Low density lipoprotein apheresis for the treatment of familial hypercholesterolemia

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Record Status
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Citation

Authors' objectives
This study aims to present the current evidence on the safety and efficacy/effectiveness of using apheresis to lower the concentration of low density lipoprotein (LDL) cholesterol in patients with familial hypercholesterolemia.

Authors' conclusions
The weak evidence suggested that the DSC Liposorber system, in combination with lipid lowering therapy, lowered LDL cholesterol levels in older patients (>50 years of age) with severe FH when they were treated at least once every two weeks for a minimum of one year. The mean per cent decrease in LDL cholesterol levels ranged from 34% to 81%. However, the use of a combined therapy meant that the contribution of LDL apheresis to the treatment effect is unclear. The two studies that compared the various LDL apheresis systems concluded that all of the systems (Immunoadsorption, Liposorber, HELP, Lipdifiltration) comparatively decreased the levels of LDL cholesterol (mean per cent decrease values ranged from 54% to 65%). The most commonly reported adverse effects associated with DSC and HELP were hypotension, nausea and vomiting. All of the reported adverse effects were transient.

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