Health and Social Care Board

Interface Pharmacist Network Specialist Medicines

Alirocumab

(for primary hypercholesterolaemia or mixed dyslipidaemia)

GP Information Sheet

Introduction

Alirocumab belongs to the class of drugs called PCSK9 inhibitors. It is a monoclonal antibody which binds to PCSK9 in the liver and prevents PCSK9-mediated degradation of the low-density lipoprotein receptor (LDL-R). It therefore reduces LDL-cholesterol, and has also been shown to reduce cardiovascular events.

Alirocumab is **accepted** for use for treating primary hypercholesterolaemia or mixed dyslipidaemia if LDL-C goals are persistently above targets despite maximal tolerated lipid-lowering therapy (i.e. either the maximum dose has been reached or further titration is limited by intolerance).

NICE Technology Appraisal 393 contains full details of the criteria a patient must fulfil in order to qualify for alirocumab treatment.

Dosage and administration

Alirocumab is given by subcutaneous injection.
The usual recommended dose is either 75 mg or 150 mg every 2 weeks.
The usual starting dose is 75 mg administered subcutaneously once every 2 weeks. Patients requiring larger LDL-C reduction may be started on 150 mg once every 2 weeks, or 300 mg once every 4 weeks.
Alirocumab is initiated by secondary care who will also arrange training to support self-administration by the patient.
It is injected subcutaneously into the abdomen, thigh or upper arm.

Available as

Alirocumab solution for injection in pre-filled syringe or pre-filled pen (should be stored between 2 - 8 °C).
Alirocumab should be prescribed with a 1L sharps bin.

Monitoring requirements

There is no monitoring required for this agent itself.
Monitoring of lipid profiles and the underlying condition will depend on the severity of the hyperlipidaemia.
Patients attending specialist lipid clinics: ongoing monitoring of lipids usually remains with the specialist clinic
Cardiology patients: once stable, ongoing monitoring of lipids along with other cardiovascular risk factors should follow the usual primary care secondary prevention guidelines.

Adverse effects, precautions and contraindications

Commonly reported side effects are: nasopharyngitis, upper respiratory tract signs and symptoms, and pruritis. Hypersensitivity vasculitis has been reported rarely.

Common drug interactions

- No significant interactions with other medicines are listed.

Communication

For any queries relating to this patient's treatment with alirocumab, please contact the initiating specialist.

This information is not inclusive of all prescribing information and potential adverse effects.
Please refer to full prescribing data in the SPC or the BNF
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