2019

REDUCE-IT USA

Results From the 3,146 Patients Randomized in the United States

AMERICAN COLLEGE of CARDIOLOGY

Multicenter, randomized, double-blind, placebo-controlled clinical trial

Objective: To assess the degree of benefit of icosapent ethyl for cardiovascular risk reduction in the USA.

3,146 patients

Inclusion criteria: Patients with CVD or with diabetes and other risk factors, on statin therapy and elevated triglyceride levels (135-499 mg/dl).

Icosapent ethyl (n=1,548)	VS	Placebo (n=1,598)

PRIMARY OUTCOME

Icosapent ethyl	Outcome	Placebo
18.2	CV death, non-fatal MI or stroke, revascularization or unstable angina HR 0.69; 95% CI 0.59-0.80; P<0.001	24.7

SECONDARY OUTCOME

Icosapent ethyl	Outcome	Placebo
12.1	CV death, non-fatal MI, or non-fatal stroke % HR 0.69; 95% CI 0.57-0.83; P<0.001	16.6
7.2	All-cause mortality % HR 0.70; 95% CI 0.55-0.90; P=0.004 USA vs Non-USA, $P_{interaction}$=0.02	9.8

Conclusion: The prespecified subgroup analysis of the USA cohort of the REDUCE-IT trial demonstrated particularly robust reductions in the primary and key secondary endpoints including the individual endpoints such as all-cause mortality.

Bhatt DL, Miller M, Brinton EA, et al., on behalf of the REDUCE-IT Investigators. REDUCE-IT USA: Results From the 3,146 Patients Randomized in the United States. *Circulation* 2019;Nov 11:[Epub ahead of print].