



Ferrer and CNIC unveil results of first real-world study of CNIC-Polypill showing decreased risk of Major Adverse Cardiovascular Events when compared to monocomponents administered separately

The NEPTUNO study in secondary cardiovascular prevention, involving close to 6,500 patients, also highlights improved control of Cardiovascular Risk Factors and lower demand on healthcare resources than in control cohorts

Barcelona, Spain, December 9, 2021 – Ferrer, a Spanish pharmaceutical company which aims to make a positive impact in society, and CNIC, Spanish National Center for Cardiovascular Research, today announce the results of NEPTUNO, the first real-world clinical study on patients treated with the CNIC-Polypill. This single pill, composed of the three class A medications recommended in the cardiovascular prevention guidelines,¹ is used to treat patients who have previously suffered a CardioVascular (CV) event, such as heart-attack or ischemic stroke.

The NEPTUNO clinical study for secondary cardiovascular prevention was carried out on 6,456 patients in Spain. Most had one previous cardiovascular event; approximately ten per cent had experienced two. The study's purpose was to determine the effectiveness of the CNIC-Polypill in the incidence of MACE (Major Adverse Cardiovascular Events) in secondary prevention patients, within the context of routine clinical practice. Additionally, the effectiveness on Cardiovascular Risk Factors (CVRF) such as blood pressure and lipidic profile (total cholesterol, LDL cholesterol, HDL cholesterol and triglycerides) was assessed. Persistence to therapy was also investigated as well as the utilization of healthcare resources and costs.

Significant real-life data results

The results from the NEPTUNO study demonstrate a decreased risk of MACE in CNIC-Polypill treated patients, when compared to those being administered identical or equipotent drugs separately. Patients treated with the CNIC-Polypill also showed improved control of CVRF, such as blood pressure and lipid profile, together with a longer persistence to therapy, when compared to patients taking the identical or equipotent drugs separately.² The study demonstrates that the use of the CNIC-Polypill significantly lowers the demand on healthcare resources, when compared to control cohorts. This reduction in utilization and associated costs is significant in terms of patient hospitalization days, resulting in lower CV events and a reduction in the number of medical visits required in the CNIC-Polypill cohort.³ The results of the NEPTUNO study were presented at the European Society of Cardiology (ESC) Congress 2021 at the end of August.^{2,3}

According to Rodrigo Palma dos Reis, chief medical officer at Ferrer: "With these results, Ferrer continues to show a strong commitment to improving patients' lives within the cardiovascular sector, reducing recurrent MACE. We aim to provide a baseline treatment for patients who have suffered heart attacks and/or isquemic strokes - to avoid recurrent CV events, hence the importance of these results."

This study is the first direct observation of the real-world impact and outcomes of the CNIC-Polypill for secondary prevention patients within healthcare settings. The CNIC-Polypill is the result of a codevelopment and partnership between CNIC (Centro Nacional de Investigaciones Cardiovasculares, the Spanish National Center for Cardiovascular Research, Madrid) and Ferrer.

To confirm these results, a randomized clinical trial is under way: SEcondary prevention of CardiovascUlaR disease in the Elderly (SECURE).⁴ Results of the analysis of 2,500 patients are expected to be presented at the 2022 ESC Congress in Barcelona. These will focus on hard outcomes, when compared to standard therapy. They will be presented by Dr. Valentí Fuster, general director at CNIC and Dr. José Maria Castellano, coordinator of clinical trials.





Going-forward, the CNIC-Polypill could be a useful clinical strategy - as baseline therapy - to reduce the incidence of new CV events and improve the control of CVRF in patients in secondary cardiovascular prevention settings.

About cardiovascular disease:

According to the <u>World Health Organization</u>, CardioVascular Disease (CVD) causes more than half of all deaths across Europe, where CVD causes 46 times the number of deaths and 11 times the disease burden than that of AIDS, TB and malaria combined. 80% of premature heart disease and strokes are preventable.⁵

According to the <u>European Society of Cardiology</u>, nearly 49 million people are living with the disease in Europe, and each year, CVD causes 3.9 million deaths in Europe.⁶

It has been estimated that up to 50-75% of patients with previous myocardial infarction will have a recurrent cardiovascular event in the same or different vascular beds within 1-3 years, respectively, after the acute cardiac event.⁷⁻⁹ In addition, patients diagnosed with prior myocardial infarction have a five- to six-fold higher risk for cardiovascular death, within the first year.¹⁰

Notes to editors:

- The pharmaceutical form is a hard capsule that contains six different possible formulations according to the dosage of the three components of the polypill, which are Acetyl Salicylic Acid (ASA), Atorvastatin (A) and Ramipril (R)
- The NEPTUNO study is a retrospective, non-interventional analysis of an anonymized medical electronic dataset of the BIG-PAC administrative database covering 2015-2018; it contains anonymized data of 1.8 million clinical histories of patients from seven primary care and hospital areas in Spain

About CNIC (Centro Nacional de Investigaciones Cardiovasculares)

The Spanish National Center for Cardiovascular Research is a leading international research center dedicated to understanding the basis of cardiovascular health and disease and to translating this knowledge into improved patient care. CNIC's ultimate goal is for the newly generated knowledge to be translated into societal benefits and for it to provide a tangible return for the Spanish public sector. CNIC's resources are oriented toward translating research results into changes within clinical practice and providing opportunities for the business sector. CNIC promotes close partnerships between basic and clinical investigators and pioneers, and their participation in population-based clinical and observational studies - one of the center's core commitments.

www.cnic.es

About Ferrer

At Ferrer we want to make a positive impact in society and we do so by reinvesting a significant part of our profits into initiatives with social and environmental impact, as well as in our people.

In order to fulfill our purpose, we offer transformative therapeutic solutions, with an increasing focus on pulmonary vascular and interstitial lung diseases and neurological disorders. Founded in Barcelona in 1959, we are currently present in more than a hundred countries and have a team of over 1,800 people, who are empowered, developed and mentored, so they are proud of working at Ferrer. We are Ferrer, Ferrer for good.

https://www.ferrer.com/en

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