Treatment Algorithms in Chronic Heart Failure

Chronic heart failure (CHF) describes the long-term management of heart failure outside of the hospital setting. The disease progression of CHF is a gradual process that is heavily influenced by patient comorbidities such as hypertension, coronary artery disease (CAD), diabetes, and age. The primary goals of CHF treatment are to prolong patient survival and reduce the risk of hospitalization due to the rapid worsening of symptoms that characterize acute heart failure. First-line treatment of CHF usually involves an angiotensin-converting enzyme (ACE) inhibitor, oral beta blocker, and oral diuretic. The addition of second- or third-line agents, such as a mineralocorticoid receptor antagonist or a digitalis glycoside, is often dictated by risk factors, disease severity, and, to a lesser extent, patient symptoms. Using national patient-level claims data, this report analyzes physician adherence to CHF treatment guidelines by exploring the use of key therapies in the newly diagnosed and recently treated CHF patient populations. With respect to newly diagnosed patients, the report provides a quantitative analysis of treatment patterns and share by line of therapy, as well as progression between lines, duration of treatment on each line, and use of concomitant treatment. For recently treated patients, the report quantifies a drug’s source of business compared with that of its competitors and details which drugs precede others by analyzing add-versus-switch patterns. Additional analyses explore persistency and compliance by brand.

Questions Answered in This Report:

- Newly diagnosed patients: Approximately 42% of CHF patients begin treatment with a key therapy within a year of their initial diagnosis. What percentage of these patients progress to a second- or third-line drug within the first year? Which products capture the most patient share in the first, second, and third lines of treatment? How often is combination therapy used in each line of therapy?

- Recently treated patients: More than two-thirds of recently treated patients filled a prescription for a beta blocker in the fourth quarter of 2014. Which specific drugs garner the most patient share for recently treated CHF patients? When do patients progress from one therapy to the next in CHF, and how does this pattern differ among key drugs? Are most recently treated patients with each key brand coming from new (adds/switches) or continuing business?

- Pathways to key therapies: Longitudinal claims data reveal relatively consistent use patterns of key therapies among recently treated patients, with beta blockers, oral diuretics, and ACE inhibitors used early in treatment and often in combination with one another. Which therapies
have experienced market growth or decline over the key therapy periods studied? To what extent are key therapies prescribed concomitantly to recently treated patients? What has been the impact of recently approved generic drugs for CHF?

Scope:

Primary patient-level data: This report provides quantitative findings from our analysis of data covering approximately 40 million lives and provides the most representative sample of U.S. treatment practice for Medicare and commercially insured patients. This report is delivered as a key findings slide deck and a dashboard that can be accessed using the Internet and presents claims that are between 6 and 12 months old at time of publication.

Patient Sample: Patients who are continuously enrolled for the complete two-year study period must meet the following condition: at least one claim with a diagnosis code for CHF (International Classification of Diseases, Ninth Revision [ICD-9] diagnostic codes 428.22, 428.32, 428.42) during the study period.

Quantified lines of therapy analyses show exact share of each agent in each line of therapy, including rate of progression between lines and length of time patients are on each line.

Newly diagnosed patients:
- Patient share by drug class and key products across three lines of therapy, within one year of diagnosis.
- Patient flowcharts through one year of treatment for all first-line products, including progression rates and add/switch behavior.
- Polypharmacy and key concomitant therapies by line of therapy.
- Quarterly trending of patient share by line of therapy.

Recently treated patients:
- Quarterly snapshot of patient share by drug class and key products.
- Pathway to key therapy flowcharts tracking the preceding therapy patterns for all key therapies, including add/switch behavior.
- Brand source of business including share for continuing, new (switches/adds), and new (initial therapy) business.
- Polypharmacy and key concomitant therapies.
- Drug persistence and compliance.
- Quarterly trends of patient share for all key therapies.

Report Details

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- Author(s): Conor Walsh, Ph.D.