Symptoms and Complications Significantly Increase the Logistic and Economic Burden of Obstructive Hypertrophic Cardiomyopathy – Results from Medical and Pharmacy Claims Data

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Hypothesis
• Symptoms and complications significantly increase the logistic and economic burden of oHCM.

Aim
• To understand the impact of oHCM symptoms and complications on healthcare logistics and economics, using the Symphony Integrated Dataverse medical and pharmacy claims database.

METHODS
• Adult patients in the United States with symptomatic (SYMP) and asymptomatic (ASYMP) oHCM were identified by International Classification of Diseases, Tenth Revision diagnosis codes between 2016 and 2021.
• Those with fatigue, chest pain, syncope, dyspnea, heart failure (HF), palpitations, pacemaker insertion, or septal reduction therapy within 3 months of index date were defined as SYMP. Patients without these symptoms were classed as ASYMP.
• Post complication was defined as after one or more of the following post-diagnosis events: atrial fibrillation (AF)/flutter, ventricular fibrillation/ventricular tachycardia (VF), supraventricular tachycardia, stress cardiomyopathy.
• Pre- vs post-complication comparisons were expressed as mean per-person per-year (PPPY).

RESULTS
• We identified 16,123 patients with oHCM (n=9490 SYMP; n=6633 ASYMP).
• Patients with SYMP vs ASYMP oHCM were older (61 ± 14 vs 60 ± 15 years, P<0.001), with a higher proportion of women (56% vs 46%, P<0.001) (Figure 1) and a higher incidence rate of complications (0.880 vs 0.518 per 1000 patient-years, P<0.001; hazard ratio 0.58, 95% CI 0.51–0.66).

CONCLUSIONS
• In this large cohort of patients from a US-wide all-payer database:
  – Patients with SYMP vs ASYMP oHCM had higher rates of complications.
  – Complications were associated with increased IP admissions and OP visits in patients with SYMP and ASYMP oHCM, and increased care charges in ASYMP oHCM.

Our data may support the development of novel treatment approaches and early intervention to potentially avoid complications, especially in patients with SYMP oHCM, for whom there is a steep increment in charges.

REFERENCES

DISCLOSURES
A) HCRU

B) Charges

- SYMP Pre
- SYMP Post
- ASYMP Pre
- ASYMP Post

Complication

Incremental pre- vs post-complication charges were $9,365 and $38,469 PPPY in SYMP and ASYMP patients, respectively (P<0.049).

Figures 2 and 3: Healthcare resource utilization and charges pre- and post-complications.