

What does Amarin think about the JAMA and Cochrane omega-3 meta-analyses?

The science underlying omega-3s and cardiovascular care are complex. Analysis and clinical studies completed in recent years have established that, excluding LDL “bad” cholesterol, modifying lipid-levels alone is often not predictive of cardiovascular outcomes. The two cited references, both from 2018, provide evidence that omega-3 mixtures have repeatedly not been successful in demonstrating cardiovascular benefit. This has been true for omega-3 mixtures which are prescription drugs and for dietary supplements. The exception, as referenced in these studies, is pure EPA when stable and administered at an adequate dose. The REDUCE-IT study, of Vascepa, as published in NEJM in November 2018, demonstrates that Vascepa significantly lowered cardiovascular risk beyond statin therapy in the at-risk patients studied.¹ For more information on the REDUCE-IT study see <https://www.nejm.org/doi/full/10.1056/NEJMoa1812792>.

Further discussion of the JAMA and Cochrane analysis is provided above under the discussion of results from the ASCEND study.

¹ Bhatt DL, Steg PG, Miller M, et al. Cardiovascular Risk Reduction with Icosapent Ethyl in Hypertriglyceridemia. *N Engl J Med*. 2018.