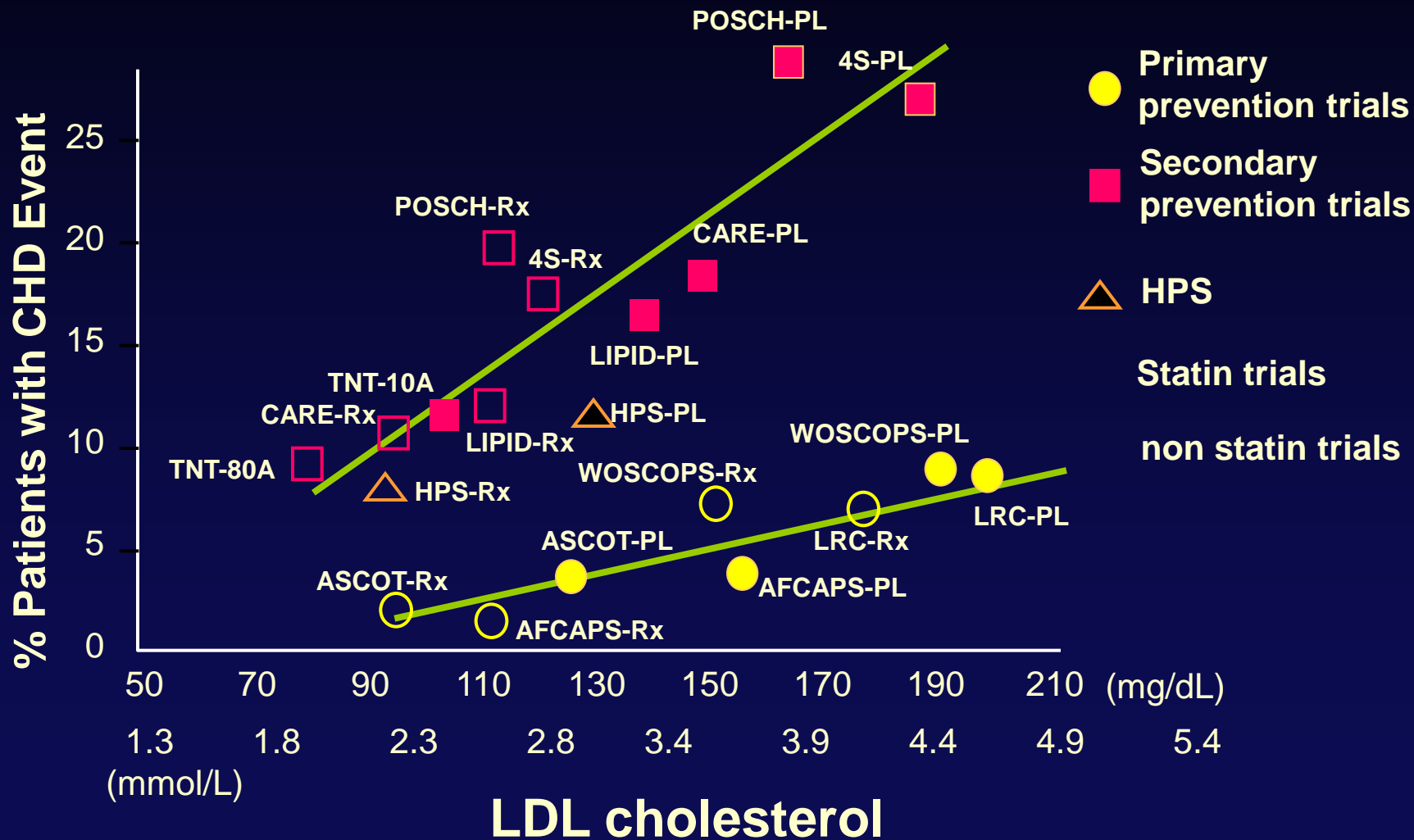
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John J.P. Kastelein, MD PhD

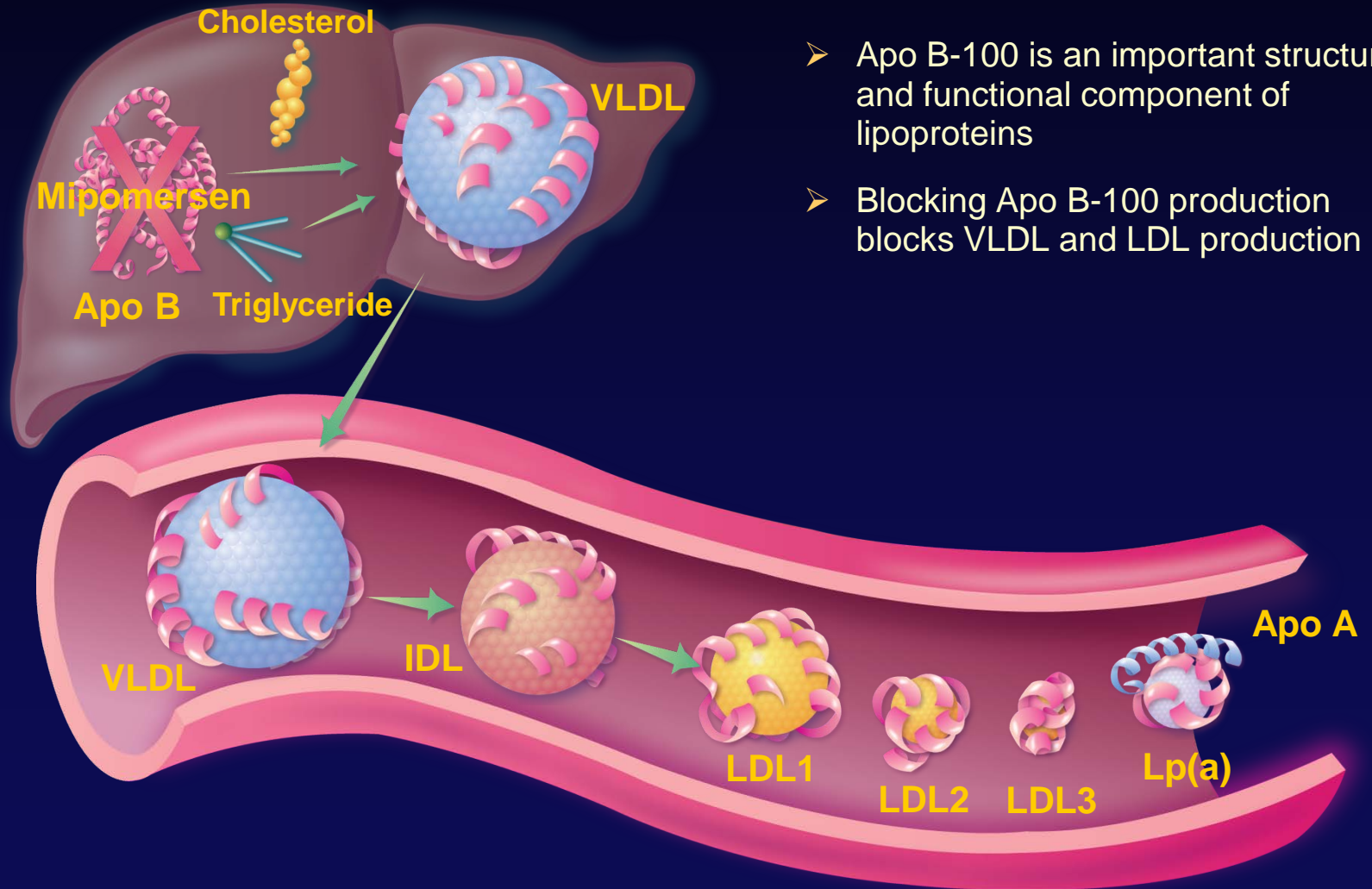
Academic Medical Center / University of Amsterdam

The Netherlands

# Clear Cardiovascular Benefits of Intensive Lipid-Lowering Therapy

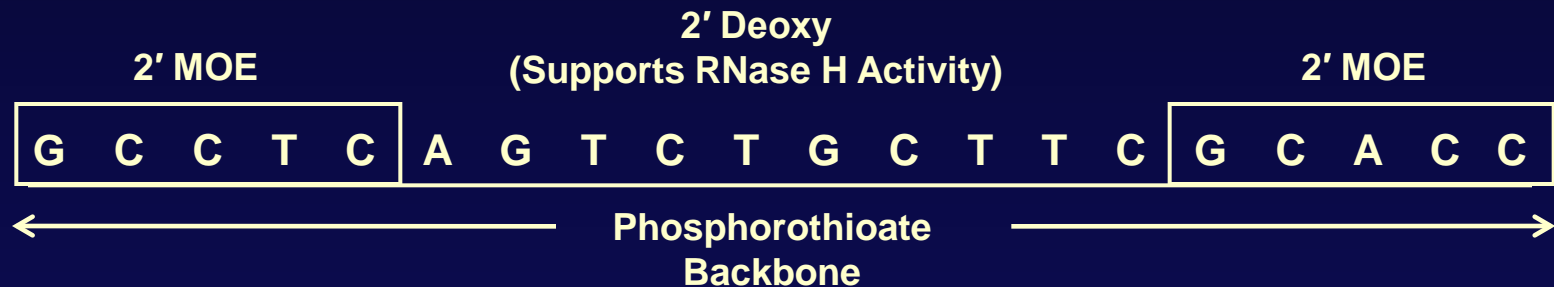


# Mipomersen: Apo B-100 as a Target



# Overview of Mipomersen

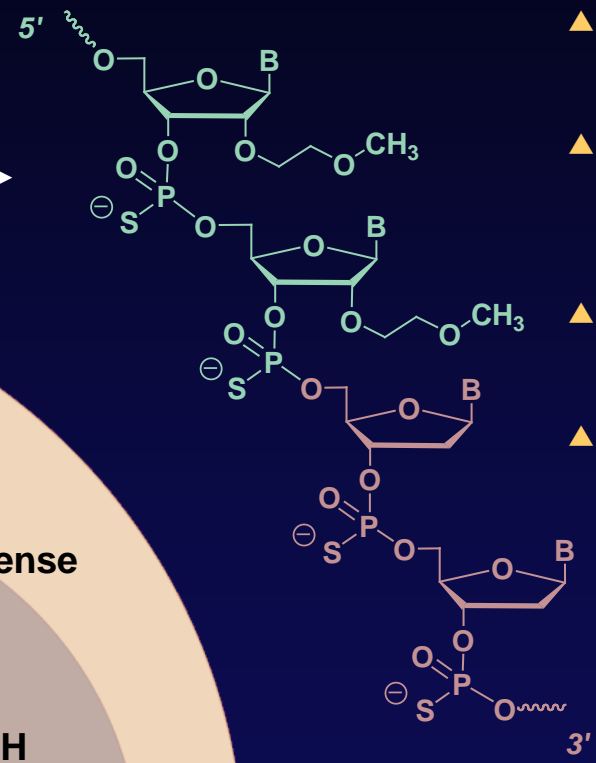
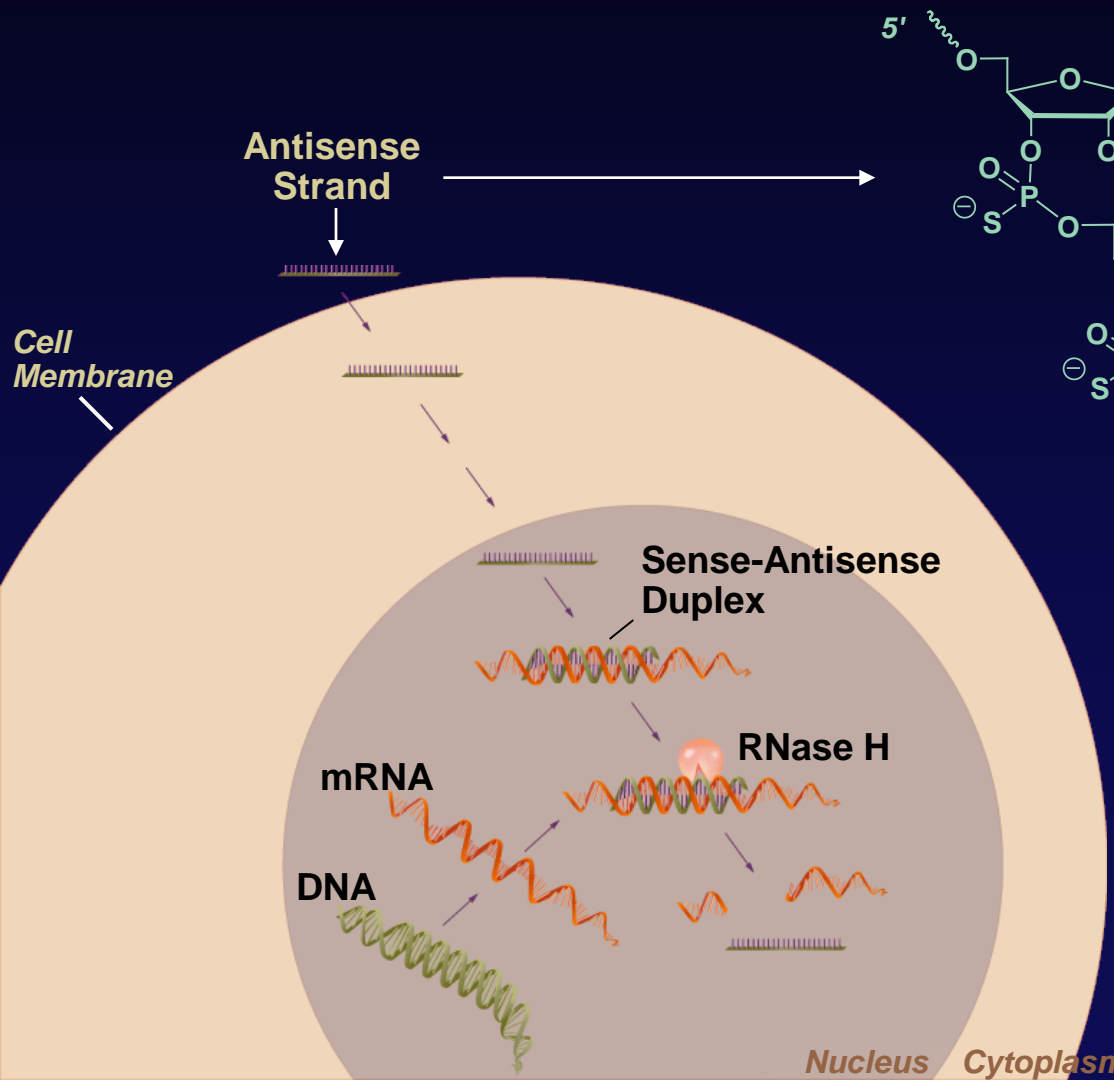
- A 20-mer phosphorothioate antisense oligonucleotide that is complementary in sequence to a segment of the human Apo B mRNA



# Antisense: A Novel Approach to Drug Discovery by Inhibition of Translation of a Specific Targeted Protein

RNase H Dependent Mechanism of Action

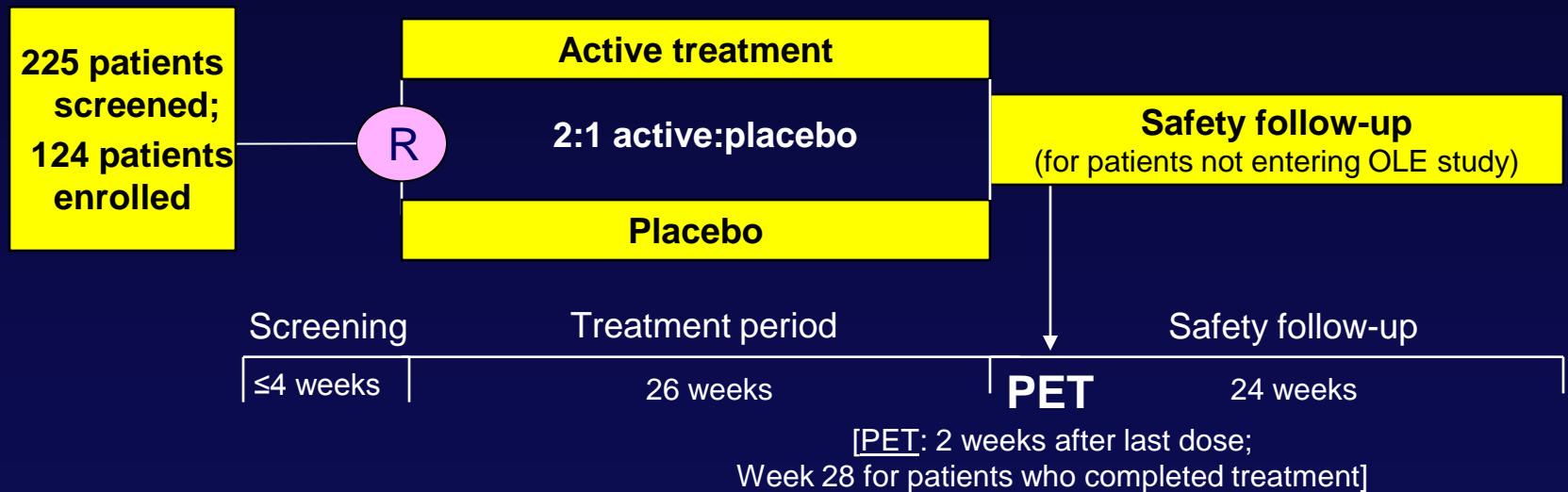
2<sup>nd</sup> Generation Antisense Drugs



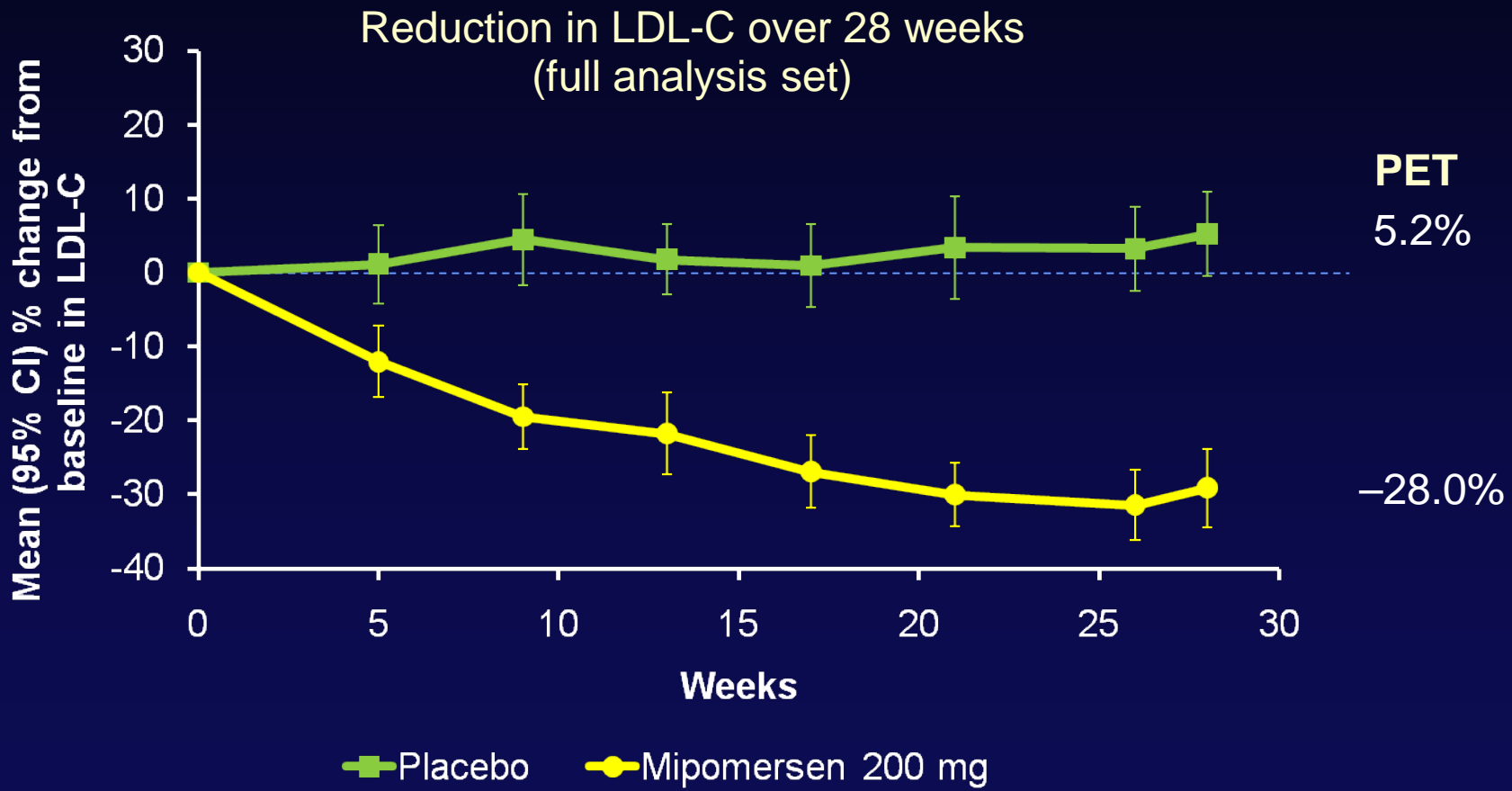
- ▲ ~20X more potent
- ▲ 1X/week to 1X/quarter dosing
- ▲ Better tolerated
- ▲ Lower cost of therapy

# Heterozygous Familial Hypercholesterolemia Study Design

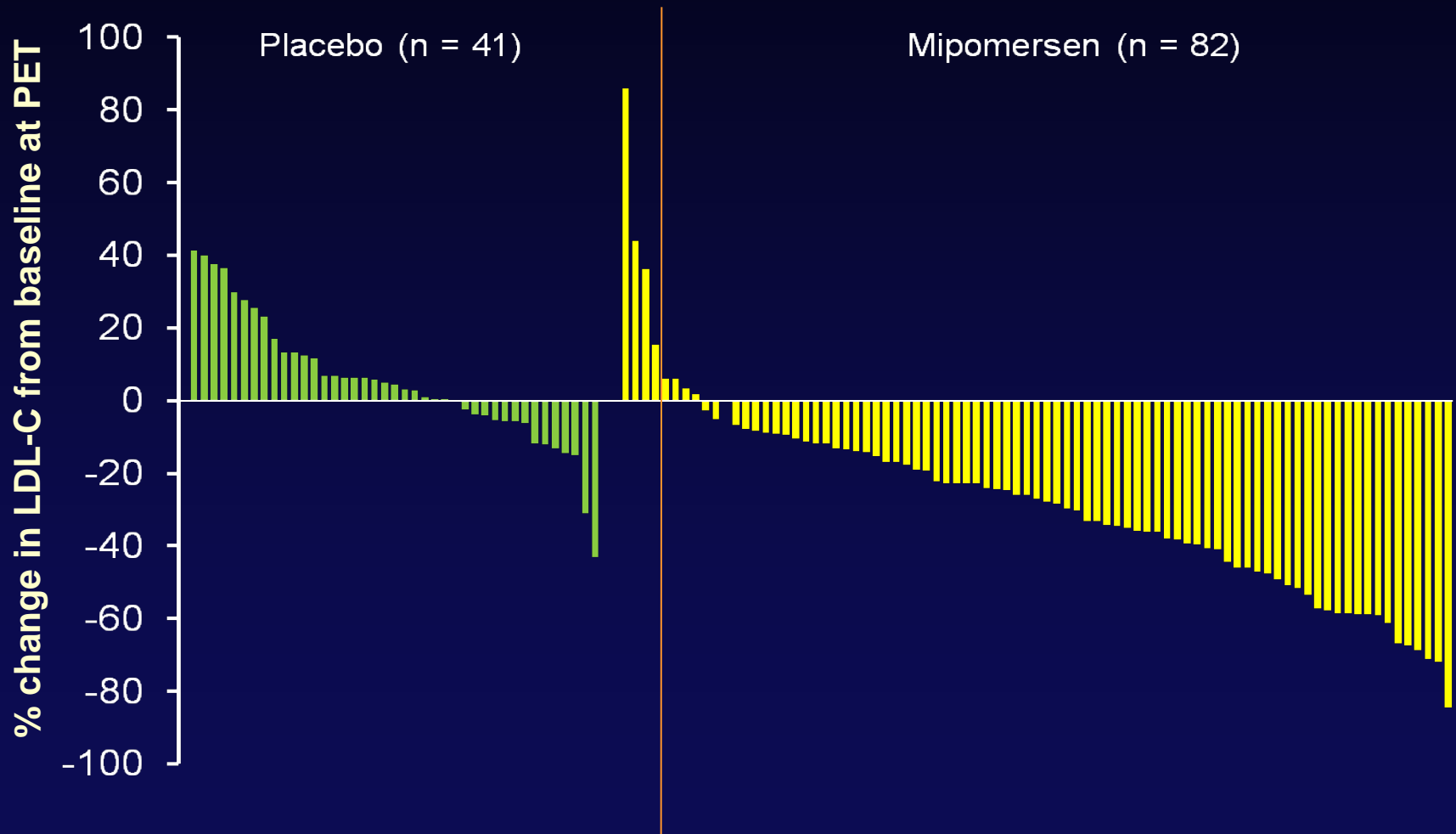
- Patients were randomized 2:1 to receive weekly subcutaneous injections of mipomersen 200 mg or placebo for 26 weeks



# Mipomersen Significantly Reduced LDL-C



# Distribution of LDL-C % Change From Baseline



PET, primary efficacy time point, 2 weeks after final dose.

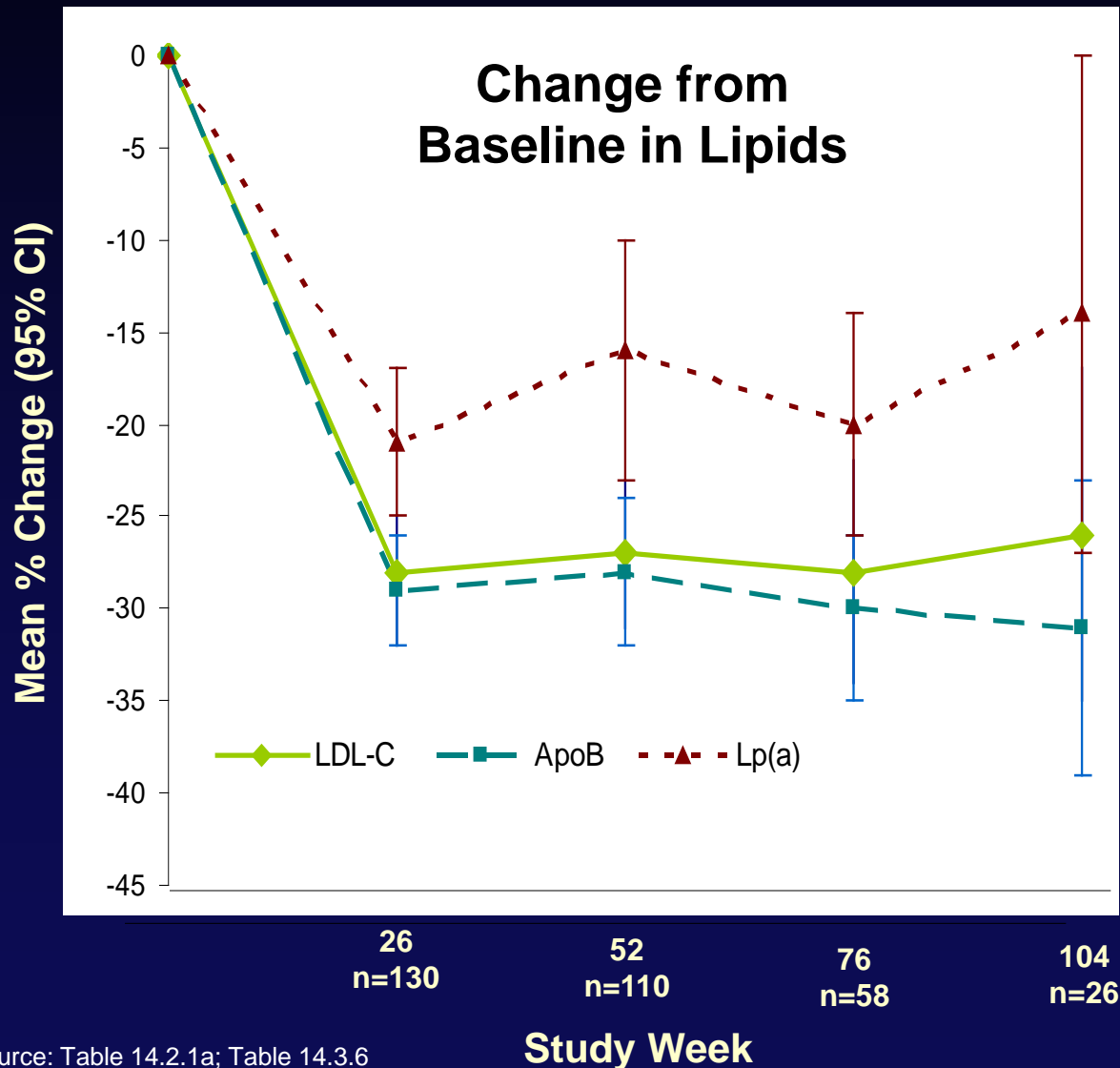


# *Long-term effects of Mipomersen in Extension Study Interim Data Analysis – March 2011*

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- 141 patients were enrolled in the open label extension study
  - From three Phase 3 studies (HoFH, HeFH and Severe HeFH)
- 17 patients completed the treatment
- 69 patients discontinued treatment
- 55 patients are currently continuing treatment

# Long-term effects of Mipomersen in Extension Study Interim Data Analysis – March 2011



**Percent Change from Baseline in Liver Fat**

Week	n	Median (IQR)
26	60	5 (1, 17)
52	30	12 (2, 22)
76	37	6 (2, 13)
104	22	5 (3, 14)

**Safety profile remains consistent with all phase 3 studies**

\*Dallas Heart Study General Population: 5.6% liver fat median

# *Interim Summary Conclusions*

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- Continued robust lipid lowering activity with long-term treatment
  - All atherogenic lipids remained reduced with continued treatment including apoB, LDL-C, Lp(a), Tg, and non-HDL
  - No loss of activity observed over 2 years of treatment
- Preclinical observations of liver adaptation to reduced lipid transport apparent in long-term clinical experience
  - Liver fat, if increased, stabilized or decreased with continued dosing
  - Increases occurred in patients with fastest and greatest apoB/LDL-C changes