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Scientific Sessions

SEX DIFFERENCES IN HEALTH STATUS IN HEART FAILURE WITH PRESERVED EJECTION FRACTION: A POOLED ANALYSIS OF 4 LARGE-SCALE RANDOMIZED CLINICAL TRIALS

8-Nov-2026 MDP.10, Hormones and Heartbeats: Pregnancy, Menopause, and Rhythm and Failure Risk

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American Heart Association.

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BACKGROUND

- ✓ Patients with heart failure with mildly reduced or preserved ejection fraction (HFmrEF/HFpEF) experience substantial impairment in health status.[1]
- ✓ Prior studies have consistently shown that women have worse health status than men.[2-4]
- ✓ However, whether these differences have narrowed in contemporary HFmrEF/HFpEF trial populations and which health-status components contribute most to this gap remain uncertain.

Objective:

To examine the temporal trends and component profiles of sex differences in health status in HFmrEF/HFpEF

1. *J Am Coll Cardiol*. 2026;87:3559-69, 2. *J Am Coll Cardiol*. 2019;73:29-40, 3. *Circ Heart Fail.* 2019;12:e006539, 4. *Eur J Heart Fail.* 2021;23:567-77.

METHODS

- ✓ Participant-level data were pooled from 4 HFmrEF/HFpEF trials (TOPCAT-Americas, PARAGON-HF, DELIVER, and FINEARTS-HF).[1]
- ✓ Health status was assessed using the 23-item Kansas City Cardiomyopathy Questionnaire (KCCQ-23), and the KCCQ overall summary score (KCCQ-OSS) was calculated (0 [worst] to 100 [best]).[2]
- ✓ Temporal trends of sex differences in KCCQ-OSS across years of randomization were evaluated using a linear regression model.[3]
- ✓ Sex differences in individual 23 KCCQ items were examined using multivariable linear regression adjusted for baseline demographics, HF severity, key laboratory measures, comorbidities, and trial.[4]

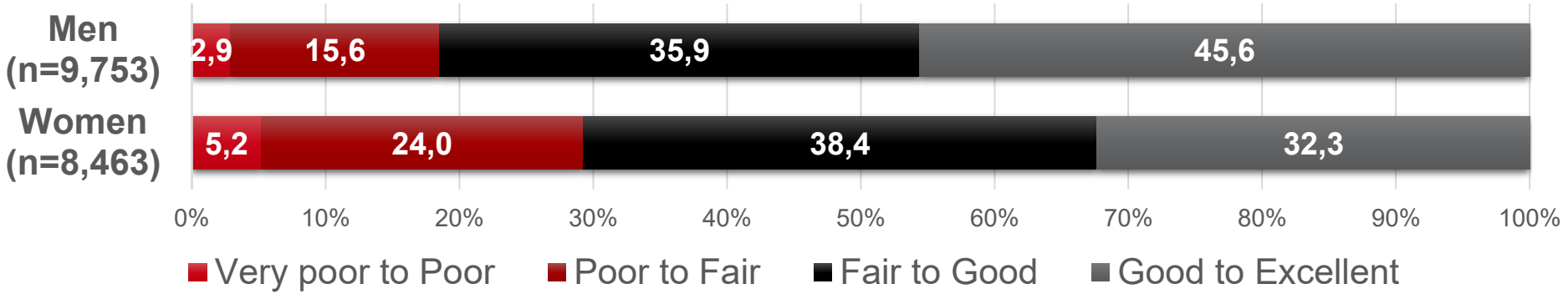
1. *J Am Coll Cardiol*. 2026;87:3559-69, 2. *J Am Coll Cardiol*. 2000;35:1245-55, 3. *Eur Heart J*. 2026 in press, 4. *Eur J Heart Fail*. 2026 in press.

WOMEN HAD LOWER (WORSE) BASELINE KCCQ-OSS THAN MEN

69.1±20.6 points

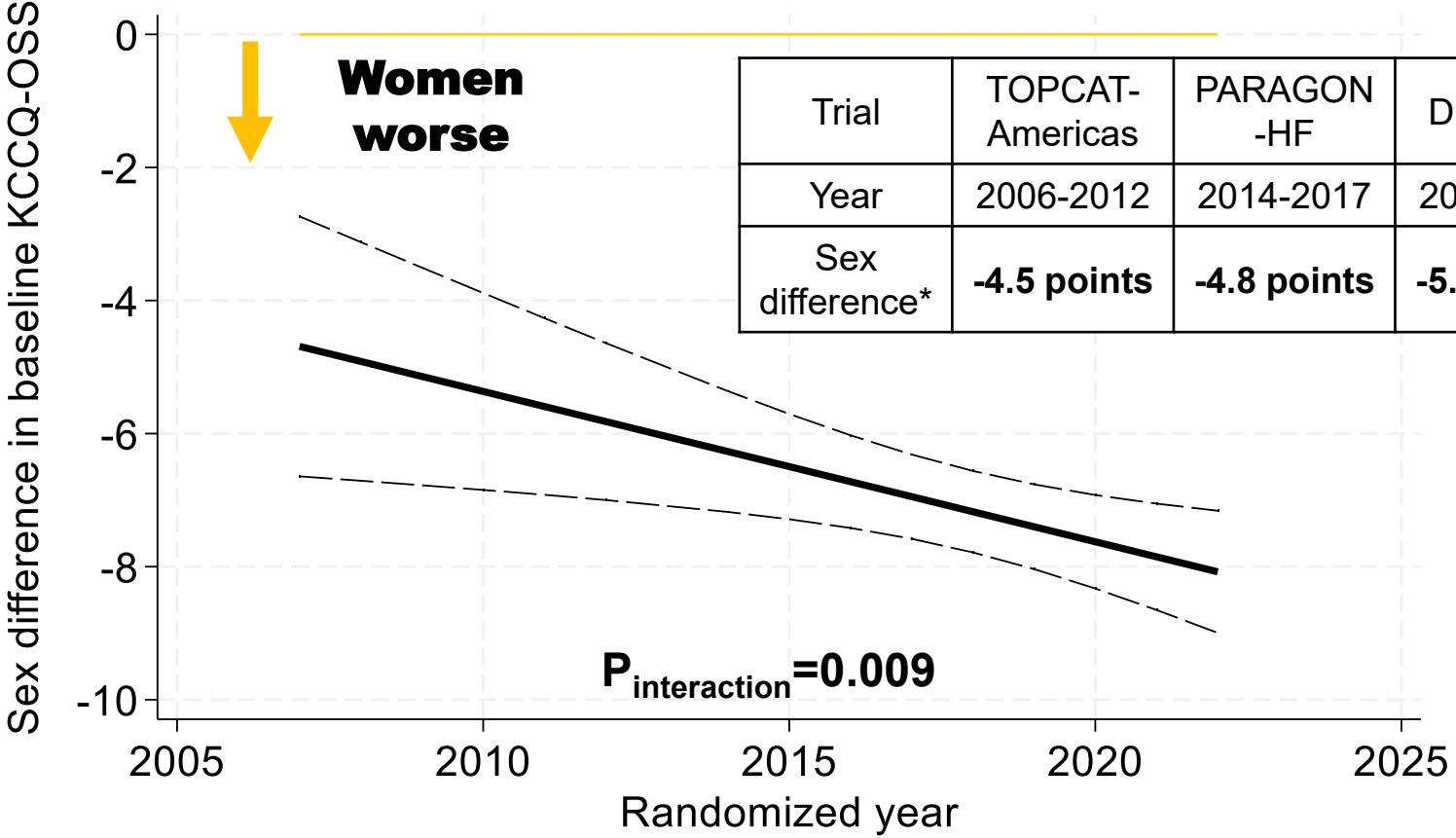
62.0±21.4 points

The distribution of baseline KCCQ-OSS categories by sex



KCCQ-OSS categories: 0–24 (very poor to poor), 25–49 (poor to fair), 50–74 (fair to good), and 75–100 (good to excellent).

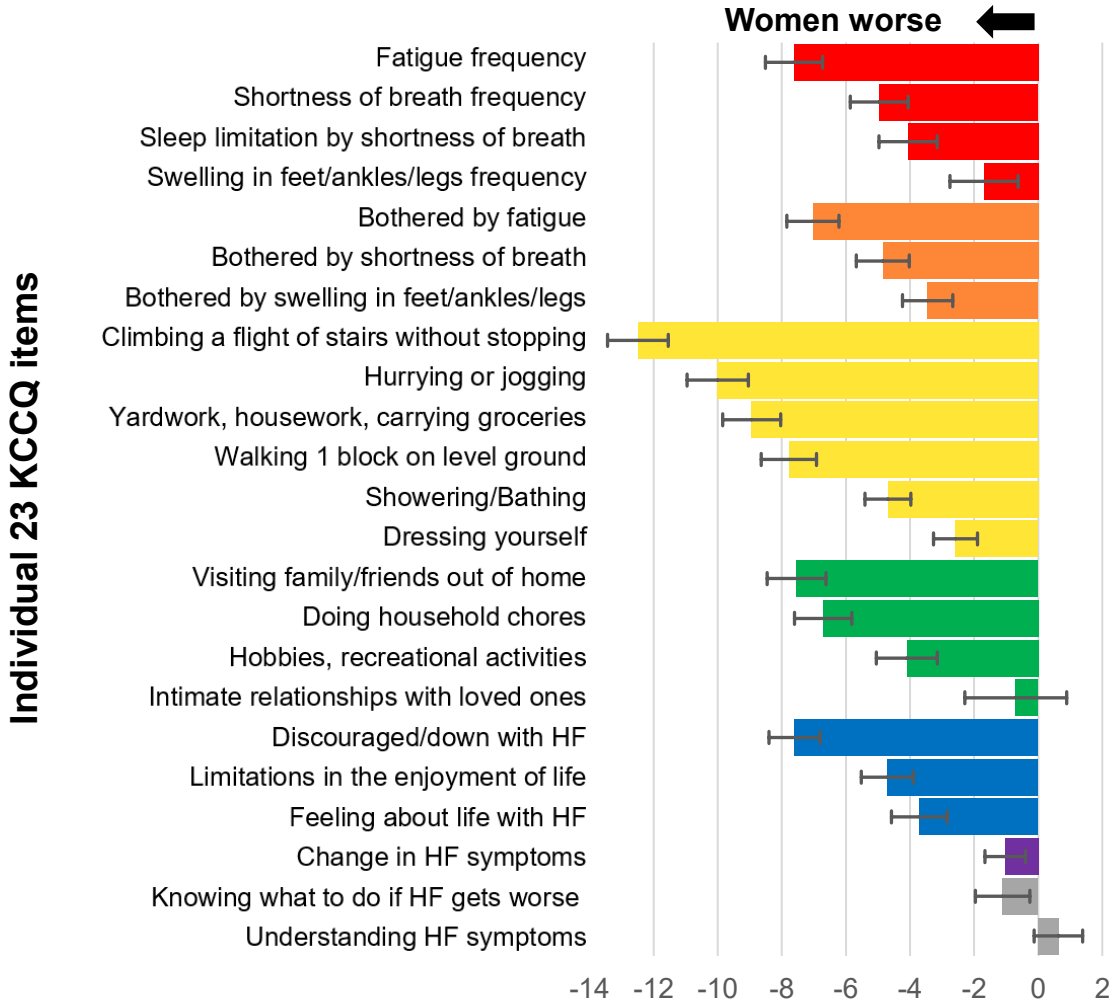
THE SEX DIFFERENCE IN KCCQ-OSS DID NOT APPEAR TO ATTENUATE OVER TIME

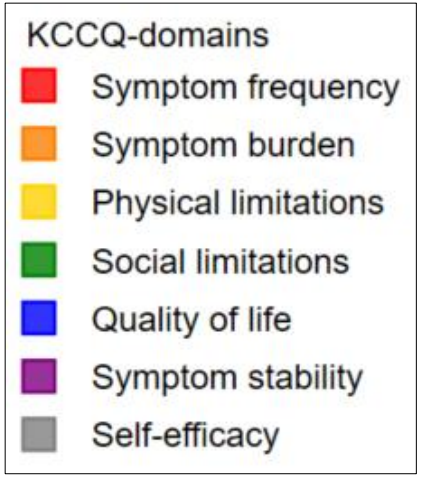


Trial	TOPCAT-Americas	PARAGON-HF	DELIVER	FINEARTS-HF
Year	2006-2012	2014-2017	2018-2021	2020-2023
Sex difference*	**-4.5 points**	**-4.8 points**	**-5.5 points**	**-6.5 points**

*Adjusted for baseline demographics, HF severity, key laboratory measures, comorbidities, and trial

SEX DIFFERENCES WERE EVIDENT ACROSS MOST KCCQ ITEMS





Greater sex differences were observed in the

- ✓ **Physical limitation**
- ✓ **Social limitation**
- ✓ **Quality of life**
- ✓ **Symptom frequency**
- ✓ **Symptom burden**

SUMMARY

- ✓ In this participant-level pooled analysis of four large-scale global trials spanning two decades, women with HFmrEF/HFpEF exhibited consistently worse baseline health status compared with men over time.
- ✓ Women had broad impairment across 23 KCCQ components.

These findings position patient-reported health status as a central unmet need for women with HFmrEF/HFpEF and highlight the need for trials and care-delivery strategies designed to close this persistent sex gap.

SIMULTANEOUS PUBLICATION

JACC Heart Failure

Sex Differences in Health Status in Heart Failure With Preserved Ejection Fraction

Four-Trial Pooled Analysis

THANK YOU

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