

Abstract

Back ground

Cardiovascular risk is independently increased by plasma lipids abnormalities (low- density and high density lipoprotein -cholesterol and triglycerides). Most patients have more than one lipid abnormality. Combination therapy with lipid-modifying agents could offer an important therapeutic option for improving the overall lipid profile. Combinations have demonstrated to provide additive efficacy and significant reductions in coronary events.

Objective

This study was designed to evaluate the effect of ezetimibe, when used in combination with other hypolipidaemic agents (such statins) on lipid profile as well as on liver function ,renal function, oxidative stress, and platelets function when given to dyslipidaemic patients .

Patients and methods

Forty four patients (24 males and 20 females) with age ranged between 40-70 years (54 ± 14.6) with dyslipidaemia on statins therapy for at least 6 month were involved in these clinical trials. They are randomized into two groups treated with either a combination of 20 mg/day simvastatin or a combination of 20mg/day atorvastatin and 10mg/day of ezetimibe. The study also included 22 apparently healthy subjects with age ranged (40-70years) and sex(11males and 11 females) matching that of the patients group. Serum lipid profile (total cholesterol, triglycerides, low density lipoprotein-cholesterol, very low density lipoprotein-cholesterol, and

high density lipoprotein-cholesterol C), oxidative stress marker (Malondialdehyde-MDA), liver functions indices (Alanin aminotransferase - ALT,Aspartate aminotransferase- AST, total bilirubin, and direct bilirubin), renal function parameters (urea, creatinine, and microalbuminuria) and platelets function test (bleeding time)were evaluated befor and after 4 and 6 weeks of starting treatment .

Results:

Treatment with ezetimibe plus simvastatin results in significant lowering in TC, TG, LDL-C. With elevation in HDL-C also LDL/HDL ratio showed significant changes. This effect was associated with significant changes in liver function, and oxidative stress without changes in platelets function nor the renal function. Meanwhile adjunct use of ezetimibe with atorvastatin, result in significant lowering in TC, TG, LDL/HDL and elevation in HDL-cholesterol this effect was associated with significant alteration in liver function, oxidative stress, without a considerable change in platelets function renal function

Conclusions:

The results presented in this study indicated that ezetimibe can be used in clinical practice for the treatment of dyslipidemia, when combined with other hypolipidaemic agents like simvastatin and atorvastatin, improve the therapeutic profile with ameliorating some of its adverse effect.