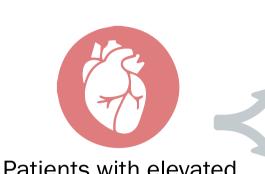
REDUCE-IT Total Events: Effects of Icosapent Ethyl on Total Ischemic Events



Objective: Pre-specified analyses determined the extent to which icosapent ethyl reduced total ischemic events.







Patients with elevated triglycerides, CVD and on statin therapy





8,179 patients with CVD or with diabetes plus at least one CV risk factor on statin therapy and elevated triglyceride levels (135-499 mg/dl) were followed for a median of 4.9 years.

1,606 (55.2%)

followed by

1,303 (44.8%)



first primary endpoint events

subsequent primary endpoint event



Icosapent ethyl



VS



Placebo group

61 /1000 patient years

Reduction in primary endpoint events

CV death, nonfatal MI or stroke, revascularization or unstable angina RR 0.70, 95% CI 0.62-0.78, P<0.0001

/1000 patient years

32 /1000 patient years Reduction in each component of the primary composite endpoint, as well as the total key secondary endpoint RR 0.72, 95% Cl 0.63-0.82, P<0.0001

44 /1000 patient years

Among statin-treated patients with elevated triglycerides and CVD or diabetes, multiple statistical models demonstrate that icosapent ethyl substantially reduces the burden of first, subsequent, and total ischemic events.