AstraZeneca’s national survey to quantify the degree of undertreatment of hypercholesterolaemia in this country is ahead of schedule, according to the AstraZeneca clinical team driving the study. Known as CEPHEUS (Centralised pan-South African Survey on the treatment of hypercholesterolemia), the study recruited its first patient in mid-November 2009 and just five months later, on 23 April 2010, the final patient was enrolled. A week ahead of the projected timelines, the study has completed the recruitment phase of what is expected to be a landmark survey of 3 000 patients.

“We paid careful attention to the racial split of the patients recruited to ensure a more representative study sample to ensure demographic equity and results that reflect our population’s demographics. The upshot of this approach, coupled with the commitment of our clinical investigators, has culminated in recruitment figures that are far better than expected. The non-Caucasian to Caucasian (non-white to white) ratio of 1 624 to 1 393 is significant with few if any other such splits achieved in a cardiovascular clinical study like this,” says AstraZeneca Executive Medical Director, Prof Matt Haus.

Private and state patients were recruited for the CEPHEUS study drawn from approximately 70 sites around the country. The final CEPHEUS patient enrolment split as reported by the appointed pharmaceutical services company Quintiles, closed at: 515 black patients; 69 Asians; 489 coloureds; 548 Indians; 3 others and 1 393 whites.

The data management phase has already begun and with 98% of patients already entered into the database, the data cleaning process should be wrapped up at the beginning of June.

Participation criteria included that patients must be 18 years of age or older; of any gender or race; provide informed consent and comply with the survey procedures; and have been on any lipid lowering drug treatment for at least three months, with no dose change for a minimum of six weeks.

The first local study of this size and nature, Prof Haus says that CEPHEUS aims to determine if physicians observe national Lipid guidelines when making treatment choices for patients, while at the same time understanding what influences the physician’s decision making process in the ultimate treatment prescribed. The study will also attempt to understand patient perceptions of cardiovascular disease (CVD) and the importance they place on achieving their hyperlipidaemia treatment goals.

“Assessing self-reported compliance by a simple question on the frequency of skipping tablets, gives the physician valuable information on sub-optimally treated patients. Measures to increase compliance may have significant impact on reaching LDL-C targets,” adds Prof Haus.

Part of a larger global study, the results of the equivalent Pan-European study indicate that 40% of patients using lipid-lowering drugs were not on target for LDL-cholesterol. A major component for this under-treatment was the fact that most of the patients had never been titrated from their initial drug dosage. The important aspect of treatment is to start with the right drug and dose from the outset and this is as important as patient compliance, in achieving treatment goals and avoiding under-treatment. Many patients are on lipid lowering drug treatment but if they are not achieving target goals, the impact on health care costs are huge, placing an unnecessary burden on the system.

“The significance of the CEPHEUS study results should not be underestimated and if local stats are similar, the study results may be instrumental in helping revisit the treatment of hypercholesterolaemia and ultimately achieving more effective treatment of the disease and better patient compliance,” says AstraZeneca South Africa CEO, Dr Gunni Goolab. “As one of the world’s leading ethical pharmaceutical companies with a strong presence in the cardiovascular therapeutic area and representation in over 100 countries, we believe that with a global business comes a global responsibility. This study, and its concurrent Get to Goal patient education campaign, is yet another example of this, proving that AstraZeneca takes its responsibility to patient well-being and effective patient health care seriously.”

AstraZeneca’s leading position in CV medicine is based on over 40 years experience and it is committed to improving CV care around the world through its broad range of highly effective, first in class products targeted at this substantial area of medical need. The company’s commitment to improving CV care is demonstrated by an exciting research programme in this disease area. The company has a number of new agents in development in the areas of cholesterol lowering, and anti-thrombotic/anti-coagulant therapy. Other early-stage projects include compounds targeted at the treatment of cardiac arrhythmias, ischaemic heart disease and insulin resistance.

For further information on the management of heart disease visit www.yes2life.co.za or www.astrazeneca.co.za