

Familial Hypercholesterolaemia

Is it all about statins?

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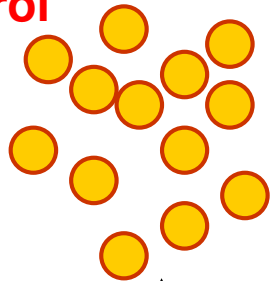
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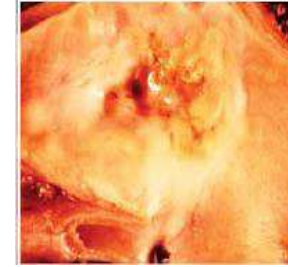
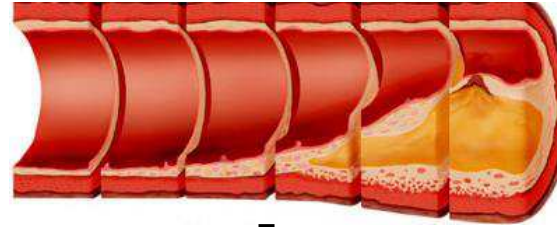
ACRA, 8th August 2017



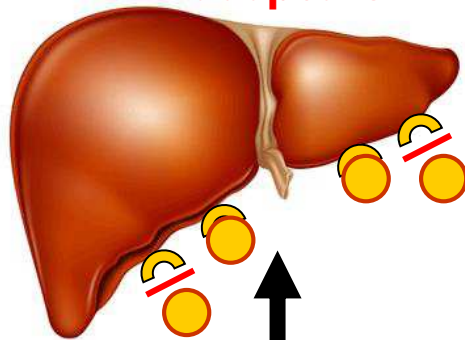
Elevated LDL cholesterol



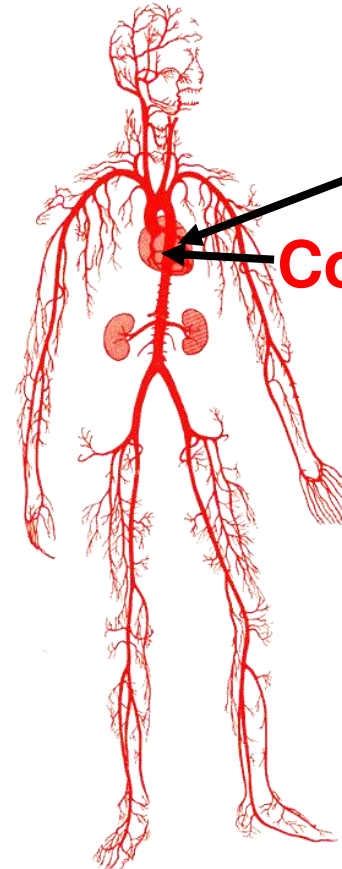
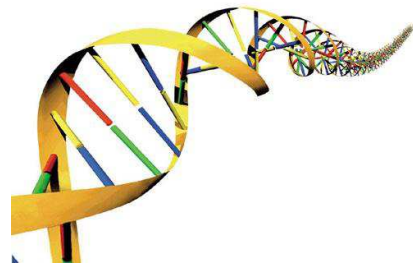
Atherosclerosis



Liver with only **50% functional LDL receptors**

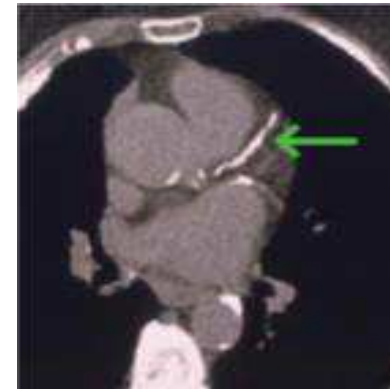


Mutations in LDL receptor, apolipoprotein B or PCSK9

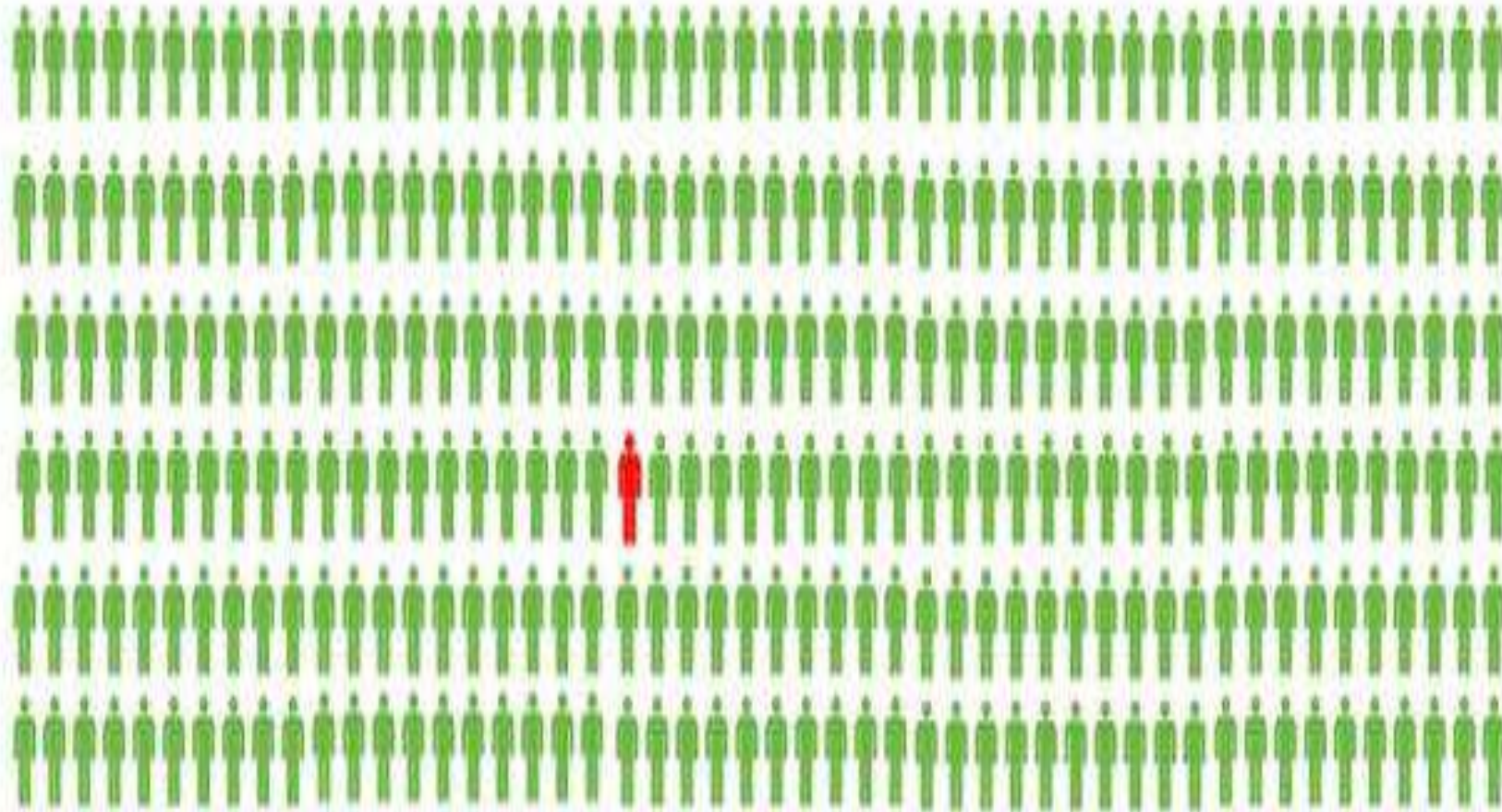


Myocardial infarction

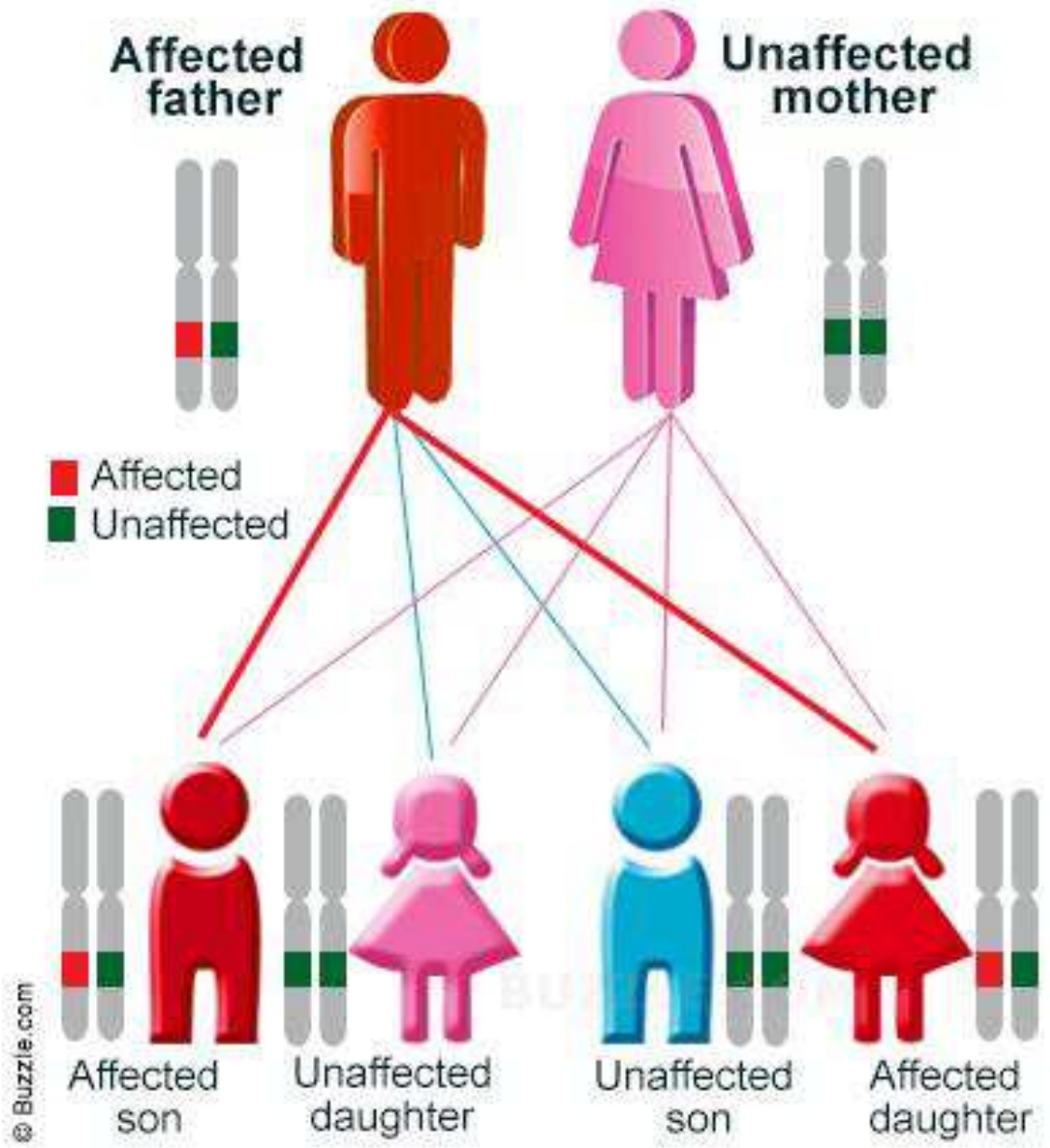
Coronary heart disease



At least 1 in 300 people have FH



*De Ferrante Circ 2016, Benn EHJ 2016, Wald NEJM 2016, Do Nature 2015,
Futema Athero 2017, Abul-Husn Science 2016, Khera J Am Coll Cardiol 2016,
Watts Int J Cardiol 2015, Shi Int J Cardiol 2014*



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Typical Features of FH

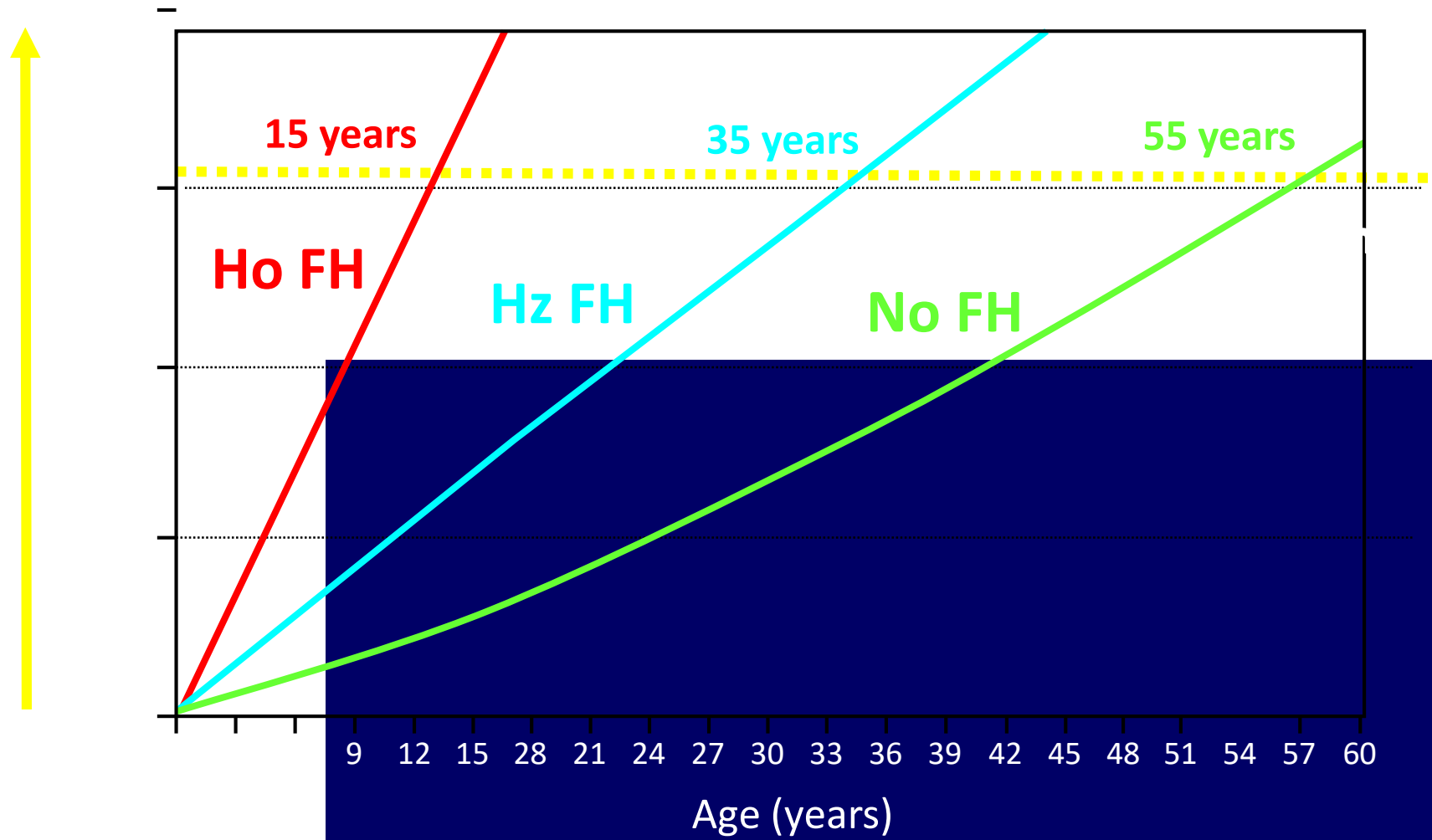
Heterozygous FH

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-
-
-

Homozygous FH

-
-
-
-

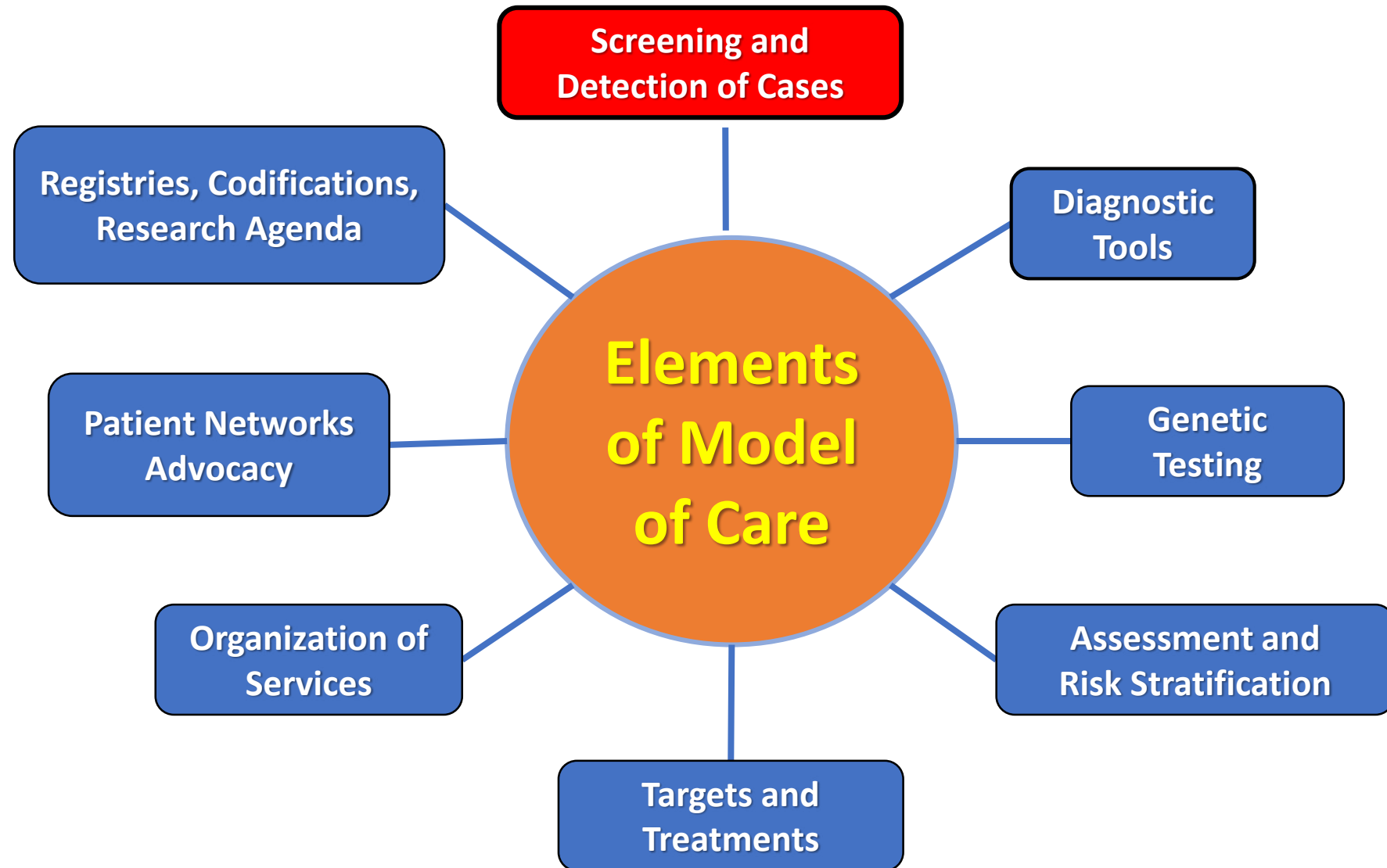
LDL-Cholesterol Life-Years and CAD in FH



Several Gaps in Care



Anatomy of Care for FH



Why Screen for FH ?

- **Serious consequences from youth**
- **Absent signs and symptoms in young**
- **Good tests**
- **Good therapy**
- **Cost-effective**
- **Responsibility**



Screening: Where, Who, How ?

- **Coronary Care**
- **Primary Care**
- **Laboratory Medicine**
- **Cascade Screening**



Diagnosis

FH



high LDL



family history
of CVD/high chol



physical signs



high FH
score



FH Criteria		Score
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Family history

First-degree relative with known premature coronary and/or vascular disease (men aged <55 years, women aged <60 years) OR with known LDL-cholesterol above the 95 th percentile for age and gender	1
First-degree relative with tendinous xanthomata and/or arcus cornealis OR Children aged <18 years with LDL-cholesterol above the 95 th percentile for age and gender	2

Clinical history

Patients with premature coronary artery disease (men aged <55 years, women aged <60 years)	2
Patients with premature cerebral or peripheral vascular disease (men aged <55 years, women aged <60 years)	1

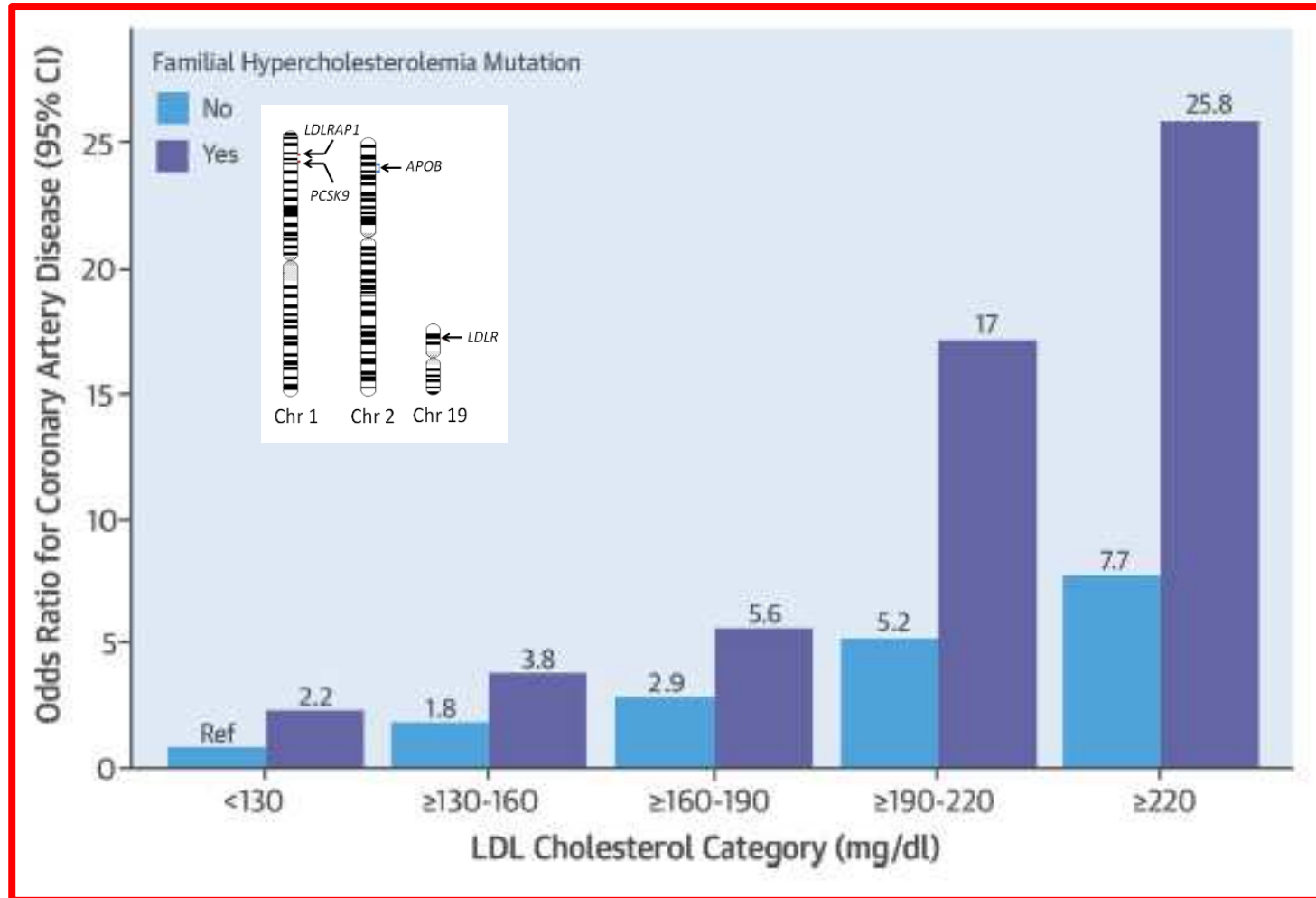
Blood Test

LDL-cholesterol (mmol/L)	LDL-C	Score
	LDL-C ≥8.5	8
	LDL-C 6.5–8.4	5
	LDL-C 5.0–6.4	3
	LDL-C 4.0–4.9	1

FH	Total score
Definite	>8
Probable	6-8
Possible	3-5
Unlikely	<3

Do you need to do
genetic testing ?

Value of Sequencing FH Genes in Patients with very High Cholesterol



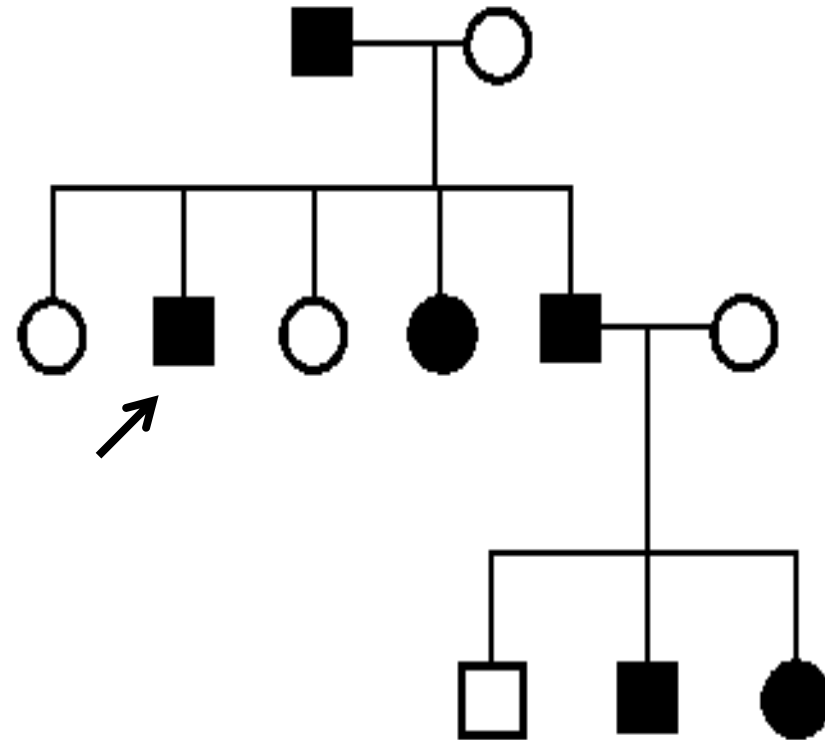
Khera et al J Am Coll Cardiol 2016; 67: 2578-90

Cascade screening is about families; you start with identifying the index case.



Family Cascade Screening

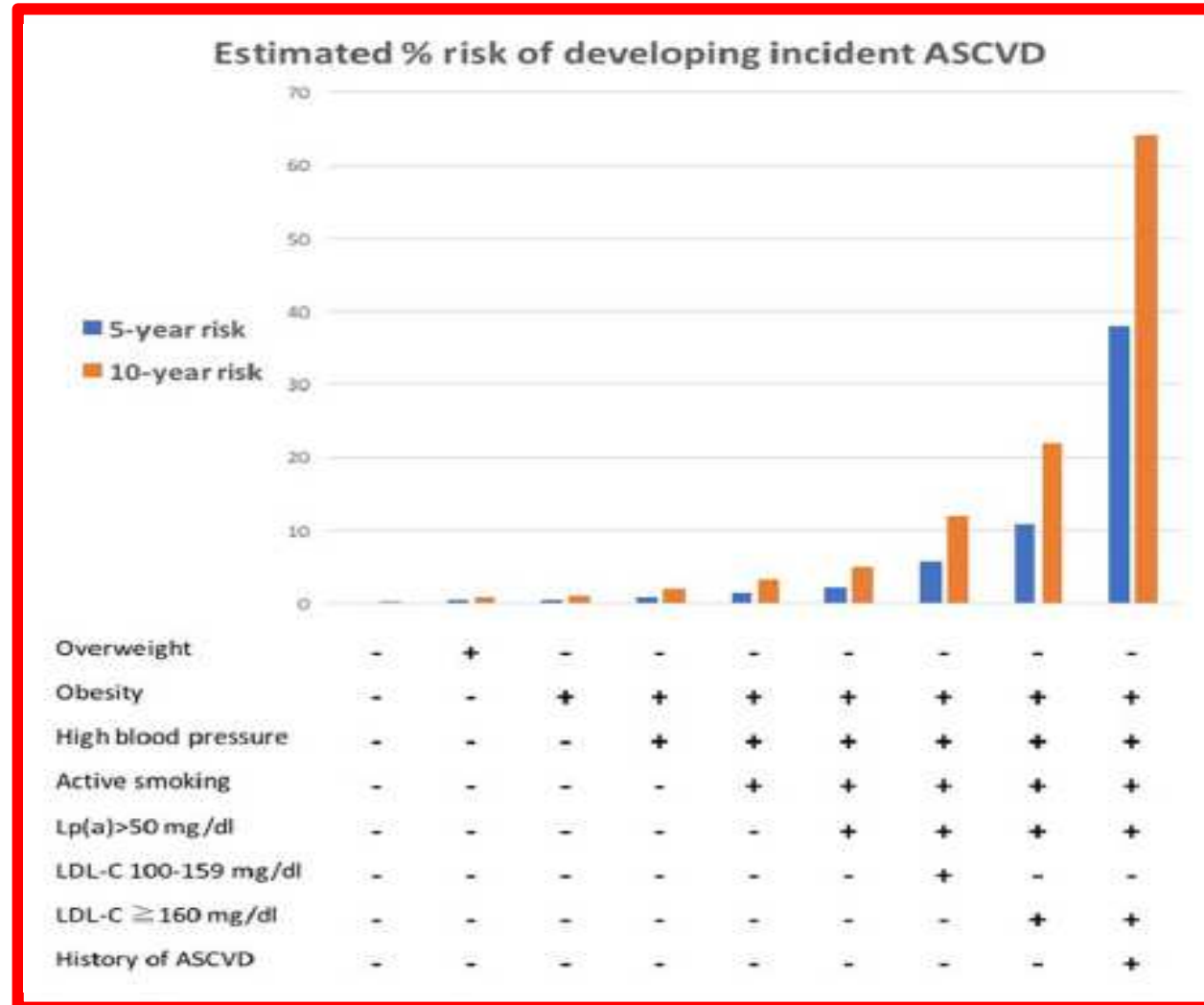
Relative	Prevalence
1st degree	50%
2nd degree	25%
3rd degree	12.5%
General Population	0.2 % or 1 in 500



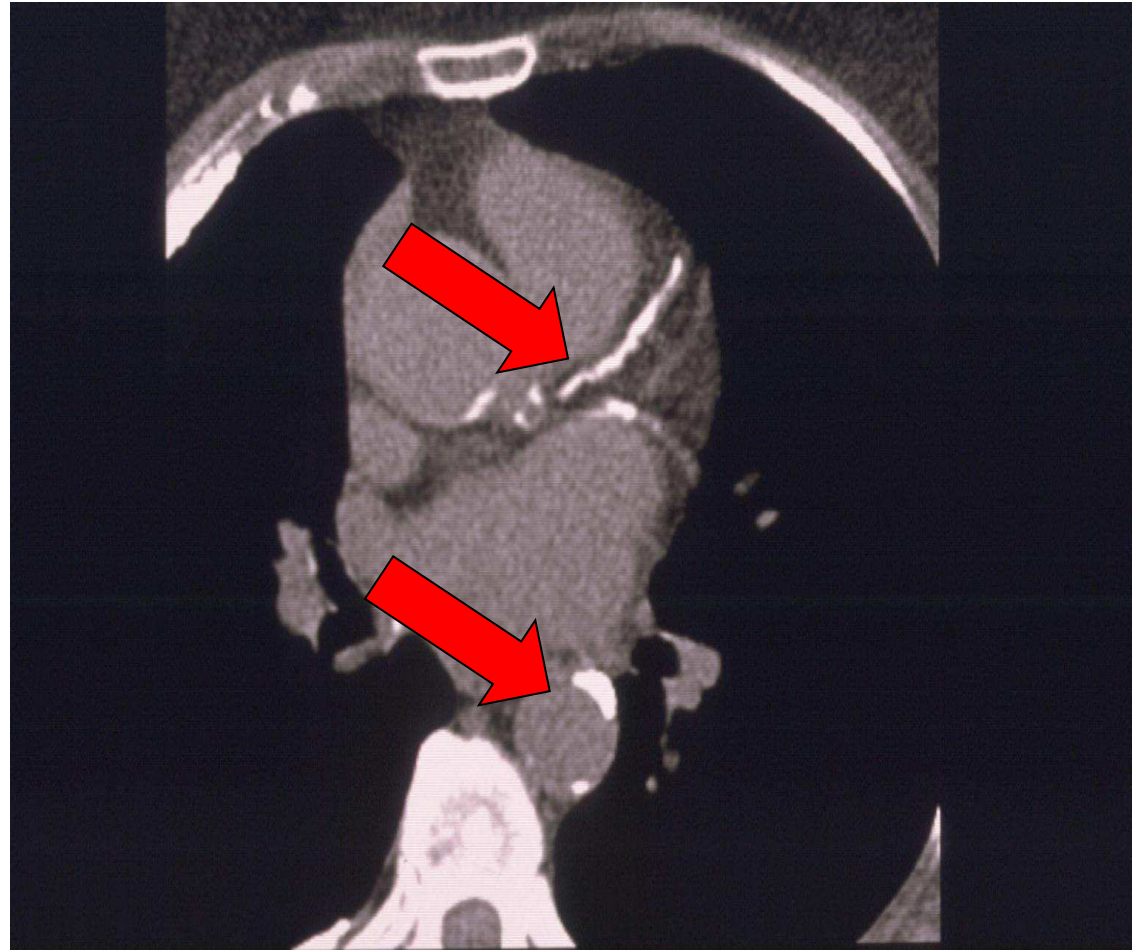
Screening principle
1 FH patient → >4 new FH

Predicting CVD Events in FH

The SAFEHEART Registry



Coronary Artery Calcium in FH



3 Principles for LDL lowering in FH



Treatment Options

Heart healthy diet

Established Drugs

Niacin

New Drugs:

ApoB ASO, MTPI

Radical Therapies:

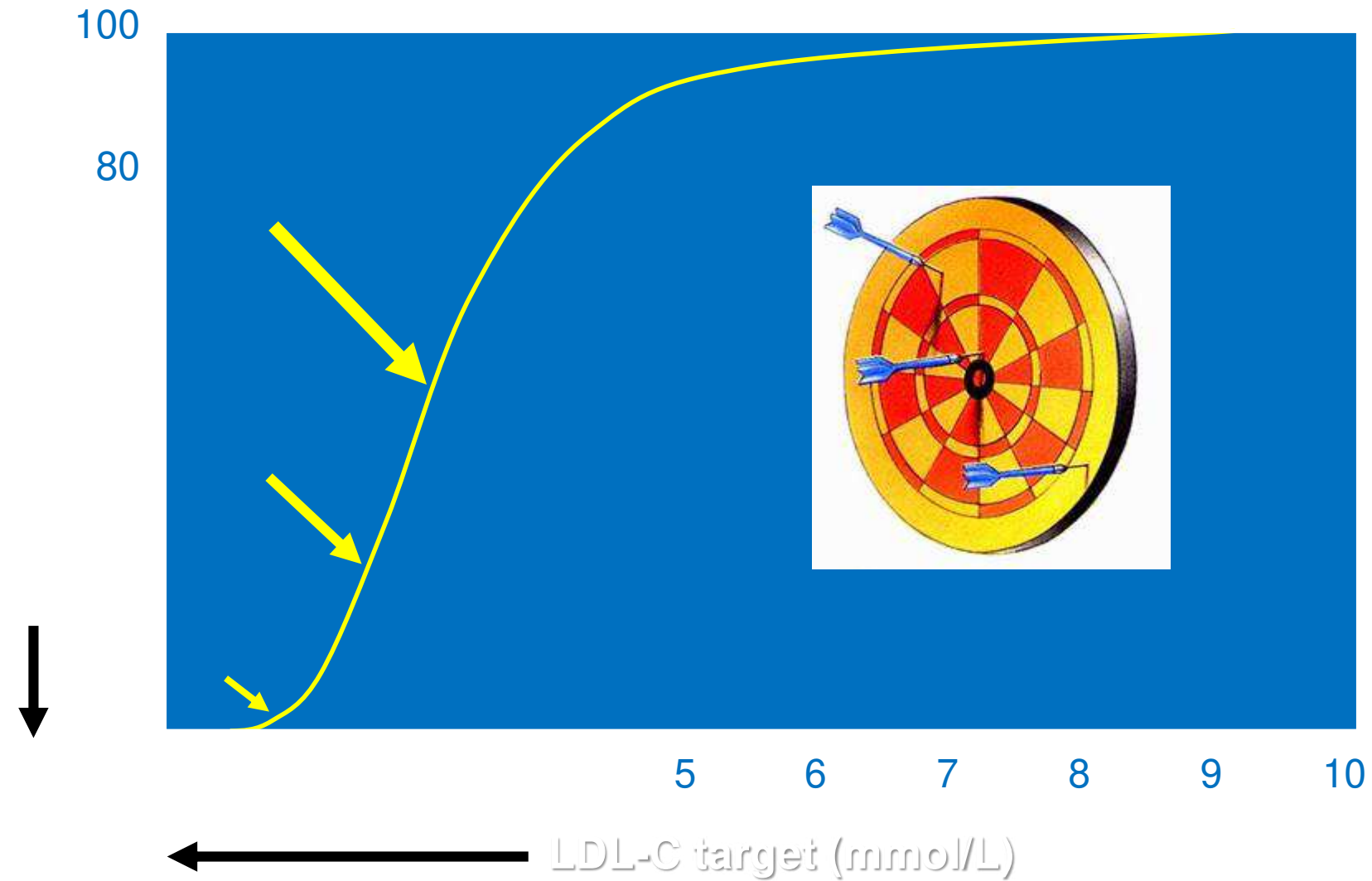
Liver Transplant

Management of Adult FH

- Lifestyle modifications; address all risk factors
- At least 50% reduction in plasma LDL cholesterol and then target >>
 - LDL cholesterol < **2.5** mmol/L (No CVD or other risk factors)
 - LDL cholesterol < **1.8** mmol/L (CVD or other risk factors)



Proportion of FH patients who reach LDL-C targets on therapy

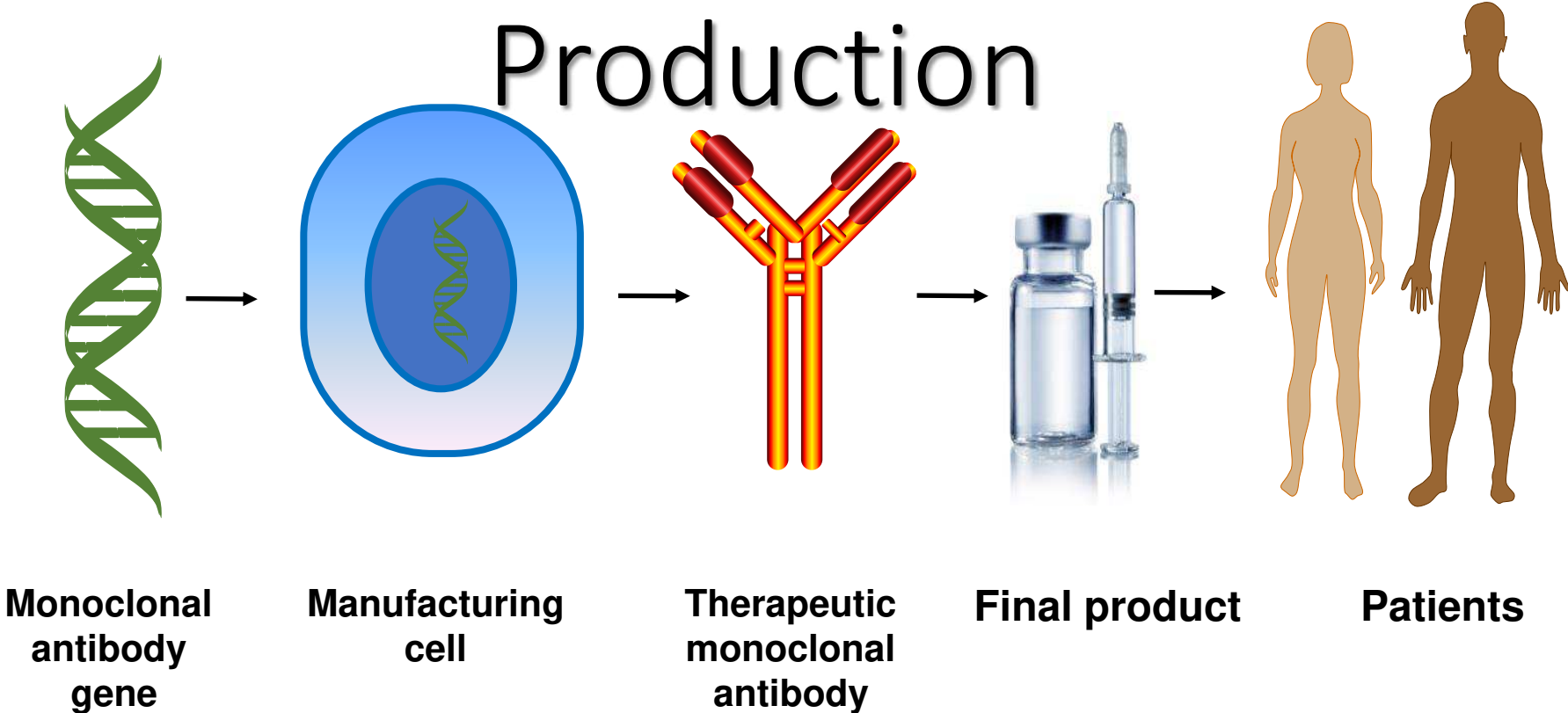


New LDL Lowering Therapies

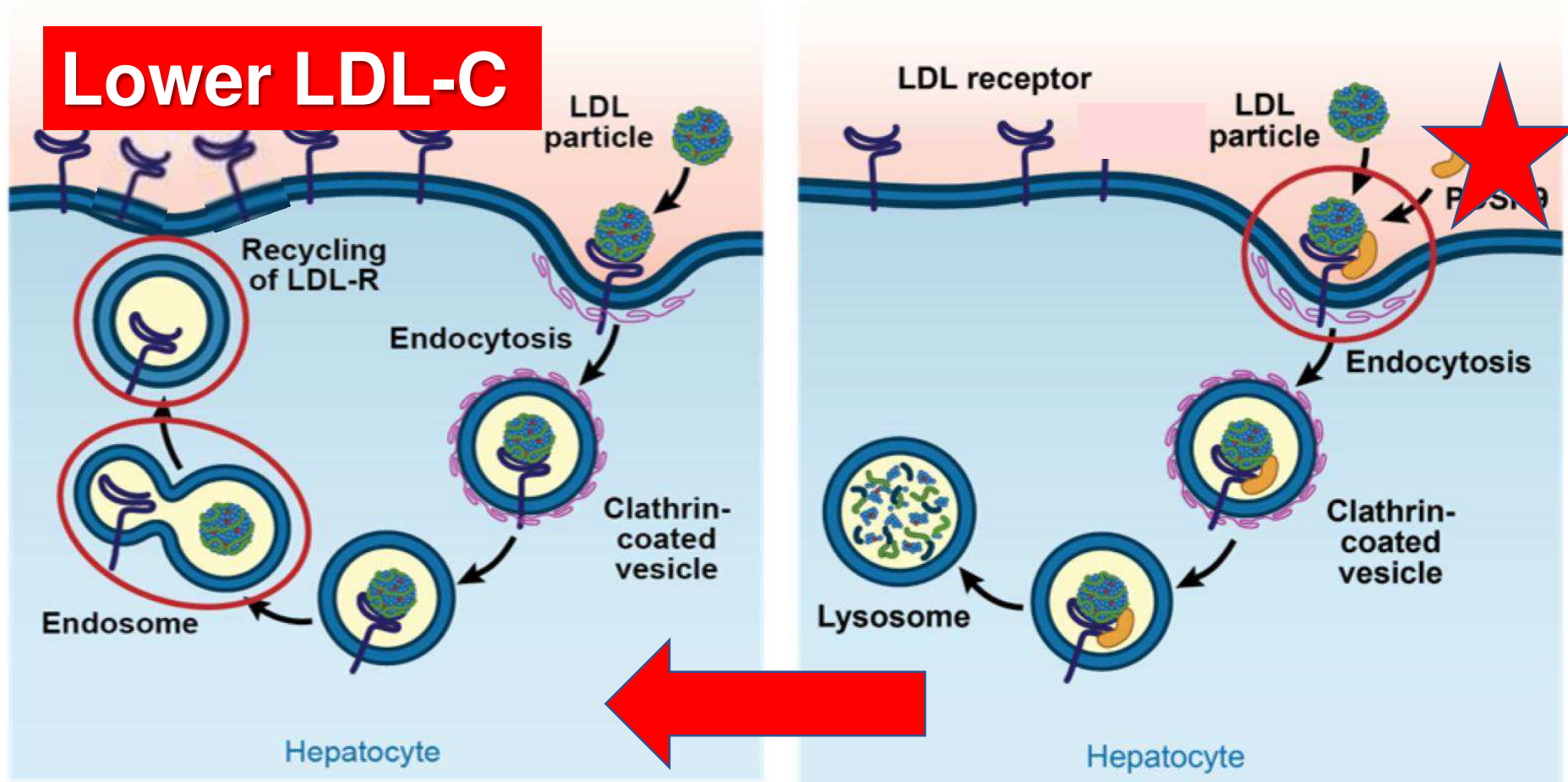


➤ PCSK-9 Inhibitors

Fully Human Monoclonal Antibody Production



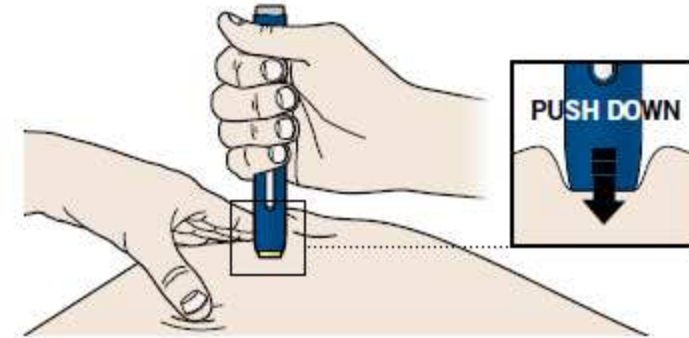
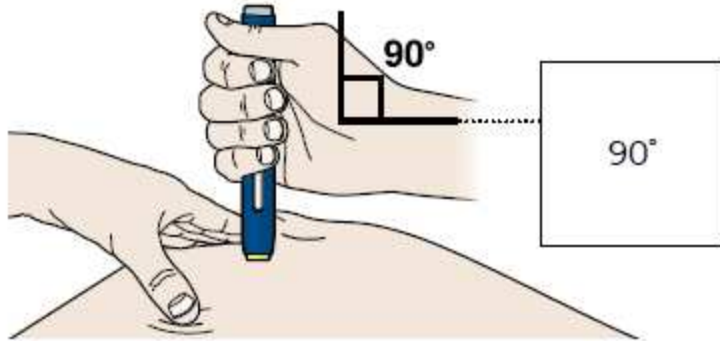
PCSK9 Inhibition Using Monoclonal Antibodies



LDL Degradation and Recycling of LDL-R

PCSK9-Mediated Degradation of LDL-R

PCSK9 mAb SC injection Q2W

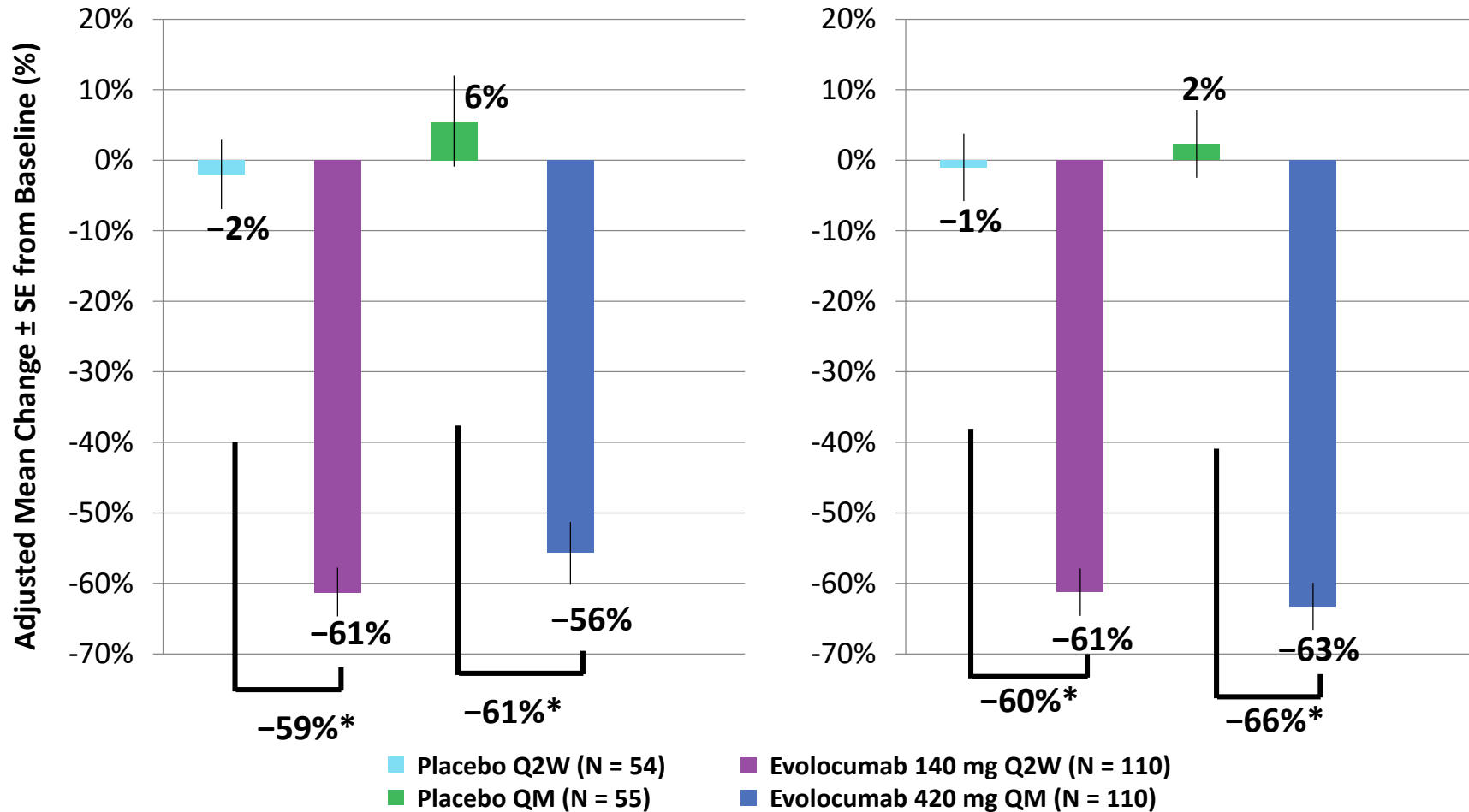


RUTHERFORD-2

Mean % change in LDL-C from baseline in Heterozygous FH

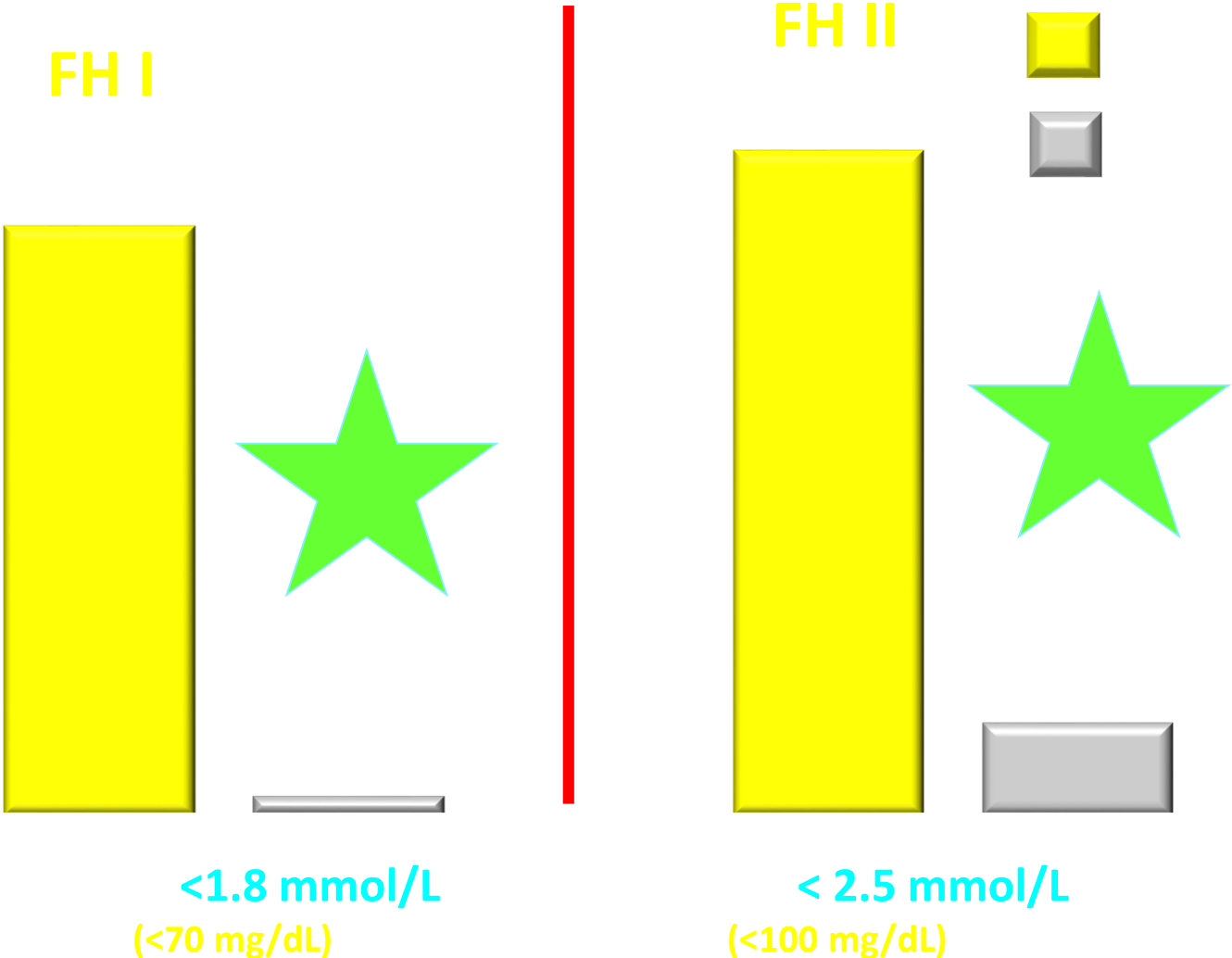
Week 12

Weeks 10 and 12

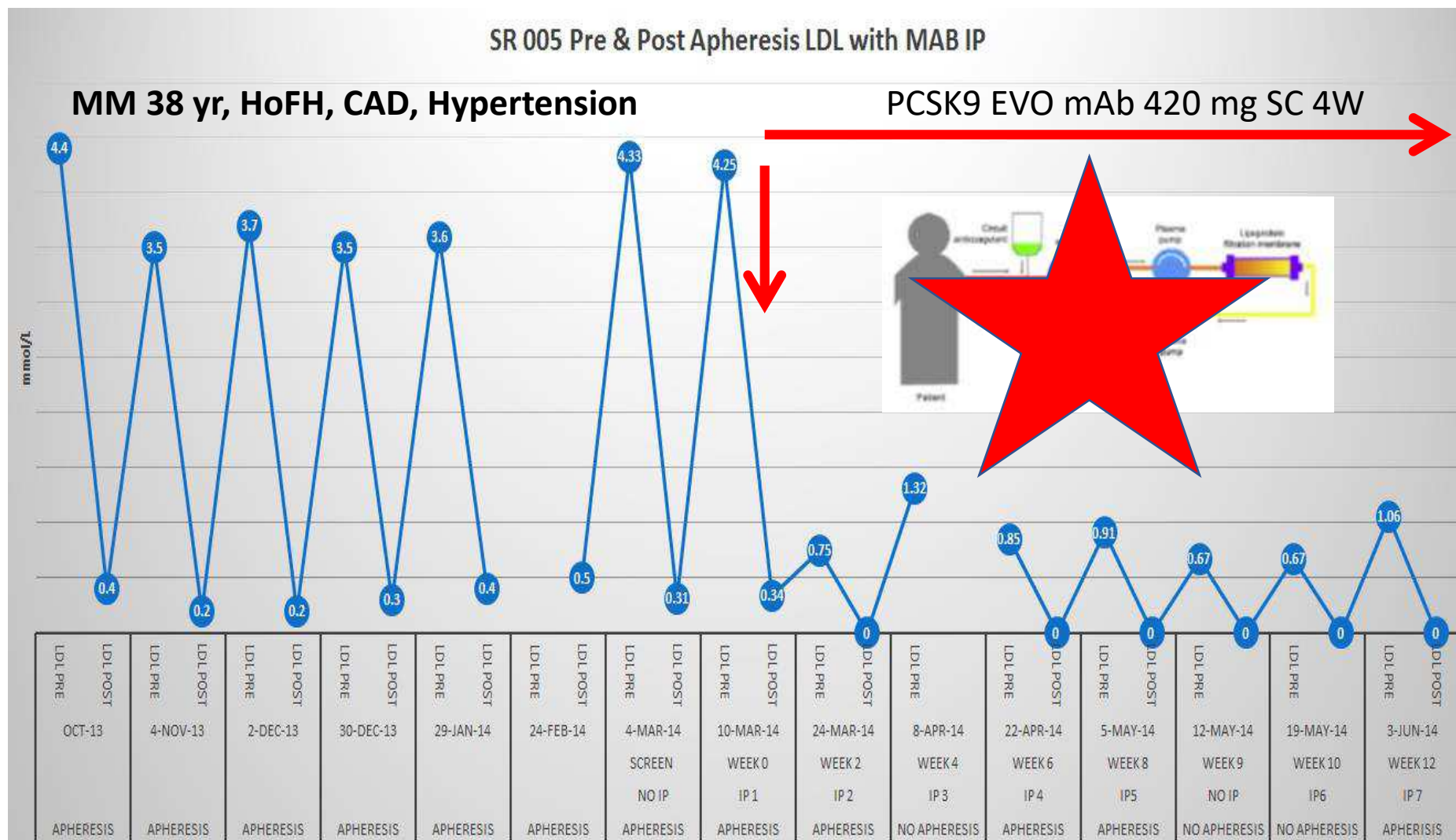


*P<0.0001 evolocumab treatment difference vs placebo
Raal FJ, et al. Lancet 2014; doi.org/10.1016/S0140-6736(14)61399-4.

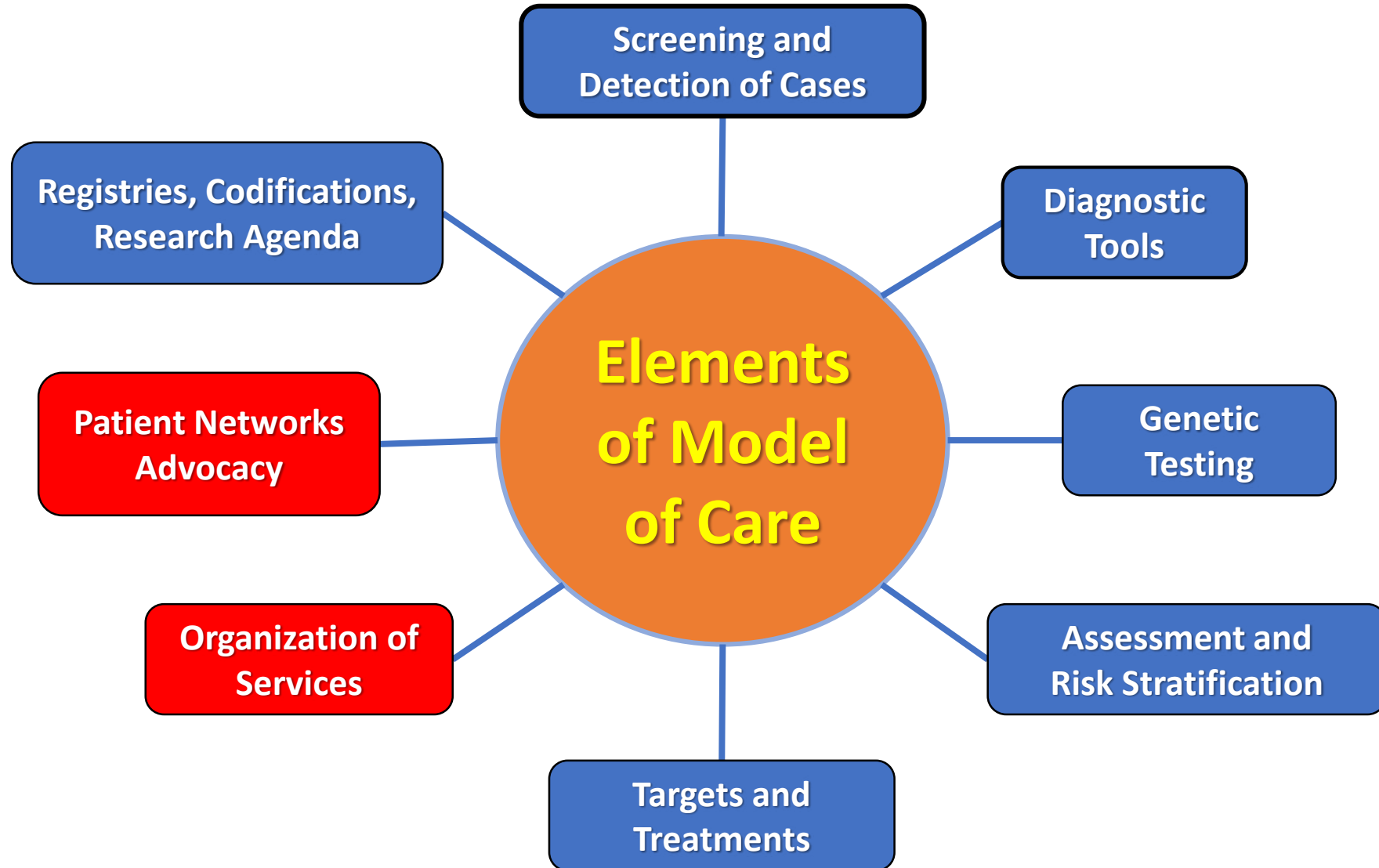
Most heFH Patients Receiving Alirocumab on Background Statin ± Other LLT Achieved LDL-C Goals



Effect of PCSK9 mAb on LDL-C while on Apheresis



Anatomy of Care



Organization of Care

- ~~• Design model of care in context~~
- Multidisciplinary services, integrated with primary care:

Cardiology

Paediatric

Genetics

Imaging

Transfusion Medicine

Nursing

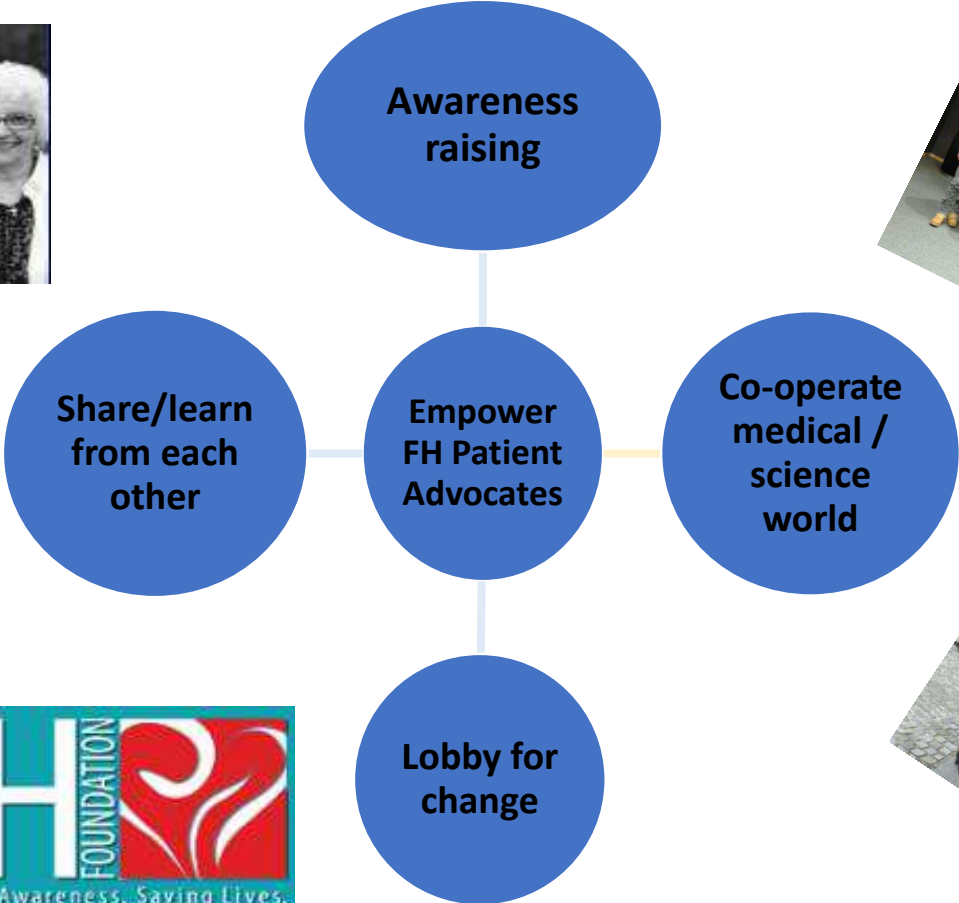
Dietetics

Psychology

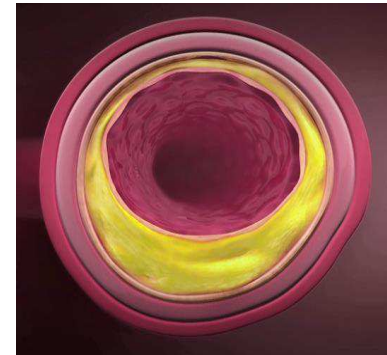
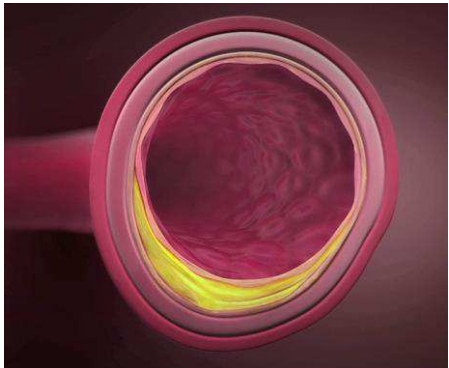
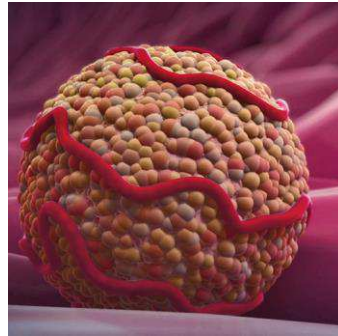
Pharmacy

Pathology

Patient Support Groups and Networks



FH is the most potent hidden risk factor for premature CAD in families



7 Take Home Messages about FH

High cholesterol > 7 mmol/L

Premature CAD, LDL receptor defect

Prevalence at least 1:300

Dominant genetics: *'goes down the line'*

Screen and diagnose **EARLY**

Treat **EARLY** to **LOW** LDL-C target

PCSK9 inhibition gets to target



Who was this Person ?

Dequker et al *Medical Archaeology* 2004

