

Age- and sex-specific real-world use patterns of patients treated with vericiguat in Germany

F. Kerwagen¹, C. Ohlmeier², T. Evers³, S. Herrmann⁴, I. Bayh³, A. Michel⁵, S. Kruppert⁶, J. Wilfer⁶, R. Wachter⁷, M. Böhm⁸, S. Störk¹

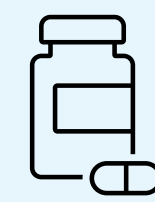
1) Comprehensive Heart Failure Center Würzburg and Department of Internal Medicine I, University Hospital Würzburg 2) Bayer AG, Berlin; 3) Bayer AG, Wuppertal 4) Bayer Vital, Leverkusen 5) Bayer Consumer Care AG, Basel 6) IQVIA Commercial GmbH & Co. OHG, Frankfurt am Main; 7) Department of Cardiology, University Hospital Leipzig 8) Department of Internal Medicine Clinic III, Saarland University Hospital, Homburg/Saar



Fabian Kerwagen

BACKGROUND & PURPOSE

- Vericiguat reduced clinical endpoints in patients experiencing worsening heart failure (HF) in clinical trials, but its implementation in routine care remains unclear and previous studies reported sex- and age-based differences for the implementation of guideline-directed medical therapy (GDMT)
- The aim of this study was to investigate age- and sex-specific characteristics and drug use patterns of patients treated with vericiguat in German routine care since its availability in September 2021



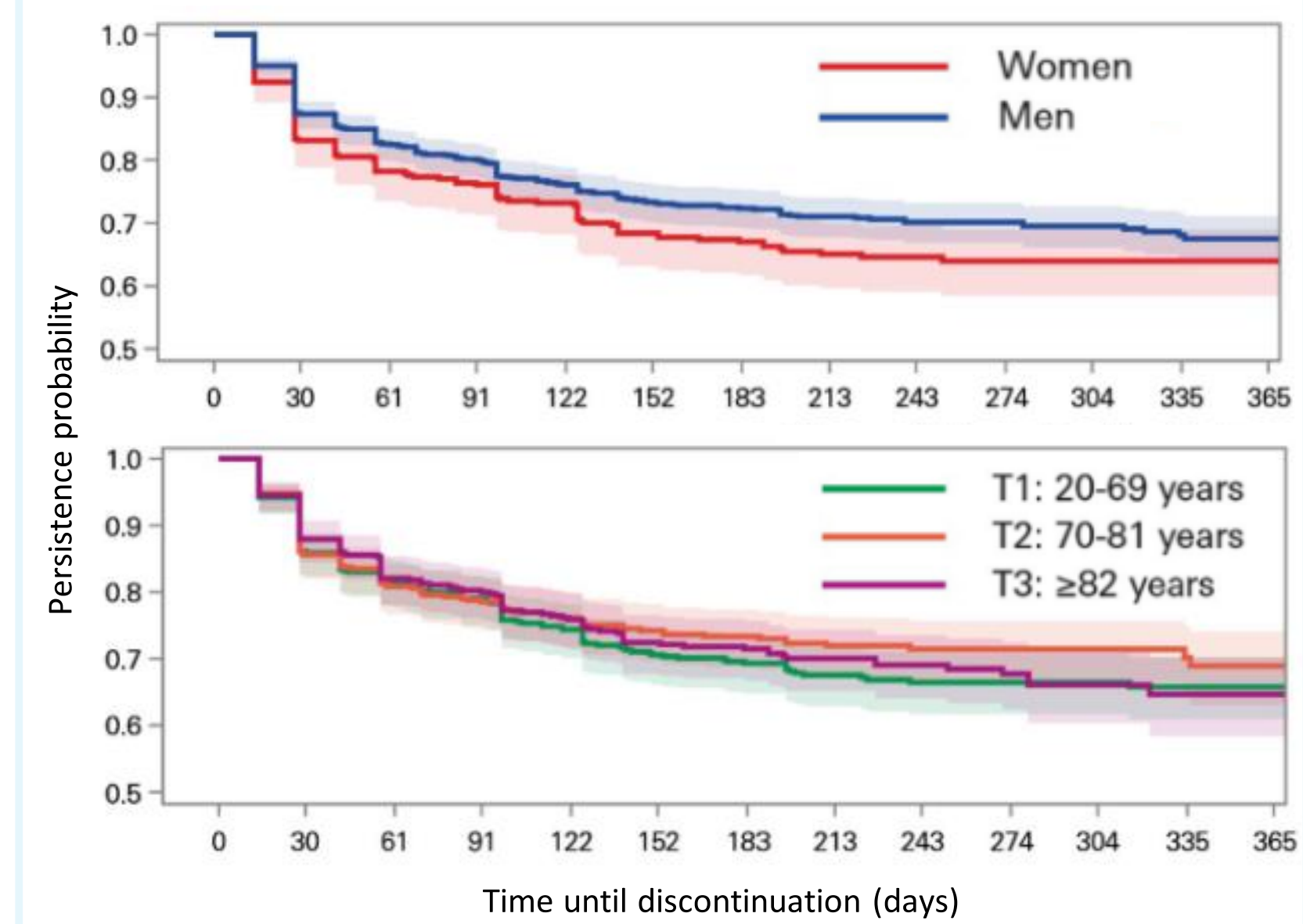
METHODS

- This was a longitudinal, retrospective cohort study analysis derived from the IQVIA™ LRx database, based on ~80% of the prescriptions of the 73 million people covered by the German statutory health insurance
- The database provided information on age, sex, the prescribed drug, date of prescription and dose. We report on concomitant medication, titration patterns, adherence (measured by medication possession ratio: MPR), and persistence (continuation through the first 12 months after initiation) stratified by sex and age tertiles (20-69 years, 70-81 years, >82 years)

RESULTS

- Between Sep 2021 and Dec 2022, vericiguat was initiated in 2,916 patients: mean age was 73±13 years and 28% were women
- The concomitant use of all foundational therapies (BB, ACEi/ARB/ARNI, MRA and SGLT2i) was lower in women (w: 20%, m: 30%) and in older patients (20-69y: 36%, 70-81y: 31%, >82y: 15%)
- Approximately 70% of the whole cohort were up-titrated to 5 mg or 10 mg with 36% reaching the maximal dose. However, women and older patients reached the maximum dose of 10 mg slightly less often, when compared to men (w: 34% vs. m: 37%) or to younger patients (20-69y: 38%, 70-81y: 37%, >82y: 33%)
- High drug adherence as indicated by MPR >80% was similarly high for both sexes (w: 88%, m: 86%) and across age subgroups (20-69y: 84%, 70-81y: 88%, >82y: 88%)
- Overall, 67% of 1,402 patients persistently used vericiguat during the first year after initiation and discontinuation predominantly occurred during the first two months. While persistence was similar across age-based subgroups, there was a trend for slightly higher discontinuation in women when compared to men: 120 (31%) vs 252 (27%), Figure presenting time to discontinuation

Figure: Persistence of vericiguat use during the first year after initiation (n=1,402)



CONCLUSION

Adherence and persistence were largely consistent across age- and sex-specific subgroups. However, women and older patients were less often up-titrated to the maximal dose and received other GDMT less frequently. Hence, barriers to vericiguat up-titration and GDMT implementation need to be investigated further.

Contact: Fabian Kerwagen
E-Mail: Kerwagen_F@ukw.de
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Declaration of interest:

I have nothing to declare

