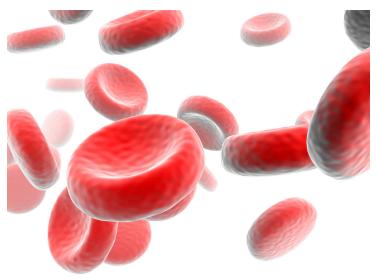


## AstraZeneca launches Brilinta for prevention of thrombotic events

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**Singapore:** AstraZeneca has launched Brilinta (ticagrelor) for the prevention of atherothrombotic events in adult patients with acute coronary syndromes (ACS). Brilinta is the first antiplatelet medication shown to significantly reduce the number of cardiovascular deaths over clopidogrel, the current standard of care.

"ACS affects an estimated 17.3 million people globally and cardiovascular death accounts for more than 5,000 deaths annually in Singapore. The approval and launch of Brilinta (ticagrelor) means that physicians now have access to a new treatment option for patients with ACS that is proven to be more effective than clopidogrel at reducing heart attack and cardiovascular death when taken with low-dose aspirin (less than 150mg)," said Dr Jayanti Visvanathan, medical director, AstraZeneca Singapore and Malaysia.

Brilinta, co-administered with aspirin, is specifically indicated for the prevention of thrombotic events, such as cardiovascular death, myocardial infarction and stroke in patients with ACS including unstable angina, non-ST elevation Myocardial Infarction of ST Elevation Myocardial Infarction, as well as patient managed medically and those who are managed with percutaneous coronary intervention or coronary artery bypass grafting.

Brilinta's approval is supported by data from the landmark PLATelet inhibition and patient Outcomes (PLATO) head-to-head trial with clopidogrel involving more than 18,000 patients in 43 countries (inclusive of Singapore), of ticagrelor tablets (Brilinta) plus aspirin, versus clopidogrel (Plavix) plus aspirin to establish whether ticagrelor could achieve clinically meaningful cardiovascular and safety endpoints in acute coronary syndromes (ACS - the umbrella term for heart attacks and unstable angina) patients).

Associate Professor Tan Huay Cheem, director, National University Heart Centre, Singapore, said, "Patients with coronary heart disease and resulting acute coronary syndromes (ACS) are at a high risk of recurrent events. ACS is a life threatening condition that needs to be managed aggressively with medical and invasive therapy, if necessary. In Asian patients, there are

ethnic differences in pharmacodynamic response to clopidogrel, the current antiplatelet therapy of choice. Ticagrelol gives us another treatment option to offer ACS patients. It does not have the resistance problem seen in patients on clopidogrel, is more potent, faster in onset and when compared to clopidogrel, significantly reduces recurrent MI and cardiovascular death."