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Ezetimibe- A new insight for anti-hyperlipidemic therapy. Lessons from a case report "Ezetimibe completely replaced ldl-apheresis for the treatment of familial hypercholesterolemia and coronary artery disease after CABG"

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The effectiveness of anti-hyperlidemia therapy for preventing cardiovascular events and inducing regression of coronary artery stenosis has been demonstrated. Multicenter trials have indicated that hydroxymethylglutaryl coenzyme A reductase inhibitors (so-called statins) aid in preventing coronary artery disease (CAD). Furthermore, one statin has been reported to be more effective in reducing the occurence of cardiovascular events than percutaneous transluminal coronary revascularisation therapy. However, despite the fact that statins are currently the mainstay of dyslipidemia care, their efficacy in preventing a cardiovascular event still has limitations. This is because the ability of the statin to inhibit cholesterol production might exert adverse effects by restoring cholesterol levels via activation of re-uptake of cholesterol derived from the small intestine. Ezetimibe has recently emerged as a new class of lipid-lowering medication, which acts via the inhibition of Niemann-Pick C1 Like 1, a protein localized in jejunal enterocytes. Combination therapy with ezetimibe and statins has been shown to be highly effective in the treatment of hypercholesterolemia. However, to date it has not been established whether ezetimibe combined with statin therapy has a much stronger effect than that of low density lipoprotein bound cholesterol (LDL)-apheresis, which is recognized as the most effective therapy for hyperlipidemia. I experienced a rare case in which ezetimibe appeared to play a central role, in place of LDL-apheresis, in a patient with familial hypercholesterolemia and CAD who had undergone coronary artery bypass grafting. This case is discussed here to increase our knowledge of ezetimibe and lipid care.

Biography

Ikuo Yokoyama graduated from Tohoku University School of Medicine and received MD and has completed his PhD from Graduate School of Medicine and Faculty of Medicine, The University of Tokyo and became Asistant Professor of Cardiovascular Medicine of the same institution at the age of 40 years and then became a Lecturer. He is permanent Research Fellow of the National Cardiovascular Research Center Research Institute and Associate Professor of International University of Health and Welfare. He has published 52 original papers in reputed journals.

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