



AMERICAN
COLLEGE of
CARDIOLOGY®

ATTRIBUTE-CM

Acoramidis Improves Clinical Outcomes in
Transthyretin Amyloid Cardiomyopathy (CM)

Prospective, Randomized, Double-Blind, Placebo-Controlled Trial

OBJECTIVE: To assess all-cause mortality and cardiovascular hospitalization in patients with ATTR-CM taking acoramidis vs. placebo using the Kaplan-Meier time-to-first event analysis.

632

PATIENTS



ACORAMIDIS (N=421)

INCLUSION CRITERIA: Wild-type or variant ATTR-CM and NYHA I-III symptoms

VS.



PLACEBO (N=211)

PRIMARY ENDPOINT

AT 30 MONTHS, TREATMENT WITH ACORAMIDIS WAS ASSOCIATED WITH A 14.6% ABSOLUTE RISK REDUCTION AND 36% RELATIVE RISK REDUCTION IN THE COMPOSITE ENDPOINT OF ALL-CAUSE MORTALITY AND CARDIOVASCULAR HOSPITALIZATION.

CONCLUSION

In patients with ATTR-CM, the time-to-first event (all-cause mortality or cardiovascular hospitalization) was reduced with acoramidis.

Judge DP, Cappelli F, Fontana M, et al. Acoramidis Improves Clinical Outcomes in Transthyretin Amyloid Cardiomyopathy. Presented at AHA 2023.

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