

Leqvio – Resources – HCP

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LEQVIO®▼ (inclisiran) is indicated in adults with primary hypercholesterolaemia (heterozygous familial and non-familial) or mixed dyslipidaemia, as an adjunct to diet:¹

- in combination with a statin or statin with other lipid-lowering therapies in patients unable to reach LDL-C goals with the maximum tolerated dose of a statin, or
- alone or in combination with other lipid-lowering therapies in patients who are statin-intolerant, or for whom a statin is contraindicated.

The effect of LEQVIO® on cardiovascular morbidity and mortality has not yet been determined.¹

For full safety information, please refer to the LEQVIO® Summary of Product

LEQVIO® resources

Explore our growing repository of resources designed to provide useful information on LEQVIO® and other relevant topics for healthcare professionals treating eligible patients with ASCVD.

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LEQVIO® dosing and administration: 'how to' guide

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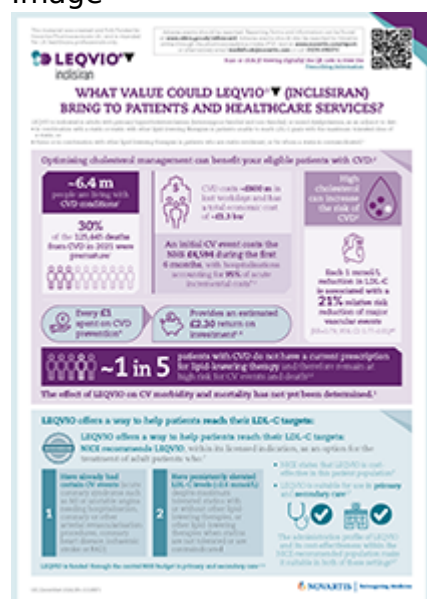


Guidelines for using LEQVIO® after statin for eligible patients

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What value could LEQVIO® bring to patients/healthcare services?


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ORION-10 &
ORION-11



indisiran

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Two Phase III Trials of LEQVIO® (inclisiran) in Patients with Elevated LDL Cholesterol

A SUMMARY OF KEY FINDINGS, INCLUDING RISKS, BENEFITS, AND LIMITATIONS OF LEQVIO

The Phase III ORION-10 and ORION-11 clinical trials were designed to assess the efficacy and safety profile of LEQVIO in adult patients with ASCVD and ASCVD risk equivalents, respectively, who had elevated LDL-C levels despite receiving a maximally tolerated statin with or without additional lipid-lowering therapy.

Key Findings:

- On top of a maximally tolerated statin, LEQVIO (400 mg) reduced LDL-C by 70% (ORION-10) and 75% (ORION-11) relative to placebo at Week 12, as compared with baseline, in ORION-10 and ORION-11, respectively.
- Combined, a dose-adjusted LDL-C reduction of 70% (ORION-10) and 75% (ORION-11) was observed between Week 12 and 24 relative to placebo in ORION-10 and ORION-11, respectively.
- ORION-10 had fewer cases of adverse events (AEs) than ORION-11, including placebo-related AEs.
- ORION-10 had fewer cases of adverse events (AEs) than ORION-11, including placebo-related AEs.
- ORION-10 had fewer cases of adverse events (AEs) than ORION-11, including placebo-related AEs.

LEQVIO is not used in adults with primary hyperparathyroidism or hyperparathyroidism-related hypercalcaemia, or in adults with a history of a stroke or stroke with other lipid-lowering therapies, or patients unable to take oral drugs with the maximum tolerated dose of a statin, or with or in combination with other lipid-lowering therapies in patients who are unable to tolerate, or for whom a statin is contraindicated.

Adverse Event Reporting

Adverse events (AEs) should be reported. Reporting can be done through the following link: <https://www.nps.gov/medwatch> and <https://www.medicines.gov.uk/medwatch>. For more information, please visit <https://www.nps.gov/medwatch> and <https://www.medicines.gov.uk/medwatch>.

Report an Adverse Event
To: 0800 135 060
Or: 020 7464 0000
Fax: 020 7464 0000



ORION-10 and ORION-11 clinical factsheet⁴

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SUPPORTING SHARED CARE WITH LEQVIO[®] ▼ (INCLISIRAN)

Discharging your patients eligible for LEQVIO from secondary to primary care

LEQVIO is indicated in adults with primary hypercholesterolaemia (heterozygous familial and non-familial) or mixed dyslipidaemia, as an adjunct to diet:

- In combination with a statin or statin with other lipid-lowering therapies in patients unable to reach LDL-C goals with the maximum tolerated dose of a statin, or
- Alone or in combination with other lipid-lowering therapies in patients who are statin-intolerant, or for whom a statin is contraindicated.¹

This material discusses:



How to **identify** patients who are eligible for LEQVIO



How to **effectively discharge** patients to primary care for ongoing LDL-C management

An example of a discharge letter can be found on Page 3.

Identifying patients

There are multiple opportunities to identify patients who are eligible for lipid optimisation with LEQVIO in the inpatient and outpatient setting in secondary care:



1. Hospitalisations

Patient has been admitted to the hospital due to a CV event* and is on the ward.

LDL-C not at target[†] despite a maximally tolerated statin.



2. Outpatient rehab

Patient was admitted to hospital following a CV event* and is being followed up during the rehab phase.

LDL-C not at target[†] despite a maximally tolerated statin.



3. Outpatient clinic

Patient is attending a routine outpatient appointment post discharge. They have previously had a CV event.*

LDL-C not at target[†] despite a maximally tolerated statin.

These illustrative scenarios are not an exhaustive list of where eligible patients can be found.

*Events including, but not limited to, myocardial infarction, acute ischaemic stroke, TIA;

[†]This may vary for individual patients. Please see below for NICE-recommended criteria for LEQVIO.

Adverse Events Reporting

Adverse events should be reported. Reporting forms and information can be found at www.mhra.gov.uk/yellowcard. Adverse events should also be reported to Novartis online through the pharmacovigilance intake (PVI) tool at www.novartis.com/report or alternatively email medinfo.uk@novartis.com or call 01276 698370.

Scan or click (if viewing digitally) the QR code to view the Prescribing Information



Supporting shared care with LEQVIO[®]

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Video

4 mins 38 secs

Guide to using LEQVIO®

Video - 03 Jan 2025

4 mins 38 secs

Guide to using LEQVIO®

[See more details](#)

Hide details



Video

2 mins 29 secs

LEQVIO® MOA video

Video - 18 Dec 2024

2 mins 29 secs

LEQVIO® MOA video

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Video

1 mins 21 secs

Elevated LDL-C: the importance of early intervention

Video - 19 Aug 2024

1 mins 21 secs

Elevated LDL-C: the importance of early intervention

[See more details](#)

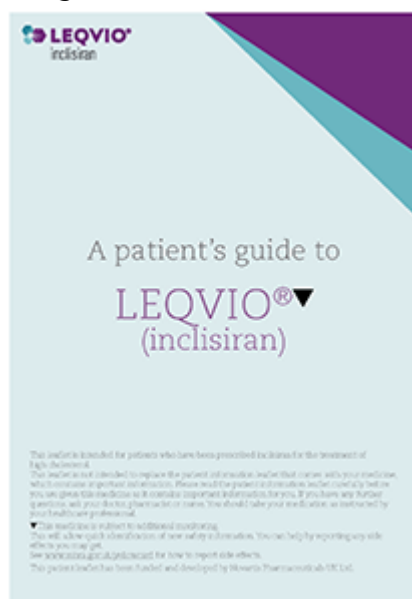
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Patient's guide to LEQVIO®

PDF

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Patient's guide to LEQVIO®

Please note that this material should only be shared with patients for whom the decision to prescribe LEQVIO® has already been made.

This downloadable PDF can be shared with your LEQVIO® patients to provide them with further information on their condition and useful information regarding taking LEQVIO®.

Please do not share this web page directly with patients; instead, please direct them to the patient portal.

Please get in touch with us to speak to one of our Novartis representative

[Contact us](#)

ASCVD, atherosclerotic cardiovascular disease; ESC, European Society of Cardiology; HCP, healthcare professional; LDL-C, low-density lipoprotein cholesterol; MOA, mechanism of action.

References

1. LEQVIO® Summary of Product Characteristics.
 2. Wright RS, et al. ORION-8: Long-term efficacy and safety of twice-yearly inclisiran in high cardiovascular risk patients. Presented at ESC Congress 2023, Amsterdam, 25-28 August 2023. Oral presentation.
 3. National Health Service. Summary of National Guidance for Lipid Management for Primary and Secondary Prevent of CVD. Available at: <https://www.england.nhs.uk/aac/wp-content/uploads/sites/50/2020/04/lipid-management-pathway-v7.pdf> [Accessed March 2025].
 4. Ray KK, et al. *N Engl J Med* 2020;382(16):1507-1519.
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UK | March 2025 | FA-11361470

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