What is claimed is:

1. Use of about 4 g per day of a pharmaceutical composition comprising at least about 80%, by weight of all fatty acids present, ethyl eicosapentaenoate in the manufacture of a medicament for reducing triglycerides in a subject having a fasting baseline triglyceride level of 500 mg/dl to about 1500 mg/dl.

2. Use of a capsule comprising a pharmaceutical composition comprising about 1g of fatty acids, wherein at least about 80% of the fatty acids are ethyl eicosapentaenoate in the manufacture of a medicament for reducing triglycerides in a subject having a fasting baseline triglyceride level of 500 mg/dl to about 1500 mg/dl, wherein the use comprises oral administration of 4 capsules per day to the subject.

3. The use of claim 1 or claim 2, wherein the medicament is useful for reducing triglycerides in the subject compared to placebo.

4. The use of claim 1 or claim 2, wherein the medicament is useful for reducing triglycerides in the subject compared to baseline.

5. The use of claim 4, wherein the medicament is useful for reducing triglycerides in the subject by at least about 25% compared to baseline.

6. The use of claim 1 or claim 2, wherein the medicament is useful for reducing triglycerides in the subject compared to a second subject having a fasting baseline triglyceride level of 500 mg/dl to about 1500 mg/dl who has not been administered the pharmaceutical composition.

7. The use of claim 6, wherein the medicament is useful for reducing triglycerides in the subject by at least about 20% compared to the second subject.

8. The use of any one of claims 1 to 6, wherein the medicament is useful for reducing an apolipoprotein B level in the subject.

9. The use of any one of claims 1 to 6, wherein the medicament is useful for not substantially increasing an LDL-C level in the subject.

10. The use of claim 9, wherein the medicament is useful for reducing the LDL-C level in the subject.

11. The use of claim 4 or claim 5, wherein the medicament is useful for increasing an LDL-C level in the subject by no more than 5%.

12. The use of any one of claims 1 to 6, wherein the medicament is useful for reducing a VLDL-C level in the subject.

13. The use of any one of claims 1 to 6, wherein the medicament is useful for reducing a high-sensitivity C-reactive protein level in the subject.

14. The use of any one of claims 1 to 6, wherein the subject is administered the pharmaceutical composition daily for a period of at least 12 weeks.

15. The use of any one of claims 1 to 14, wherein the pharmaceutical composition comprises at least about 90%, by weight of all fatty acids present, ethyl eicosapentaenoate.

16. The use of claim 15, wherein the pharmaceutical composition comprises at least about 95%, by weight of all fatty acids present, ethyl eicosapentaenoate.

17. The use of claim 15, wherein the pharmaceutical composition comprises at least about 96%, by weight of all fatty acids present, ethyl eicosapentaenoate.

18. The use of any one of claims 1 to 17, wherein the pharmaceutical composition comprises less than about 10%, by weight of all fatty acids present, docosahexaenoic acid or its esters.

19. The use of claim 18, wherein the pharmaceutical composition comprises less than about 3%, by weight of all fatty acids present, docosahexaenoic acid or its esters.

20. The use of claim 18, wherein the pharmaceutical composition comprises substantially no docosahexaenoic acid or its esters.

21. The use of any one of claims 1 to 20, wherein the subject is not administered an additional lipid lowering drug.

22. The use of any one of claims 1 to 20, wherein the subject is further administered an additional lipid lowering drug.

23. The use of claim 22, wherein the additional lipid lowering drug is a statin.

24. The use of any one of claims 1 to 23, wherein the subject is diabetic.

25. Use of about 4 g per day of a pharmaceutical composition comprising at least about 90% ethyl eicosapentaenoate, by weight of all fatty acids present in the manufacture of a medicament for reducing triglycerides in a subject having a fasting baseline triglyceride level of 500 mg/dl to about 1500 mg/dl, wherein the use comprises oral administration orally to the subject for a period of 12 weeks to effect a reduction in triglycerides in the subject.

26. Use of a capsule comprising about 1 g of ethyl eicosapentaenoate in the manufacture of a medicament for reducing triglycerides in a subject having a fasting baseline triglyceride level of 500 mg/dl to about 1500 mg/dl, wherein the use comprises oral administration to the subject of 4 capsules per day, for a period of 12 weeks to effect a reduction in triglycerides in the subject.

27. The use of claim 25 or claim 26, wherein the medicament is useful for reducing triglycerides compared to baseline.

28. The use of claim 25 or claim 26, wherein the medicament is useful for reducing triglycerides compared to placebo control.

29. The use of claim 25 or claim 26, wherein the medicament is useful for reducing triglycerides compared to a second subject having a fasting baseline triglyceride level of 500 mg/dl to about 1500 mg/dl who has not been administered the pharmaceutical composition.

30. The use of any one of claims 1, 2, 25 or 26, wherein the subject has a fasting baseline LDL-C from about 50 mg/dl to about 300 mg/dl.

31. The use of any one of claims 1, 2, 25, 26 or 30, wherein the subject has one or more of: a baseline fasting non-HDL-C of about 200 mg/dl to about 400 mg/dl, a baseline fasting total cholesterol of about 250 mg/dl to about 400 mg/dl, a baseline fasting

VLDL-C of about 140 mg/dl to about 200 mg/dl, and/or a baseline fasting HDL-C of about 10 mg/dl to about 60 mg/dl.

32. The use of claim 30, wherein the medicament is useful for reducing the fasting triglyceride level by at least about 10% without increasing LDL-C by more than 5% in the subject.

33. The use of claim 32, wherein the medicament is useful for reducing the fasting triglycerides compared to baseline and increasing the LDL-C, if at all, compared to baseline.

34. The use of claim 32, wherein the medicament is useful for reducing the fasting triglycerides compared to baseline and increasing the LDL-C, if at all, compared to placebo control.

35. The use of any one of claims 25 to 34, wherein the medicament is useful for reducing the fasting triglycerides by at least about 20% without increasing LDL-C in the subject.

36. The use of any one of claims 25 to 34, wherein the medicament is useful for reducing VLDL-C in the subject.

37. The use of any one of claims 1 to 36, wherein the subject consumes a Western diet.

~~What is claimed is:~~

1. Use of about 4 g per day of a pharmaceutical composition comprising at least about 80%, by weight of all fatty acids present, ethyl eicosapentaenoate in the manufacture of a medicament for reducing triglycerides in a subject having a fasting baseline triglyceride level of 500 mg/dl to about 1500 mg/dl.

2. Use of a capsule comprising about 1g of fatty acids, wherein at least about 80% of the fatty acids are ethyl eicosapentaenoate in the manufacture of a medicament for reducing triglycerides in a subject having a fasting baseline triglyceride level of 500 mg/dl to about 1500 mg/dl, wherein the use comprises oral administration of 4 capsules per day to the subject.

3. The use of claim 1 or claim 2, wherein the triglycerides are reduced in the subject compared to placebo.

4. The use of claim 1 or claim 2, wherein the triglycerides are reduced in the subject compared to baseline.

5. The use of claim 4, wherein the triglycerides are reduced in the subject by at least about 25% compared to baseline.

6. The use of claim 1 or claim 2, wherein the triglycerides are reduced in the subject compared to a second subject having a fasting baseline triglyceride level of 500 mg/dl to about 1500 mg/dl who has not been administered the pharmaceutical composition.

7. The use of claim 6, wherein the triglycerides are reduced in the subject by at least about 20% compared to the second subject.

8. The use of any one of claims 1 to 6, wherein an apolipoprotein B level is reduced in the subject.

9. The use of any one of claims 1 to 6, wherein an LDL-C level is not substantially increased in the subject.

10. The use of claim 9, wherein the LDL-C level is reduced in the subject.

11. The use of claim 4 or claim 5, wherein the LDL-C level is increased by no more than 5%.

12. The use of any one of claims 1 to 6, wherein a VLDL-C level is reduced in the subject.

13. The use of any one of claims 1 to 6, wherein a high-sensitivity C-reactive protein level is reduced in the subject.

14. The use of any one of claims 1 to 6, wherein the subject is administered the pharmaceutical composition daily for a period of at least 12 weeks.

15. The use of any one of claims 1 to 14, wherein the pharmaceutical composition comprises at least about 90%, by weight of all fatty acids present, ethyl eicosapentaenoate.

16. The use of claim 15, wherein the pharmaceutical composition comprises at least about 95%, by weight of all fatty acids present, ethyl eicosapentaenoate.

17. The use of claim 15, wherein the pharmaceutical composition comprises at least about 96%, by weight of all fatty acids present, ethyl eicosapentaenoate.

18. The use of any one of claims 1 to 17, wherein the pharmaceutical composition comprises less than about 20%, by weight of all fatty acids present, docosahexaenoic acid or its esters.

19. The use of claim 18, wherein the pharmaceutical composition comprises less than about 3%, by weight of all fatty acids present, docosahexaenoic acid or its esters.

20. The use of claim 18, wherein the pharmaceutical composition comprises substantially no docosahexaenoic acid or its esters.

21. The use of any one of claims 1 to 20, wherein the subject is not administered an additional lipid lowering drug.

22. The use of any one of claims 1 to 20, wherein the subject is further administered an additional lipid lowering drug.

23. The use of claim 22, wherein the additional lipid lowering drug is a statin.

24. The use of any one of claims 1 to 23, wherein the subject is diabetic.

25. Use of about 4 g per day of a pharmaceutical composition comprising at least about 90% ethyl eicosapentaenoate, by weight of all fatty acids present in the manufacture of a medicament for reducing triglycerides in a subject having a fasting baseline triglyceride level of 500 mg/dl to about 1500 mg/dl, wherein the use comprises oral administration orally to the subject for a period of 12 weeks to effect a reduction in triglycerides in the subject.

26. Use of a capsule comprising about 1 g of ethyl eicosapentaenoate, by weight of all fatty acids present in the manufacture of a medicament for reducing triglycerides in a subject having a fasting baseline triglyceride level of 500 mg/dl to about 1500 mg/dl, wherein the use comprises oral administration to the subject of 4 capsules per day, for a period of 12 weeks to effect a reduction in triglycerides in the subject.

27. The use of claim 25 or claim 26, wherein the reduction in triglycerides is compared to baseline.

28. The use of claim 25 or claim 26, wherein the reduction in triglycerides is compared to placebo control.

29. The use of claim 25 or claim 26, wherein the reduction in triglycerides is compared to a second subject having a fasting baseline triglyceride level of 500 mg/dl to about 1500 mg/dl who has not been administered the pharmaceutical composition.

30. The use of any one of claims 1, 2, 25 or 26, wherein the subject has a fasting baseline LDL-C from about 50 mg/dl to about 300 mg/dl.

31. The use of any one of claims 1, 2, 25, 26 or 30, wherein the subject has one or more of: a baseline fasting non-HDL-C of about 200 mg/dl to about 400 mg/dl, a baseline fasting total cholesterol of about 250 mg/dl to about 400 mg/dl, a baseline fasting VLDL-C of about 140 mg/dl to about 200 mg/dl, and/or a baseline fasting HDL-C of about 10 mg/dl to about 60 mg/dl.

32. The use of claim 30, wherein the fasting triglyceride level is reduced by at least about 10% without increasing LDL-C by more than 5% in the subject.

33. The use of claim 32, wherein the reduction in fasting triglycerides is compared to baseline and the increase in LDL-C, if any, is compared to baseline.

34. The use of claim 32, wherein the reduction in fasting triglycerides is compared to baseline and the increase in LDL-C, if any, is compared to placebo control.

35. The use of any one of claims 25 to 34, wherein the reduction in fasting triglycerides is at least about 20% without increasing LDL-C in the subject.

36. The use of any one of claims 25 to 34, wherein the VLDL-C is reduced in the subject.

37. The use of any one of claims 1 to 36, wherein the subject consumes a Western diet.