Professor Stephen Nicholls

BIOGRAPHY

Stephen Nicholls is Deputy Director and Heart Health Theme Leader at the South Australian Health and Medical Research Institute (SAHMRI). He is Professor of Cardiology at the University of Adelaide, Consultant Cardiologist at the Royal Adelaide Hospital and Principal Research Fellow of the National Health and Medical Research Council of Australia. He completed his medical training in Adelaide, cardiology training in Newcastle and his PhD at the Heart Research Institute, focusing on the anti-inflammatory properties of high-density lipoproteins. After a postdoctoral fellowship in plaque imaging, he was appointed to faculty at the Cleveland Clinic, where he served as the Medical Director of the Atherosclerosis Imaging Core Laboratory and Cardiovascular Director of the Cleveland Clinic Coordinating Center for Clinical Research. He returned to Australia in 2012 to take up his current positions in Adelaide. He has published more than 600 original manuscripts, conference proceedings and book chapters, including in the New England Journal of Medicine, Lancet, Journal of the American Medical Association and Nature Medicine. He is currently a Past President of the Australian Atherosclerosis Society and Treasurer of the Cardiac Society of Australia and New Zealand. He is an inaugural Fellow of the Australian Academy of Health and Medical Sciences. His major research interests include studying the impact of metabolic factors influencing heart disease, development of novel plaque imaging modalities in clinical practice and performing large scale clinical trials of novel cardioprotective therapies.

ABSTRACT

Insights from the first trials in epigenetics in human: What is the way forward?

Residual cardiovascular risk despite use of established medical therapies highlights the need to develop new agents to prevent cardiovascular events. Apabetalone has emerged as the first epigenetic approach to targeting cardiovascular risk. Mechanistic studies suggest that apabetalone exerts favorable effects on a range of molecular pathways implicated in cardiovascular disease. Early phase 2 studies have demonstrated beneficial effects on cardiovascular biomarkers and a reduction in cardiovascular events, which appears to be more prominent in patients with diabetes and elevated inflammatory markers. The ultimate impact of apabetalone on cardiovascular outcomes is being evaluated in a large clinical event trial (BETonMACE). The clinical experience of apabetalone leading to this large outcome trial will be reviewed.
Presentations will be available at www.pace-cme.org