

STUDY REPORT SUMMARY

ASTRAZENECA PHARMACEUTICALS

FINISHED PRODUCT: Crestor
ACTIVE INGREDIENT: Rosuvastatin

Study No: NIS-CFR-CRE-2007/2

Management of high cardiovascular risk patients treated with statins in France
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Developmental phase:

Study Completion Date: July 2009

Date of Report: February 2010

OBJECTIVES:

The objective of this study was to describe utilisation of newly prescribed statins in French primary care.

METHODS:

From February 2008 to July 2009, 272 French general practitioners (GPs) included 2122 patients treated with a new statin, out of which 670 were treated with rosuvastatin. For each patient, demographic characteristics, comorbidities, concomitant drug and biological characteristics were documented.

RESULTS:

The mean patient age was 62.6 and there were slightly more men (54.6%) than women. The main cardiovascular risk factors (RF) were: hypertension (50.3%), diabetes (22.7%), family history of premature cardiovascular disease (22.5%) and smoking (17.4%). Nearly 3 GPs out of 4 declared they provide life-style and nutritional advice before initiating the treatment ; only 44.5% gave diet booklets. GPs are the main first-time statins prescribers (88.9%) in France. This percentage

was higher for rosuvastatin than for the others statins (93.2% vs. 86.8% ; $p<0.001$). Two thirds of the patients received a statin for the first time following the diagnosis of dyslipidemia. One third was switched to a new statin. The reasons for the switch were related to lack of effectiveness of previous treatment and to intolerance to previous statins (mainly muscle weakness or pain). Before initiating treatment, biochemical analysis was performed in 91% of patients. And 3 to 6 months after statin initiation, lipid levels, transaminase levels and CPK were measured in 67%, 40% and 28% of all patients, respectively. At that time, 57.1% of patients reached the LDL-cholesterol according to risk categories distribution. The proportion of patients reaching the target was higher in the rosuvastatin group than in the others statins group (62.3% vs. 54.6% ; $p=0.016$). Overall, the achievement of LDL-cholesterol targets was lower in patients with higher CV risk (Table).

Table : Achievement of therapeutic LDL targets

	High Risk N = 520	≥ 3 RF N = 55	2 RF N = 204	1 RF N = 213	0 RF N = 118	Total N = 1110
LDL-cholesterol target	<1g/l	<1.3 g/l	<1.6 g/l	<1.9 g/l	<2.2 g/l	
Proportion achieving LDL goals	33.3%	47.3%	69.6%	85.0%	94.9%	57.1%