

Sex difference in long-term clinical outcomes after percutaneous coronary intervention

- A propensity-matched analysis of National Health Insurance data in Republic of Korea



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Disclosures

- No conflicts of interest or financial disclosures to report

Sex-disparities, True or False ?

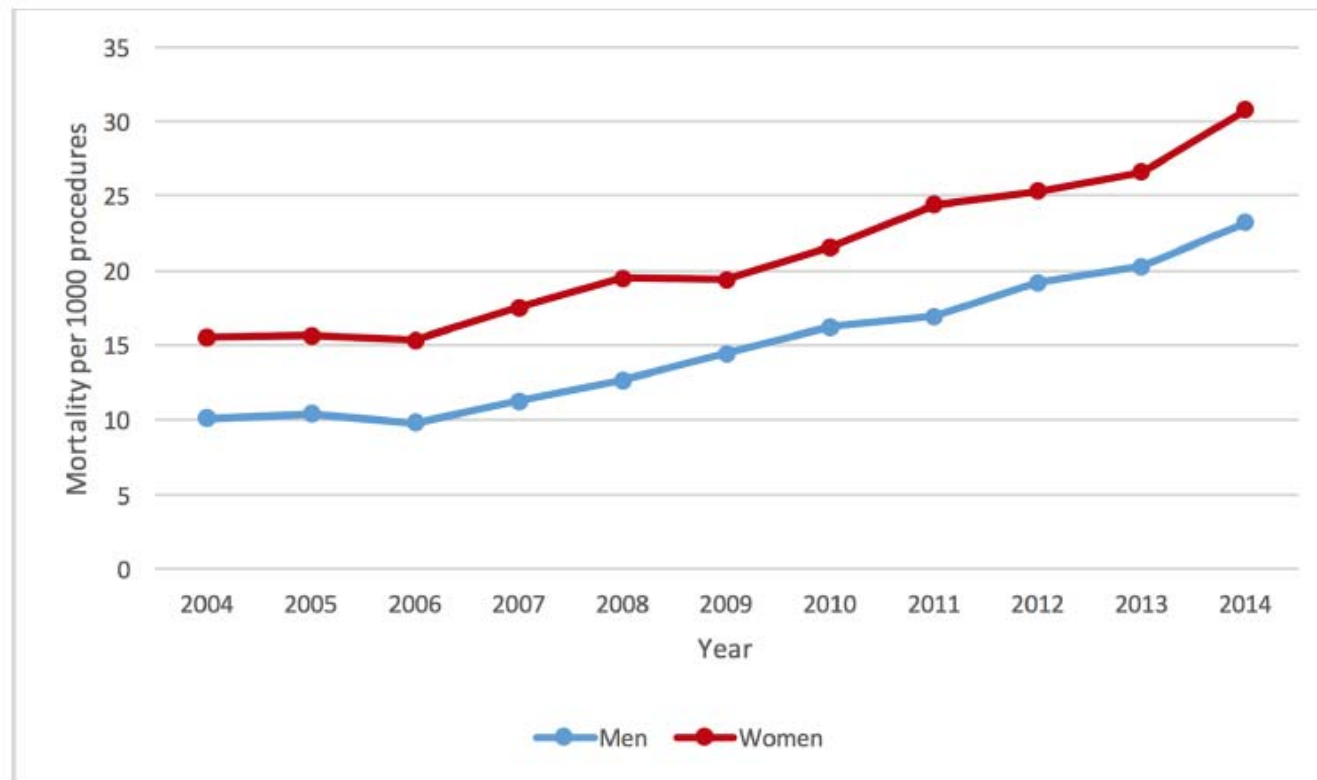


Female patients in randomized trials

- Under-represented, accounting for ~25% of patients
 - Comorbidities
 - Child-bearing potential
 - Older age

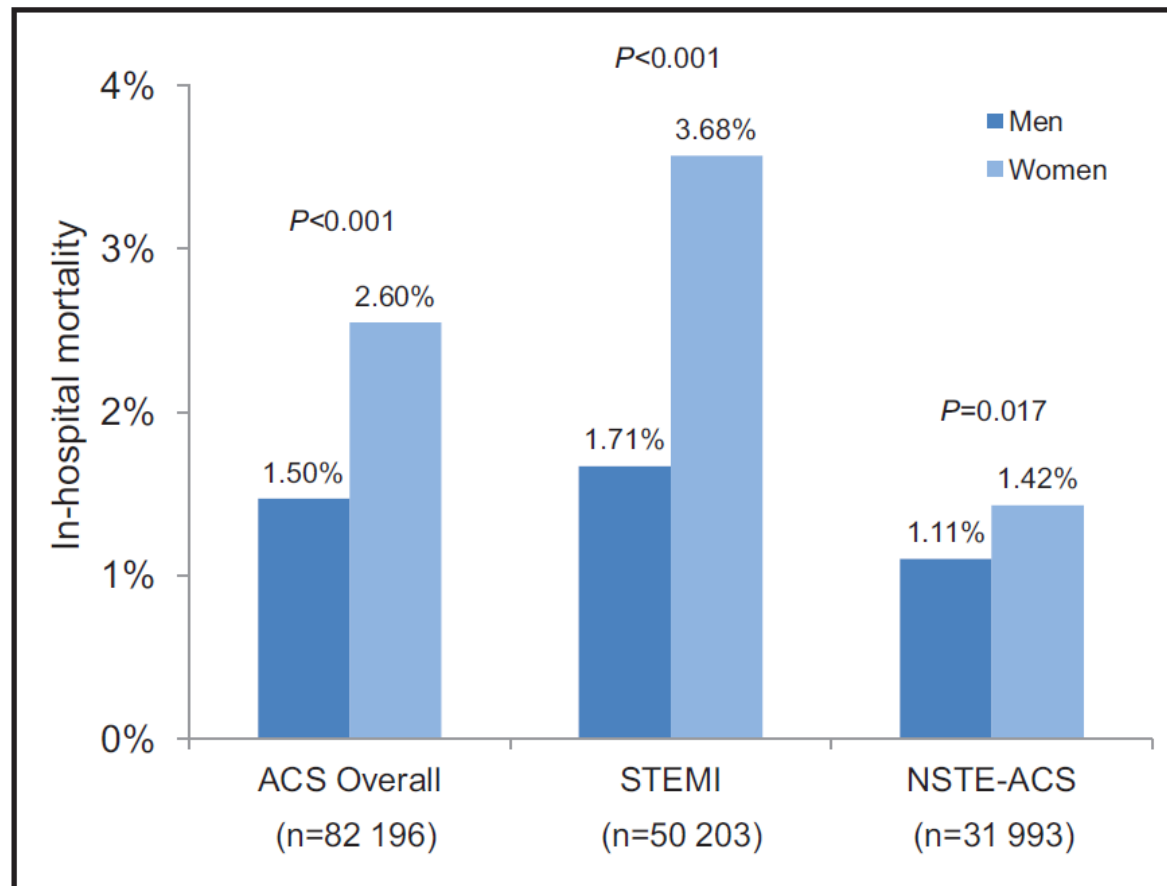
Annual rates of mortality for men and women per 1000 records.

Source, National Inpatient Sample Data, 2004 – 2014
N = 6,601,526



In-hospital mortality

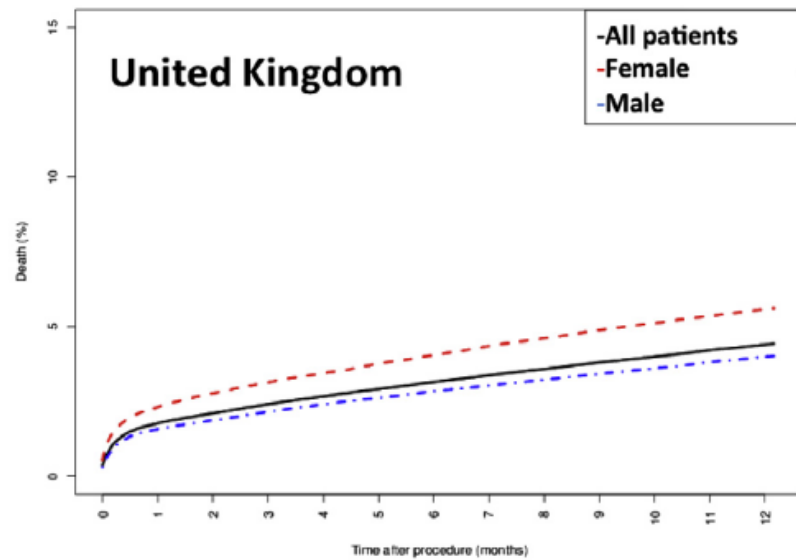
Source, CCC-ACS project, 2014 – 2018
N = 82,196



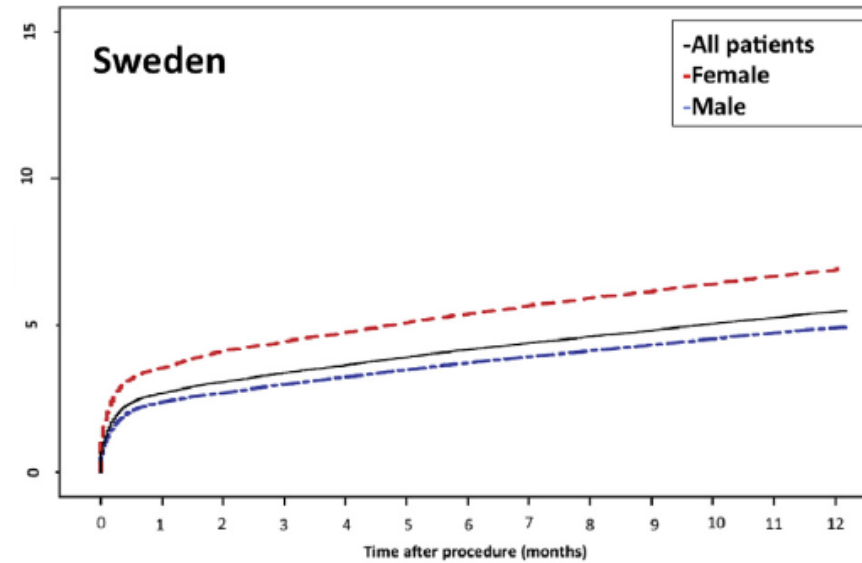
Hao Y, *Circulation* 2019

1 year all-cause mortality

Source, BCIS and the SCAAR registry, 2007 – 2011
 N = 368,492/89,769

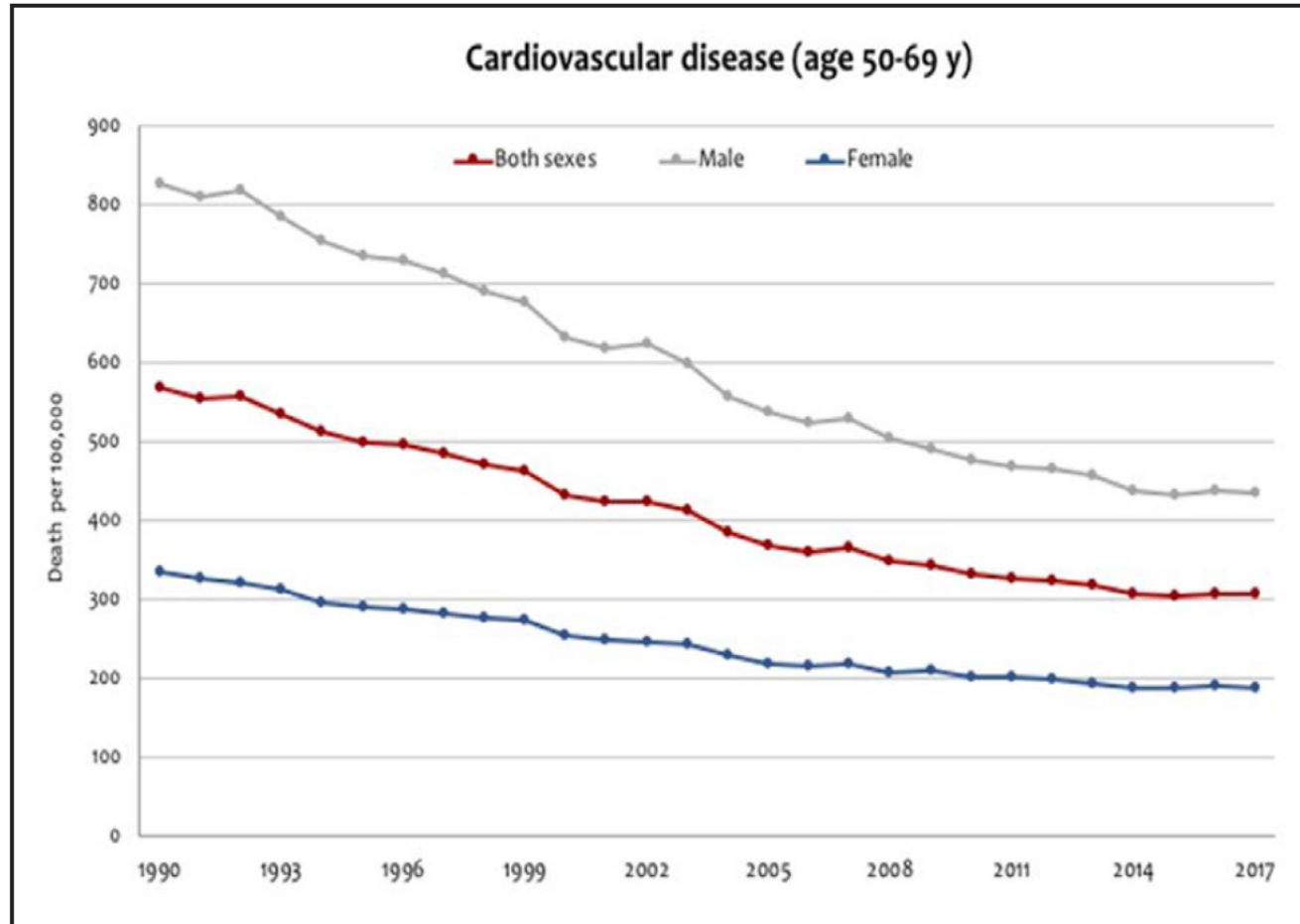


No. at risk	0 months	1 month	6 months	12 months
Female	85546	83586	82095	80744
Male	245913	242070	238954	236035



No. at risk	0 months	1 month	6 months	12 months
Female	24412	24189	22915	22533
Male	65357	62996	61331	61336

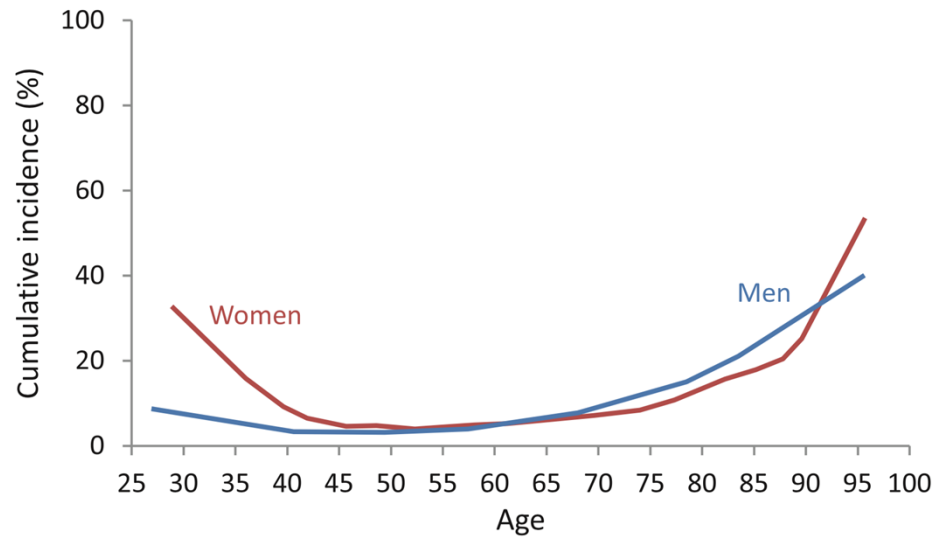
Cardiovascular mortality during 3 decades



Evolution of cardiovascular mortality between 1990 and 2017.

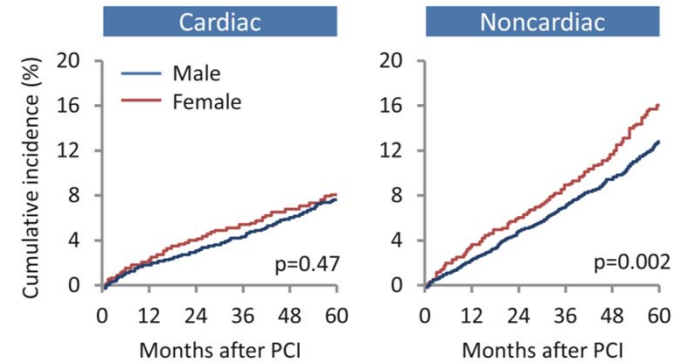
5-year cardiac death stratified by sex: no difference after adjustment

Source, Mayo PCI registry, 1991 – 2012
N = 23,127

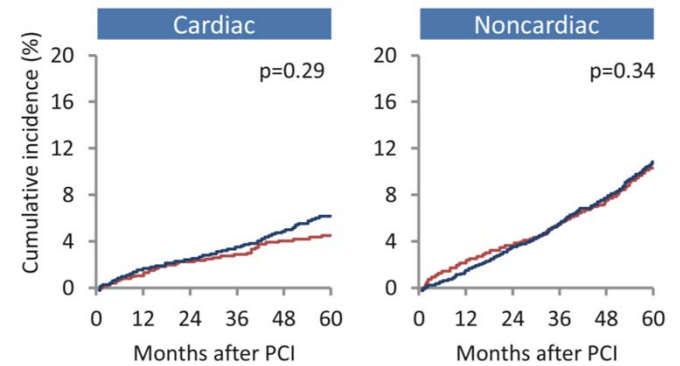


Men	11	32	144	383	846	1415	1948	2166	2432	2530	2128	1432	657	142	13
Women	3	10	45	99	231	363	483	669	848	1124	1180	987	582	190	28

2006-2012 – Unadjusted



2006-2012 – Adjusted



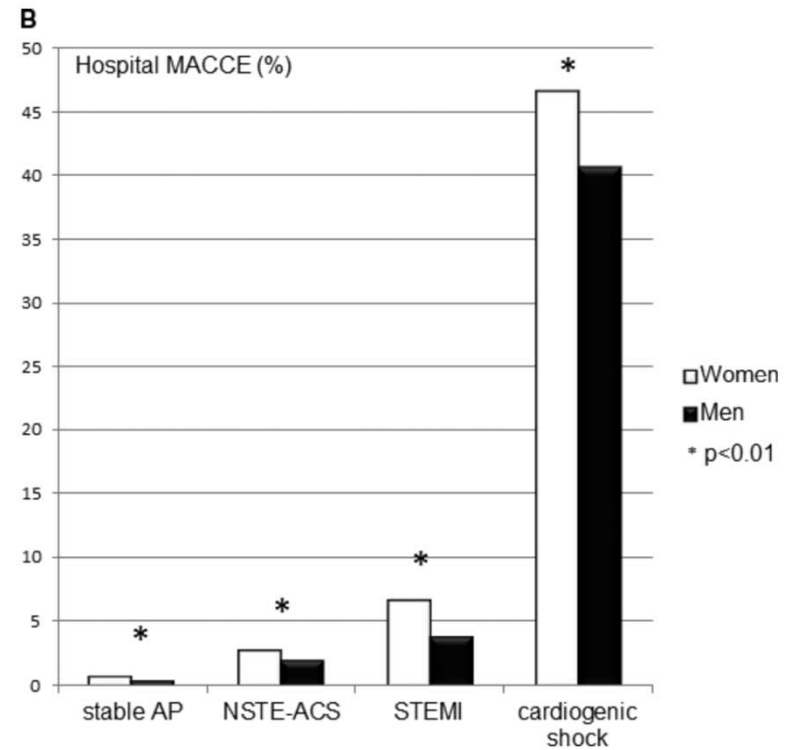
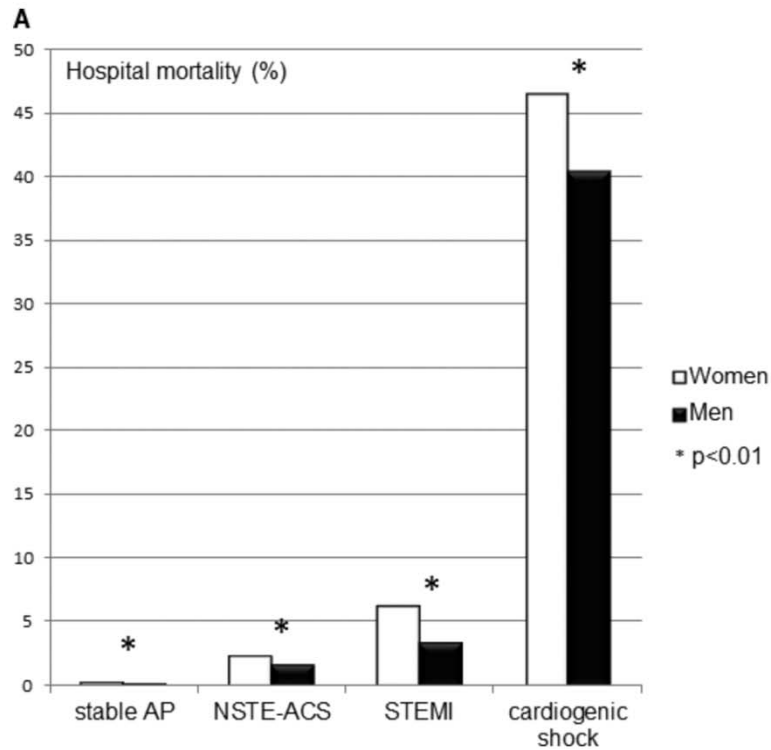
Raphael, Circ Int 2018

German data

Source, German PCI registry, 2007 – 2009

N = 185,312

Further analysis: sex difference (+) only in STEMI

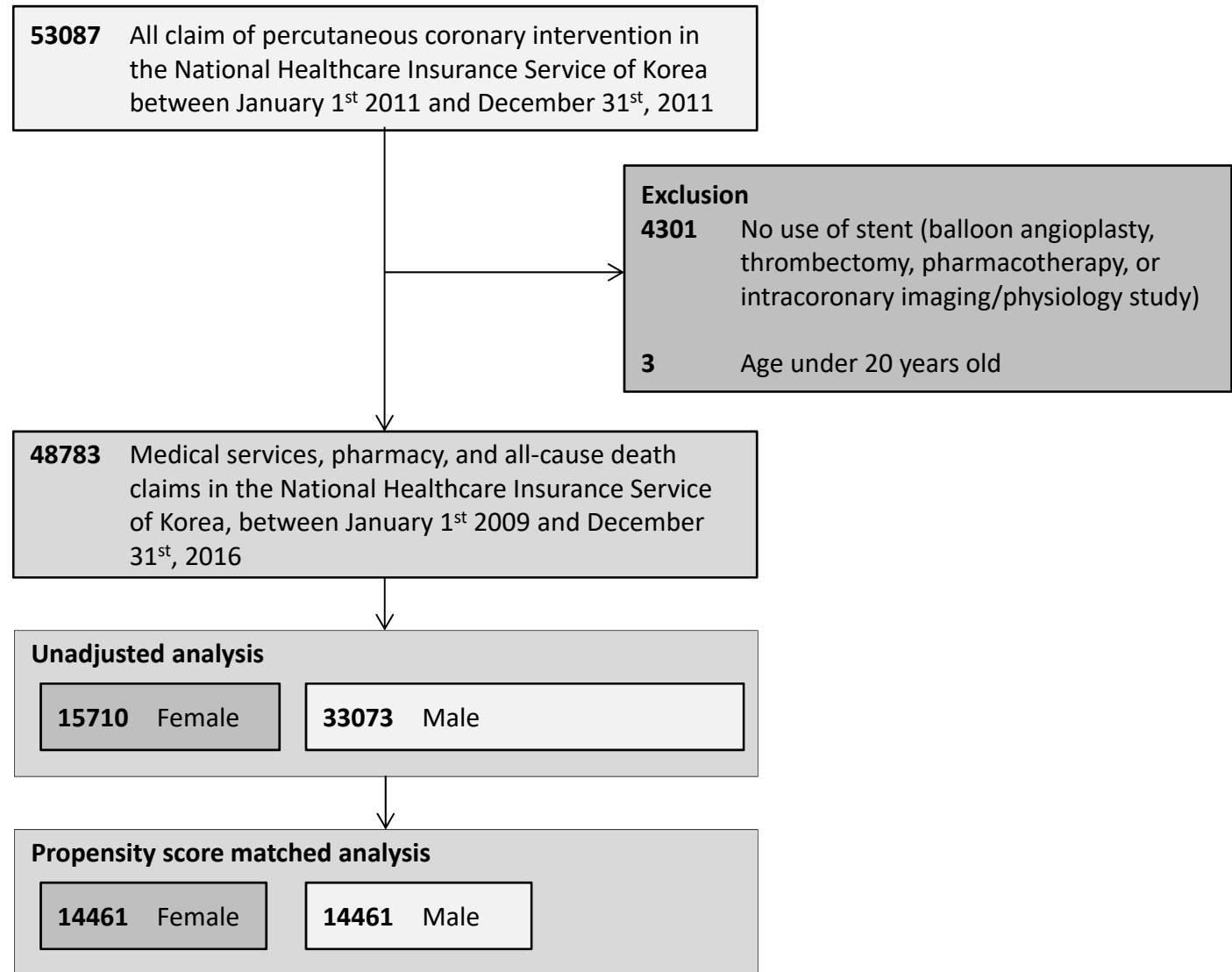


Heer, JAHA 2017

Aim of study

- To investigate the sex difference in the 5-year outcome after percutaneous coronary intervention using real-world data.

Study flow chart



Clinical outcomes

- ❖ Primary endpoint

- ❖ Death during 5 year follow-up

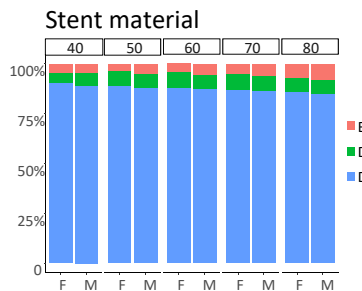
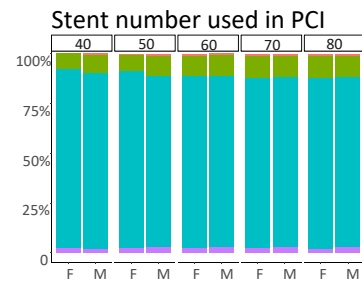
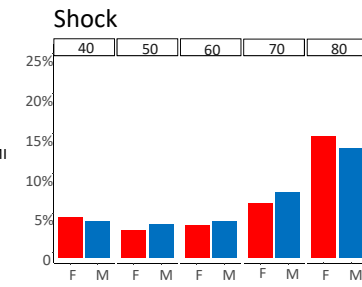
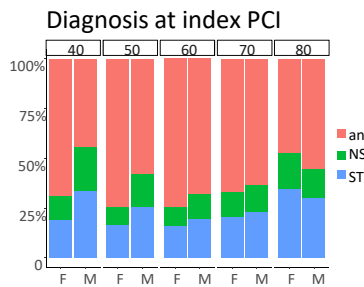
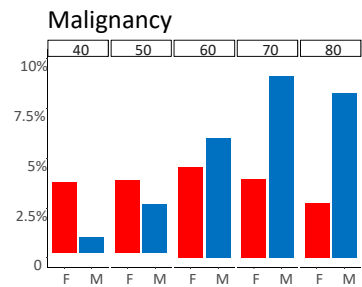
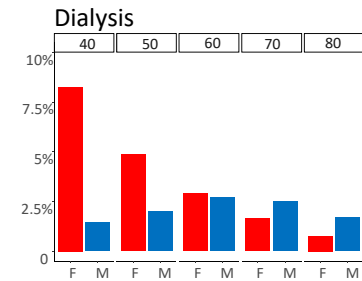
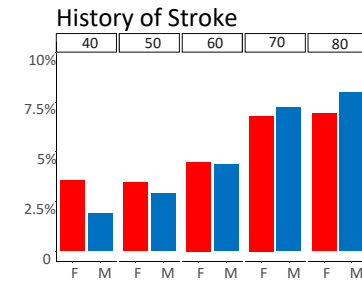
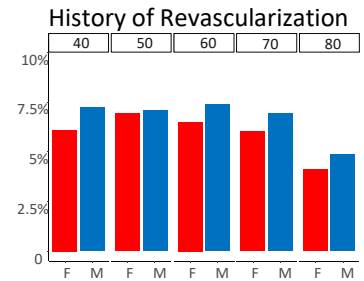
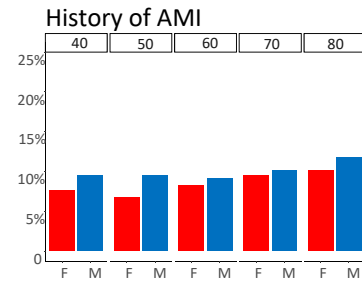
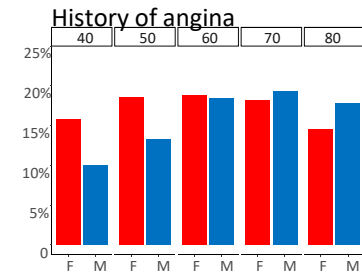
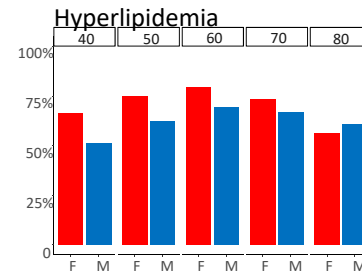
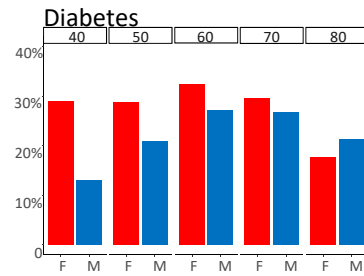
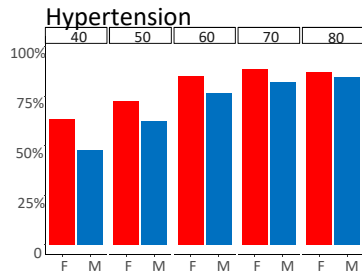
- ❖ Secondary end point

- ❖ Major adverse clinical event (MACE) defined as composite of death, repeat revascularization, critically ill cardiovascular status, or stroke, and each of MACE

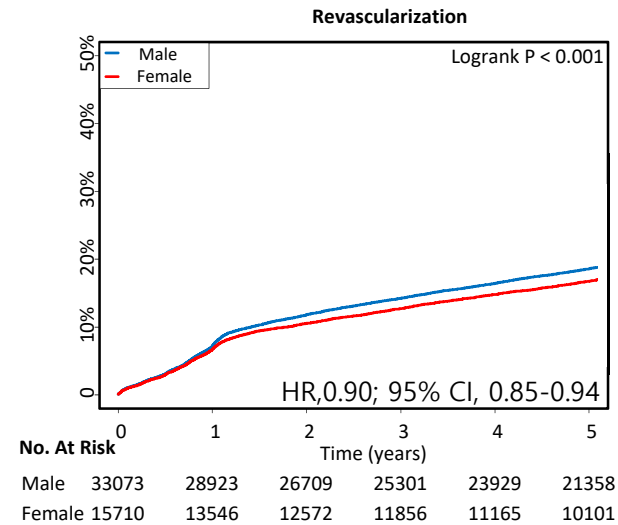
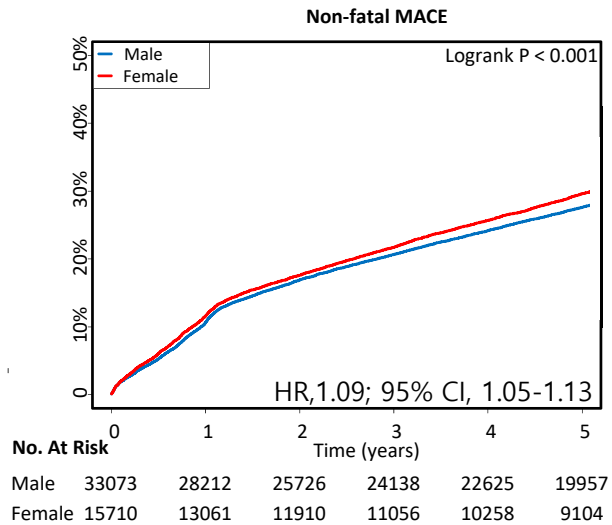
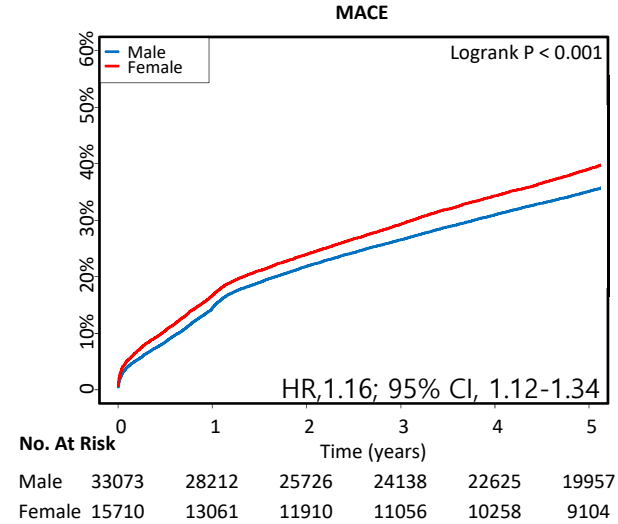
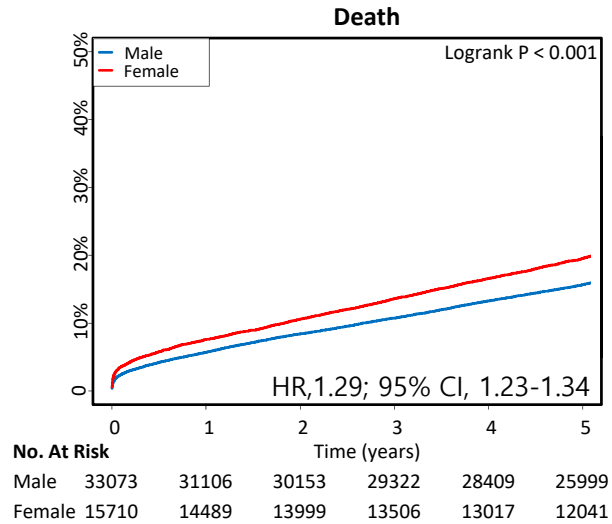
- ❖ Critically ill cardiovascular status defined by any claims that
Cardiogenic shock, which included resuscitation, endotracheal intubation and mechanical ventilation
Use of hemodynamic support device including IABP or ECMO

Baseline characteristics

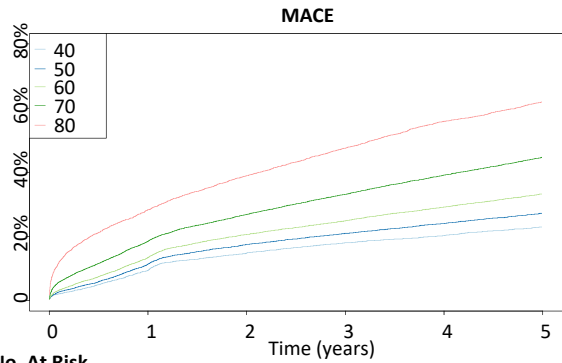
	Unadjusted				PSM stratified by age			
	Women	Men	p-value	SMD	Women	Men	p-value	SMD
N	15710	33073			14461	14461		
Demographics								
Age	69.71 (9.70)	61.97 (11.14)	<0.001	0.741	68.84 (9.49)	68.79 (9.45)	0.698	0.005
Clinical risk factors and prior medical history								
Hypertension	13314 (84.7)	23260 (70.3)	<0.001	0.351	12110 (83.7)	12213 (84.5)	0.101	0.019
Diabetes	4473 (28.5)	7609 (23.0)	<0.001	0.125	4085 (28.2)	4185 (28.9)	0.198	0.015
Hyperlipidemia	11434 (72.8)	21174 (64.0)	<0.001	0.189	10548 (72.9)	10584 (73.2)	0.643	0.006
Dialysis	390 (2.5)	734 (2.2)	0.075	0.017	385 (2.7)	414 (2.9)	0.315	0.012
Malignancy	614 (3.9)	1686 (5.1)	<0.001	0.057	611 (4.2)	590 (4.1)	0.556	0.007
Stroke	885 (5.6)	1465 (4.4)	<0.001	0.055	811 (5.6)	867 (6.0)	0.167	0.017
Resuscitation	28 (0.2)	78 (0.2)	0.241	0.013	23 (0.2)	27 (0.2)	0.671	0.007
Angina	2798 (17.8)	5277 (16.0)	<0.001	0.05	2662 (18.4)	2663 (18.4)	1	<0.001
AMI	1389 (8.8)	3187 (9.6)	0.005	0.027	1294 (8.9)	1375 (9.5)	0.104	0.019
Revascularization								
PCI	940 (6.0)	2323 (7.0)	<0.001	0.042	910 (6.3)	949 (6.6)	0.362	0.011
CABG	919 (5.8)	2257 (6.8)	<0.001	0.04	889 (6.1)	917 (6.3)	0.512	0.008
	25 (0.2)	84 (0.3)	0.049	0.021	25 (0.2)	42 (0.3)	0.05	0.024
Clinical presentation at index PCI								
Diagnosis			<0.001	0.15			0.529	0.013
Angina	10542 (67.1)	19831 (60.0)			9881 (68.3)	9838 (68.0)		
NSTEMI	1912 (12.2)	5103 (15.4)			1698 (11.7)	1668 (11.5)		
STEMI	3256 (20.7)	8139 (24.6)			2882 (19.9)	2955 (20.4)		
Critically ill cardiovascular status								
Resuscitation	1064 (6.8)	1911 (5.8)	<0.001	0.041	899 (6.2)	891 (6.2)	0.864	0.002
Mechanical ventilation	435 (2.8)	908 (2.7)	0.906	0.001	368 (2.5)	378 (2.6)	0.738	0.004
IABP	897 (5.7)	1610 (4.9)	<0.001	0.038	759 (5.2)	767 (5.3)	0.854	0.002
ECMO	319 (2.0)	647 (2.0)	0.606	0.005	264 (1.8)	277 (1.9)	0.602	0.007
	61 (0.4)	194 (0.6)	0.006	0.028	56 (0.4)	78 (0.5)	0.069	0.022
Procedural characteristics at index PCI								
Stent used			0.073	0.022	680 (4.7)	698 (4.8)		
BMS	733 (4.7)	1697 (5.1)			1114 (7.7)	1130 (7.8)		
DES 1st generation	1184 (7.5)	2431 (7.4)			12667 (87.6)	12633 (87.4)		
DES 2nd generation	13793 (87.8)	28945 (87.5)			1.09 (0.39)	1.09 (0.39)	0.833	0.002
Stent number used	1.09 (0.39)	1.09 (0.39)	0.112	0.015	1.09 (0.39)	1.09 (0.39)	0.695	0.005



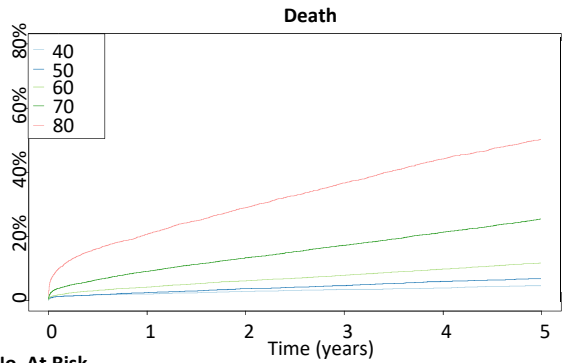
Clinical outcomes of crude group



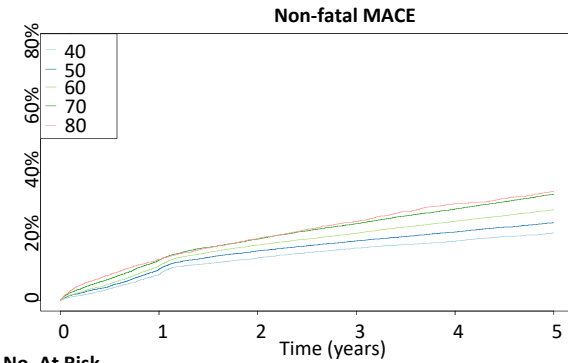
Clinical outcomes stratified according to ages



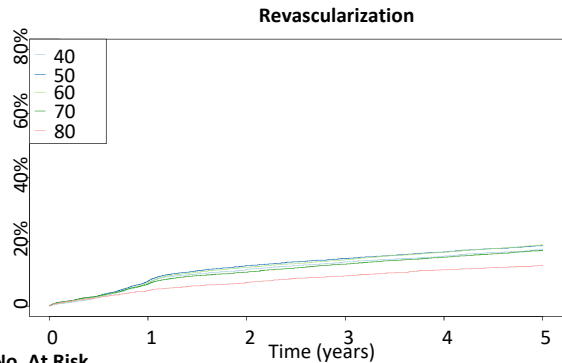
No. At Risk		0	1	2	3	4	5
40	5027	4533	4258	4083	3953	3477	
50	11237	9930	9228	8828	8456	7536	
60	14844	12820	11727	11073	10422	9381	
70	13718	11160	10015	9144	8320	7248	
80	3957	2830	2408	2066	1732	1419	



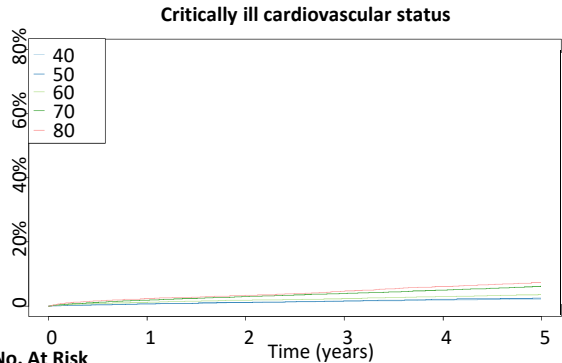
No. At Risk		0	1	2	3	4	5
40	5027	4903	4856	4810	4762	4303	
50	11237	10929	10769	10639	10468	9667	
60	14844	14185	13860	13570	13264	12438	
70	13718	12445	11868	11317	10745	9779	
80	3957	3133	2799	2492	2187	1853	



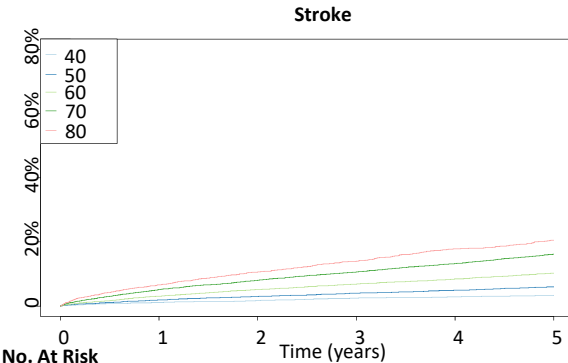
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No. At Risk		0	1	2	3	4	5
40	5027	4571	4316	4164	4042	3570	
50	11237	10093	9444	9103	8764	7893	
60	14844	13178	12232	11681	11121	10151	
70	13718	11632	10676	9928	9208	8208	
80	3957	2995	2613	2281	1959	1637	

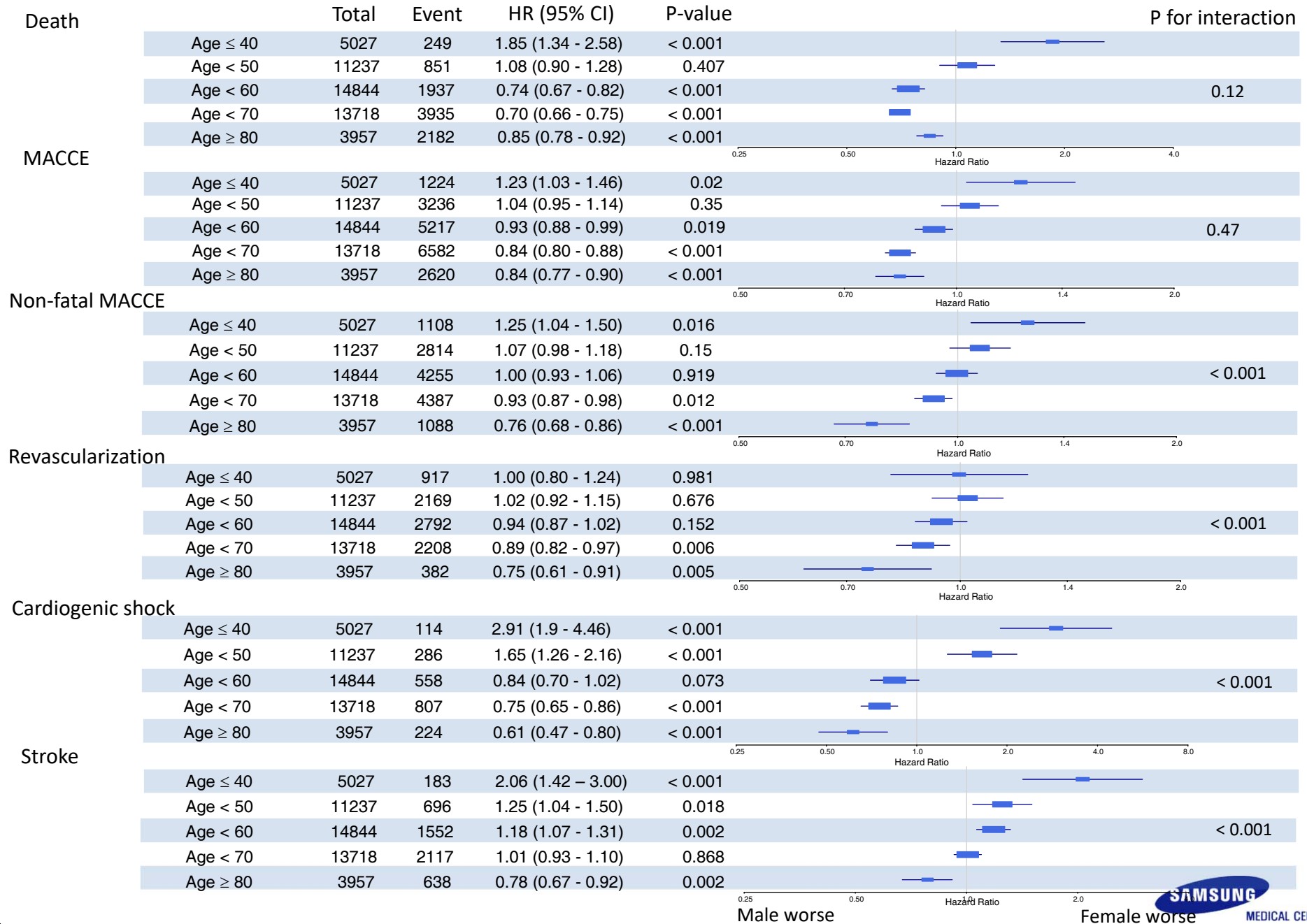


No. At Risk		0	1	2	3	4	5
40	5027	4899	4847	4798	4744	4285	
50	11237	10912	10751	10615	10445	9645	
60	14844	14166	13835	13544	13236	12409	
70	13718	12419	11837	11284	10709	9737	
80	3957	3128	2794	2486	2180	1848	



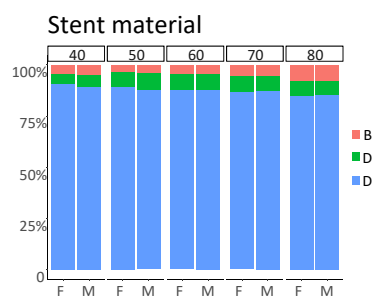
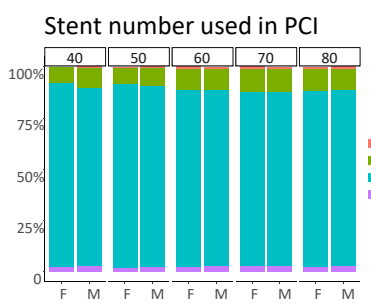
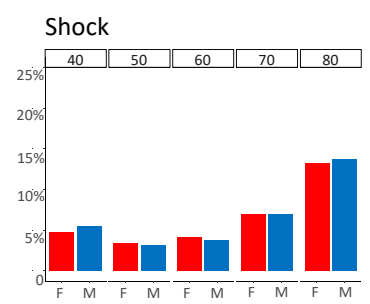
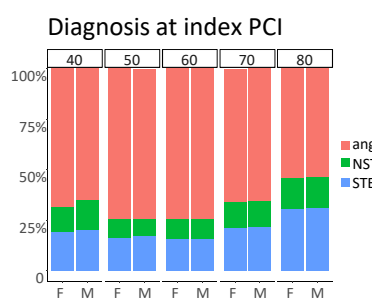
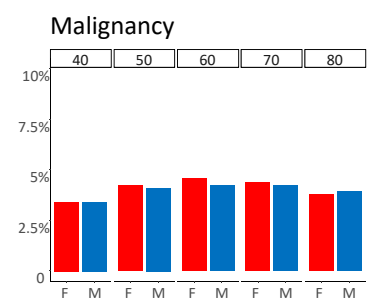
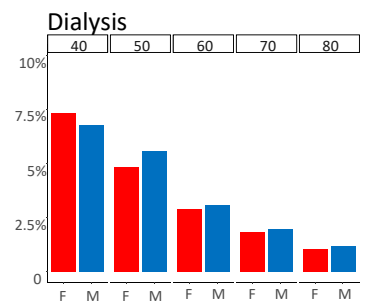
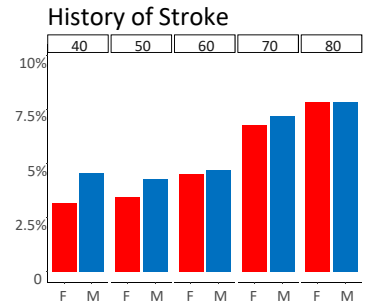
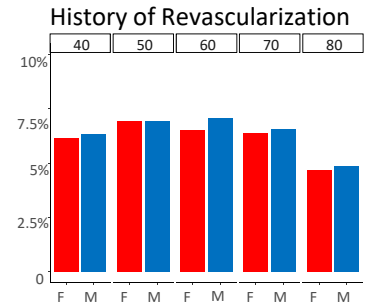
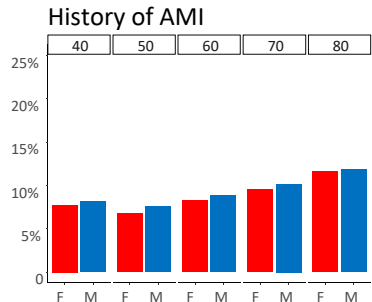
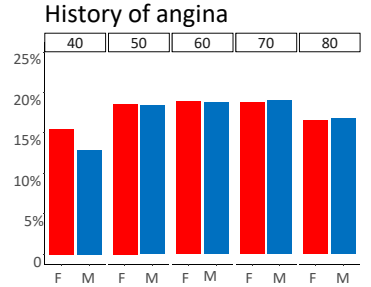
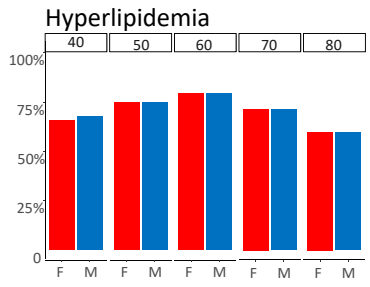
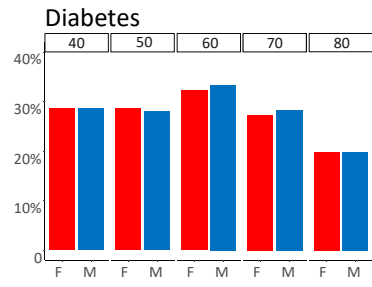
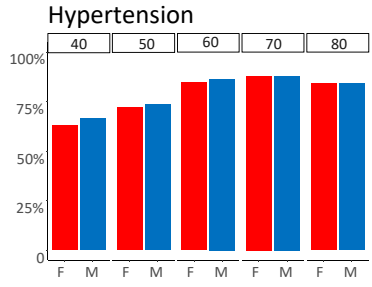
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HR of female compared to male stratified by age group

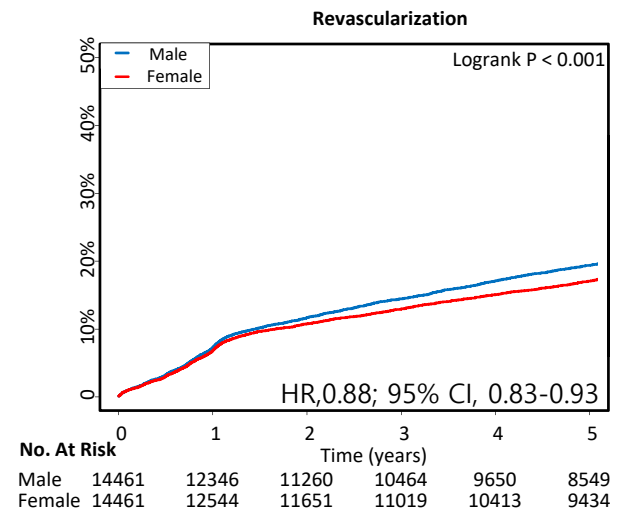
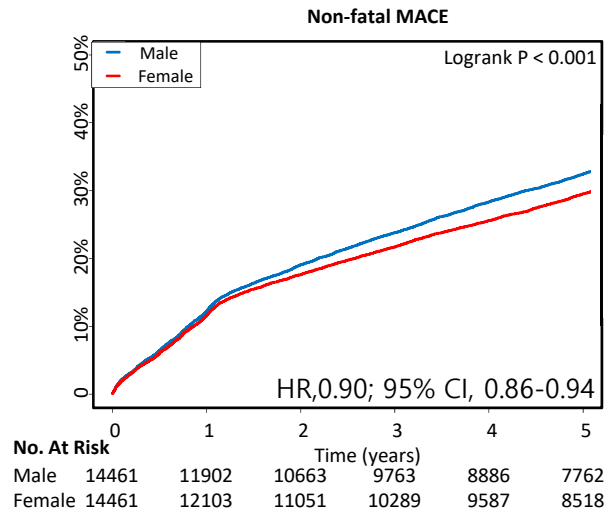
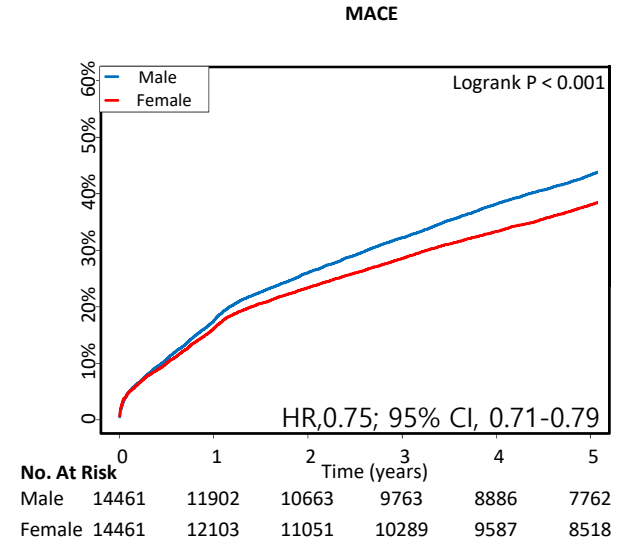
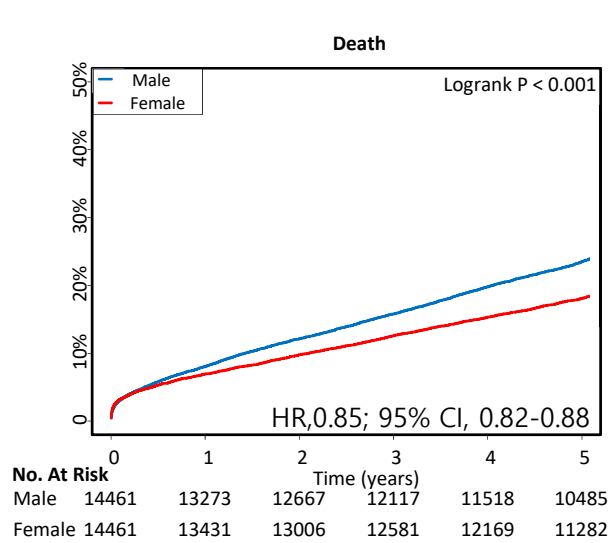


Baseline characteristics

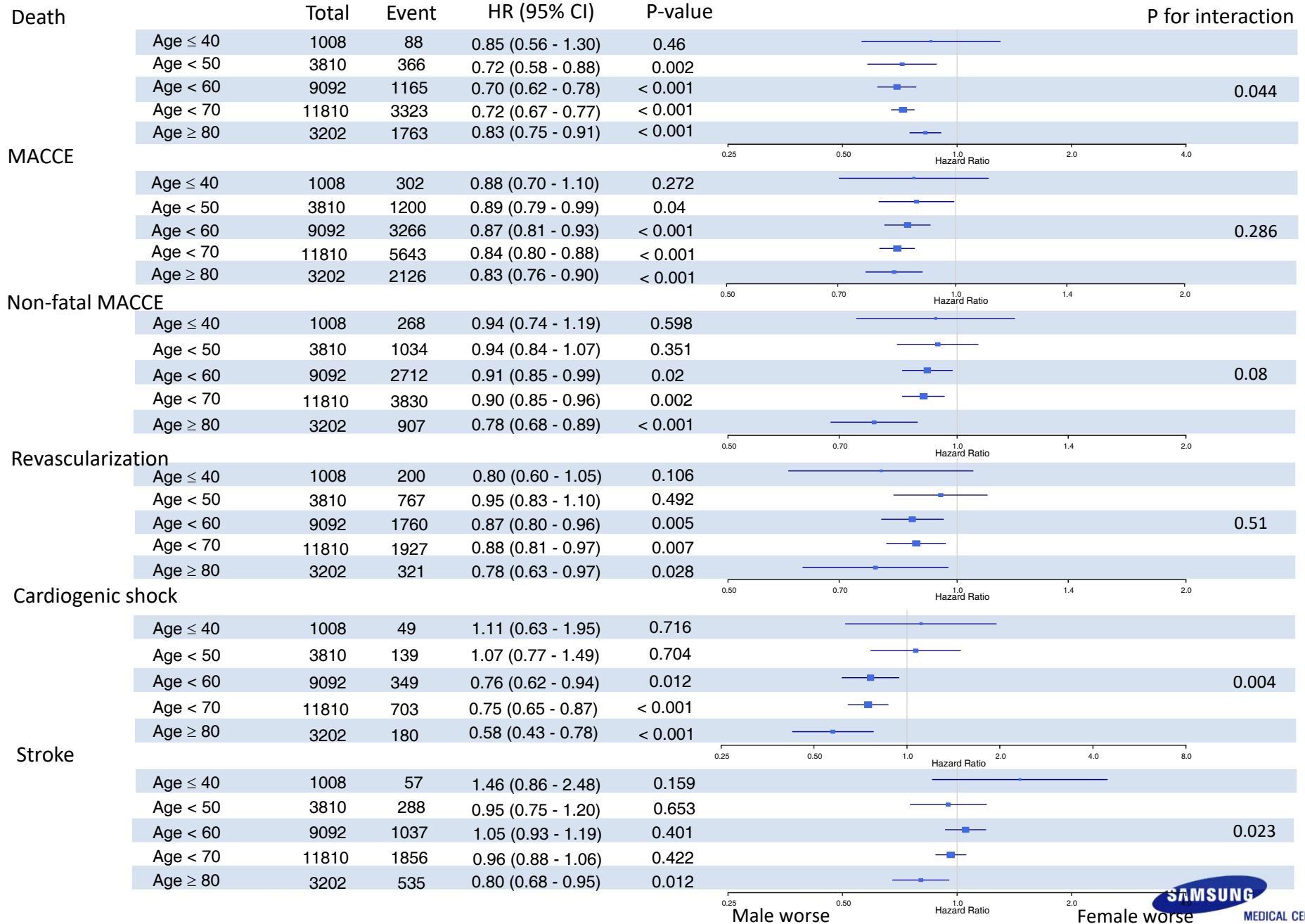
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Revascularization	940 (6.0)	2323 (7.0)	<0.001	0.042	910 (6.3)	949 (6.6)	0.362	0.011
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STEMI	3256 (20.7)	8139 (24.6)			2882 (19.9)	2955 (20.4)		
Critically ill cardiovascular status	1064 (6.8)	1911 (5.8)	<0.001	0.041	899 (6.2)	891 (6.2)	0.864	0.002
Resuscitation	435 (2.8)	908 (2.7)	0.906	0.001	368 (2.5)	378 (2.6)	0.738	0.004
Mechanical ventilation	897 (5.7)	1610 (4.9)	<0.001	0.038	759 (5.2)	767 (5.3)	0.854	0.002
IABP	319 (2.0)	647 (2.0)	0.606	0.005	264 (1.8)	277 (1.9)	0.602	0.007
ECMO	61 (0.4)	194 (0.6)	0.006	0.028	56 (0.4)	78 (0.5)	0.069	0.022
Procedural characteristics at index PCI							0.821	0.007
Stent used			0.073	0.022	680 (4.7)	698 (4.8)		
BMS	733 (4.7)	1697 (5.1)			1114 (7.7)	1130 (7.8)		
DES 1st generation	1184 (7.5)	2431 (7.4)			12667 (87.6)	12633 (87.4)		
DES 2nd generation	13793 (87.8)	28945 (87.5)			1.09 (0.39)	1.09 (0.39)	0.833	0.002
Stent number used	1.09 (0.39)	1.09 (0.39)	0.112	0.015	1.09 (0.39)	1.09 (0.39)	0.695	0.005



Clinical outcomes of propensity-score matched group



HR of female compared to male stratified by age group in PSM population



Why sex-disparities?

- Adjust with risk factors
- Worse presentation and Inadequate pharmacotherapy

Why sex-disparities?

- **Adjust with risk factors**
- Worse presentation and Inadequate pharmacotherapy

Higher prevalence of hyperlipidemia in older female

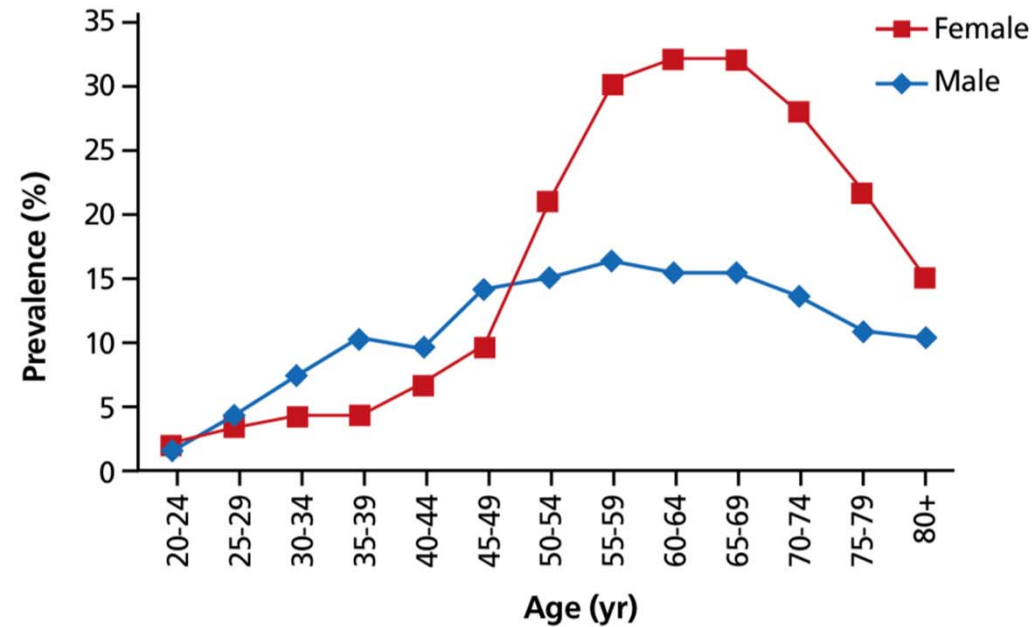
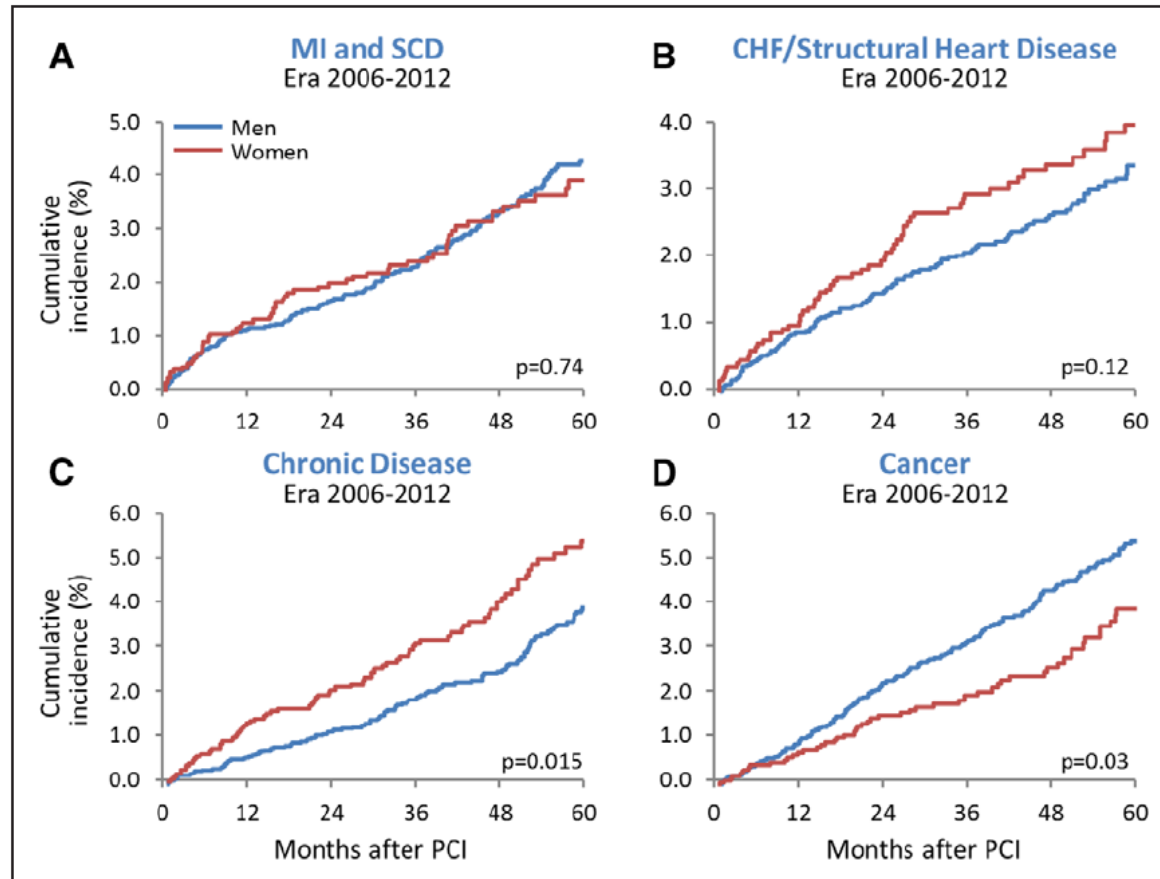


Figure 1. Sex and age-specific prevalence of hypercholesterolemia among Korean adults. Definition of total cholesterol: ≥ 240 mg/dL or use of lipid-lowering drugs (Data from Ministry of Health and Welfare; Korea Centers for Disease Control and Prevention. Korea health statistics 2012: Korea National Health and Nutrition Examination Survey (KNHANES V-3). Seoul: Ministry of Health and Welfare; 2013) [6].

Higher prevalence of chronic disease in female

Source, Mayo PCI registry, 1991 – 2012
N = 23,127

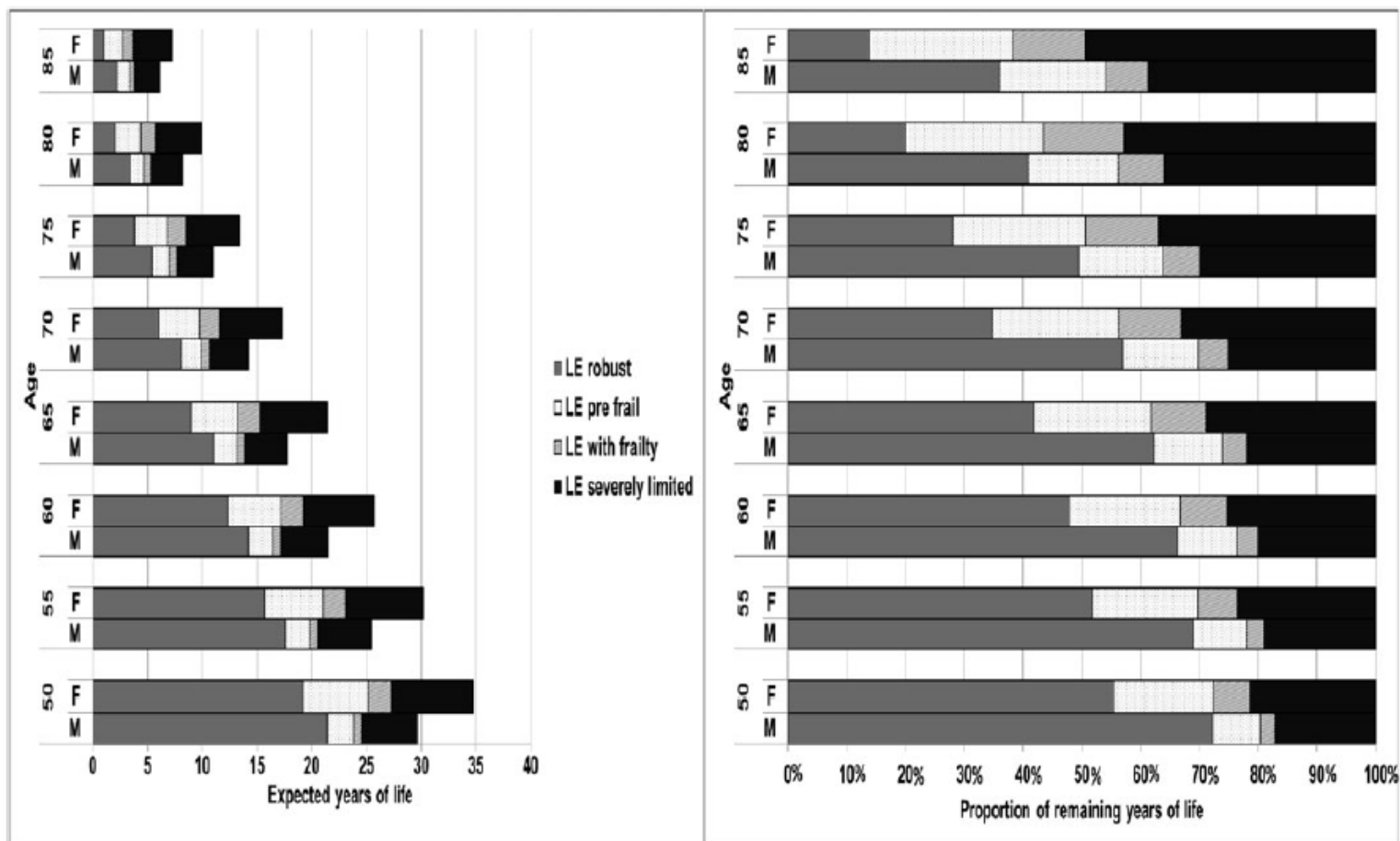


Raphael CE, *Circ Cardiovasc Interv* 2018

Longer life expectancy in elderly female with frailty

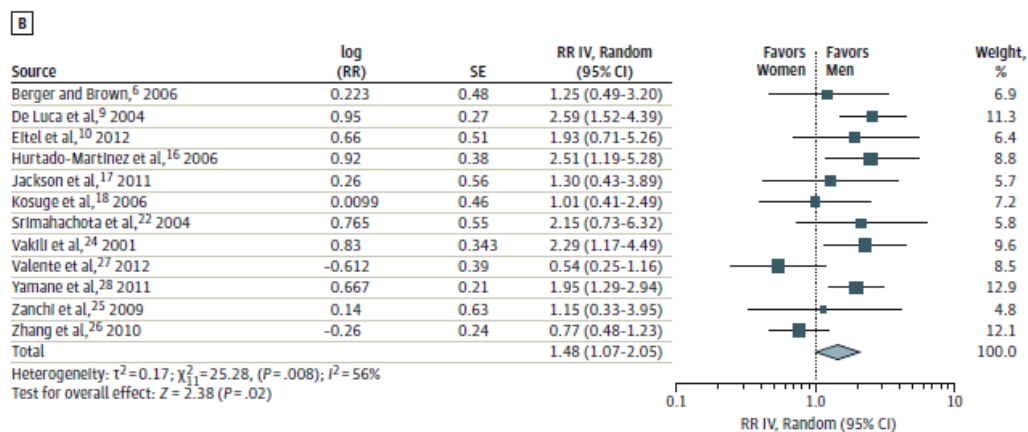
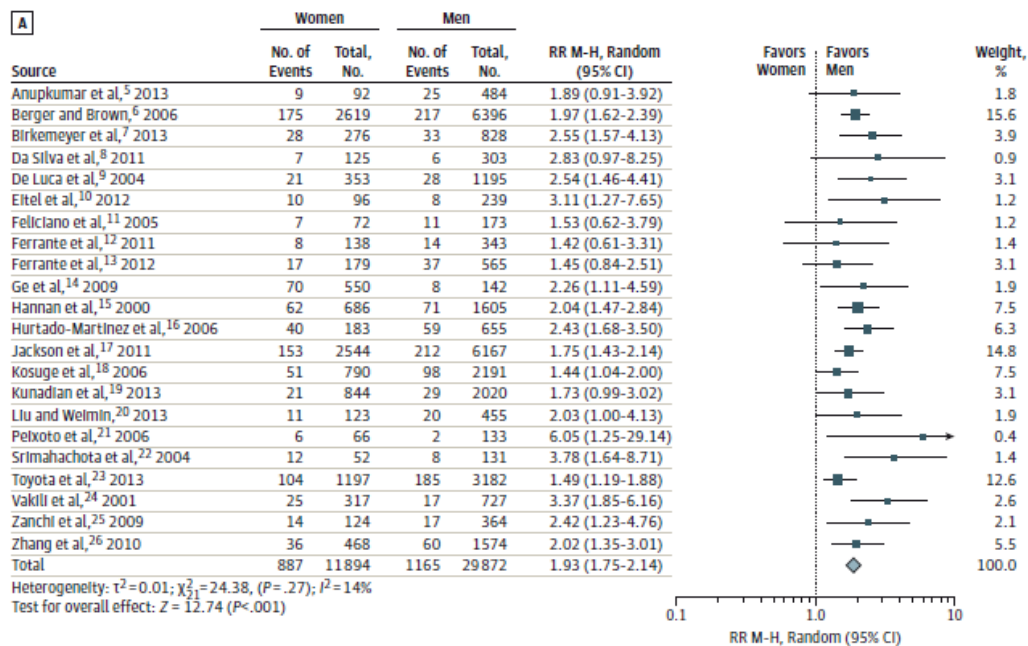
Source, Survey of Health, Ageing and Retirement in Europe, 2011 – 2012

N = 50,351



Romero-Ortuno R, *Age Ageing* 2014

Meta-analysis of inhospital mortality according to sex



Why sex-disparities?

- Adjust with risk factors
- Worse presentation and Inadequate pharmacotherapy

Chest pain in ACS

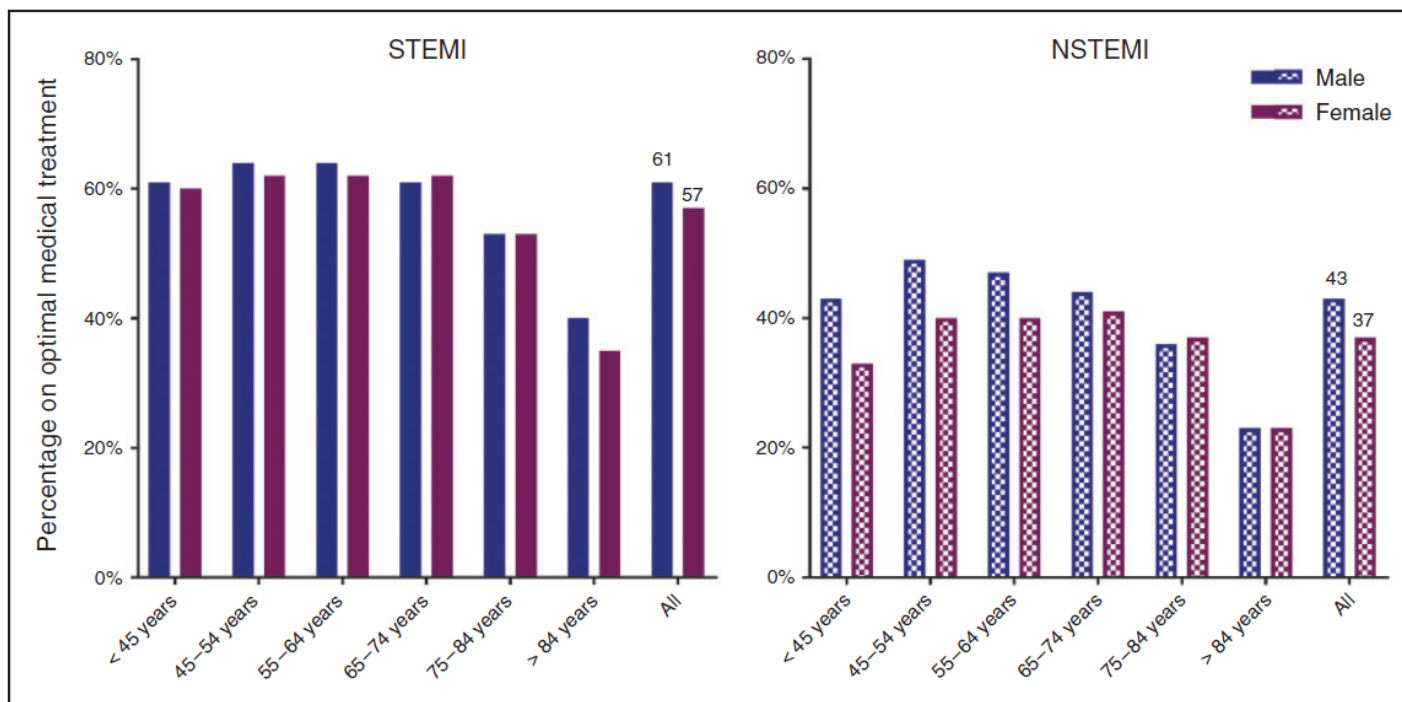
Source	Study Characteristic							Proportion Without Chest Pain, %		
	Study Description	Patient Population	Study Years	Sample Size	Mean Age, y	Age Adjusted	Race Adjusted	Men	Women	All
Brieger et al, ³⁷ 2004	GRACE Registry	ACS	1999-2002	20 881	65.8	Yes	No	7.3	10.6	8.4
Canto et al, ⁸ 2000	National MI Registry	MI	1994-1998	434 877	69.3	Yes	Yes	28.6	38.6	32.7
Canto et al, ³⁸ 2002	Alabama UA Registry	UA	1993-1999	4167	72.3	Yes	Yes	50.2	53.0	51.7
Culić et al, ³⁹ 2002	CCUs Croatia	MI	1990-1995	1996	58.8	Yes	No	12.4	20.3	14.8
Dorsch et al, ⁷ 2001	United Kingdom	MI	1995	2096	70.6	Yes	No	17.6	24.6	20.1
Goldberg et al, ⁴⁰ 1998	Worcester MI Study	MI	1986-1988	1360	67.7	Yes	No	18.0	23.0	20.0
Milner et al, ⁴¹ 2004	Worcester MI Study	MI	1997-1999	2073	70.2	Yes	No	30.9	45.8	37.3
Roger et al, ⁴² 2000	Olmsted County, Minnesota	UA	1985-1992	2271	63.0	Yes	No	25.0	19.0	22.0
Stern et al, ⁴³ 2004	26 Hospitals, CCU, Israel	ACS	2000	2113	64.9	Yes	No	18.7	29.7	21.7
Cumulative	...	...	...	...	...	...	...	27.4 (76 036 of 276 933)	37.5 (73 003 of 194 797)	31.6 (149 039 of 471 730)

Canto JG, Arch Intern Med 2007

Medical adherence between male and female.

Source, Dutch Hospital Care Information System, 2012 – 2013

N = 59,534

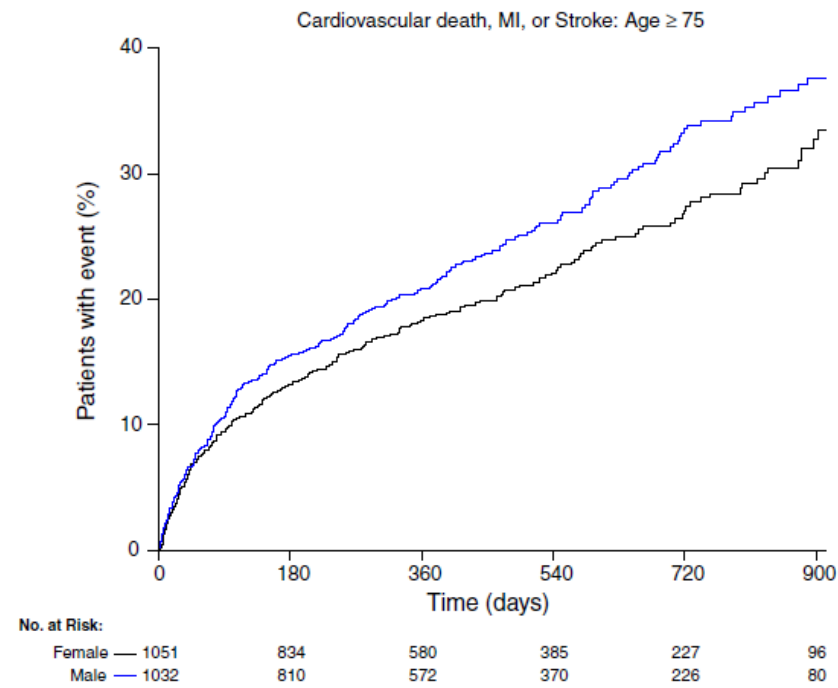


- Optimal medical adherence (aspirin , p2y12-inhibitor, statin, beta-blocker and ACEi/ARB)

Eindhoven DC, *Eur J Prev Cardiol* 2017

Outcome in the condition of controlled medical adherence

- TRILOGY ACS substudy



Clemmensen P, *Am Heart J* 2015

Outcome in the condition of controlled medical adherence

- DAPT substudy

Outcome	Women (N=2925)	Men (N=8723)	Log-Rank P Value	Two-Sided P Value for Difference	Adjusted P Value*
Stent thrombosis or MI	3.3%	3.0%	0.47		0.17
Stent thrombosis	0.71%	0.91%	0.23		0.87
ARC definite	0.67%	0.80%	0.39		0.99
ARC probable	0.04%	0.13%	0.20		0.86
MI	3.2%	3.0%	0.47		0.17
Stent thrombosis-related	0.67%	0.88%	0.23		0.85
MACCE (death, MI, stroke)	4.9%	5.1%	0.93		0.12
Death	1.1%	1.9%	0.01		0.06
Cardiac	0.50%	1.0%	0.004		0.13
Vascular	0.11%	0.08%	0.75		0.34
Noncardiovascular	0.54%	0.76%	0.46		0.11
All stroke	1.0%	0.75%	0.13		0.30
Ischemic stroke	0.71%	0.56%	0.28		0.46
Hemorrhagic stroke	0.29%	0.18%	0.19		0.12
Type uncertain	0.04%	0.01%	0.43		1.0

Limitations

- ❖ The source data was administrative claims which lack of specific codes for specific conditions and may not capture patient reported outcome.
- ❖ The detailed clinical data including severity of disease, laboratory tests, or life styles such as smoking were not available.
- ❖ The results of cardiac biomarkers, electrocardiography, or coronary angiography were not available in administrative database, hence the exact clinical presentation could not be explained.

Conclusions

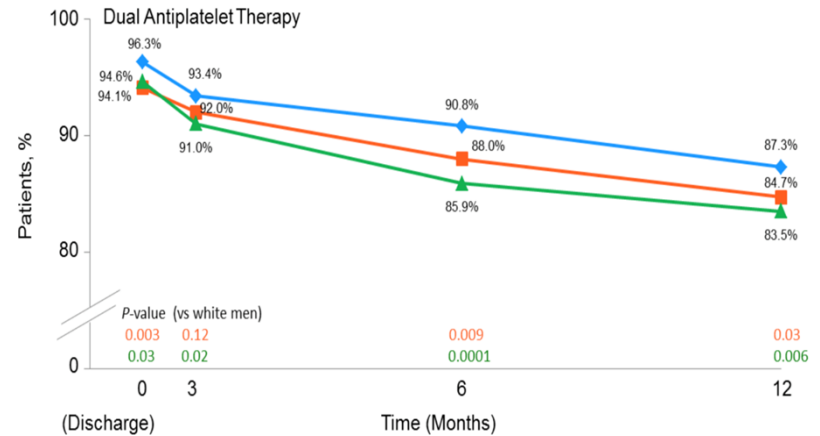
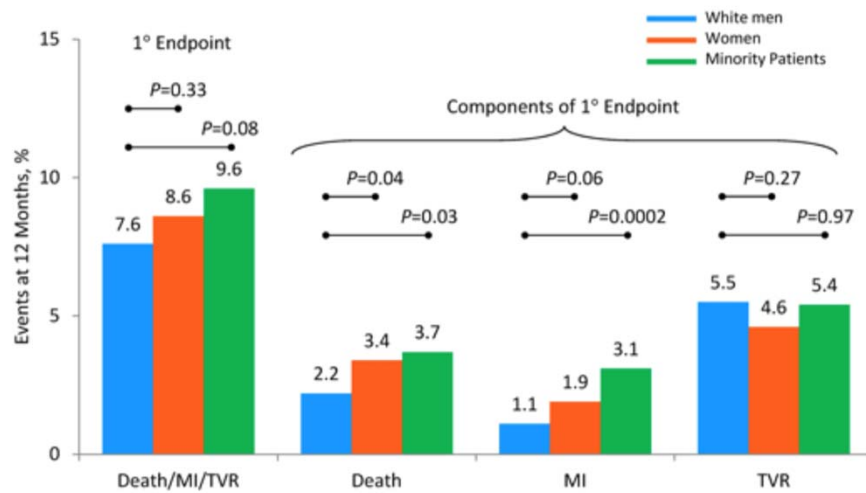
- ❖ Female generally showed worse outcome after PCI.
- ❖ After adjustment of baseline conditions, female showed better outcome than male.
- ❖ The apparent higher risk of female was affected by older age and accompanying higher comorbidities than male.

THANK YOU!

Similar primary endpoint but higher non-stent related MI

Source: PLATINUM Diversity and PROMUS Element Plus Post-Approval Study Pooled Analysis

1-year FU
N= 1,501

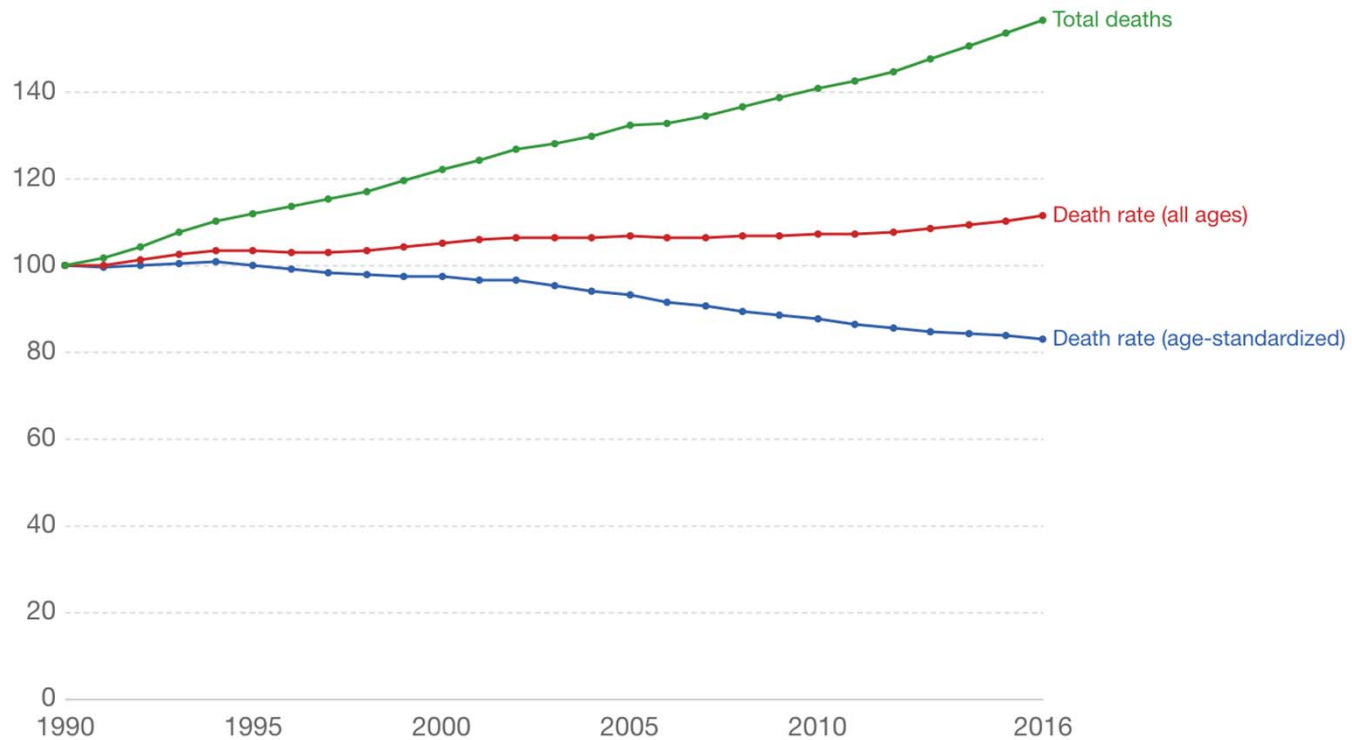


Batchelor, JAMA Cardiol 2017

Increased total death but decreased age-standardized death rate

Cancer deaths, rate and age-standardized rate index, World

Index of absolute number of cancer deaths, the all ages death rate (measured as the number of deaths per 100,000) and age-standardized death rate (assuming a constant population age structure). Figures are indexed to the year 1990, where deaths and rates in 1990 are equal to 100.



Source: OurWorldinData based on IHME, GBD

CC BY-SA

Clinical outcomes

	Crude population				Propensity-score matched population			
	Female (N = 15710)	Male (N = 33073)	Unadjusted HR (95% CI)	P-value	Female (N = 14461)	Male (N = 14461)	Propensity-score adjusted HR (95% CI)	P-value
Death	3430 (21.8)	5724 (17.3)	1.29 (1.23-1.34)	<0.001	2930 (20.3)	3775 (26.1)	0.85 (0.82 - 0.88)	<0.001
MACE	6579 (41.9)	12300 (37.2)	1.16 (1.12-1.19)	<0.001	5889 (40.7)	6648 (46.0)	0.75 (0.71 - 0.79)	<0.001
Non-fatal MACE	4570 (29.1)	9082 (27.5)	1.09 (1.05-1.13)	<0.001	4227 (29.2)	4524 (31.3)	0.90 (0.86 - 0.94)	<0.001
Revascularization	2507 (16.0)	5961 (18.0)	0.90 (0.85-0.94)	<0.001	2370 (16.4)	2605 (18.0)	0.88 (0.83 - 0.93)	<0.001

Higher prevalence of several comorbidities in female

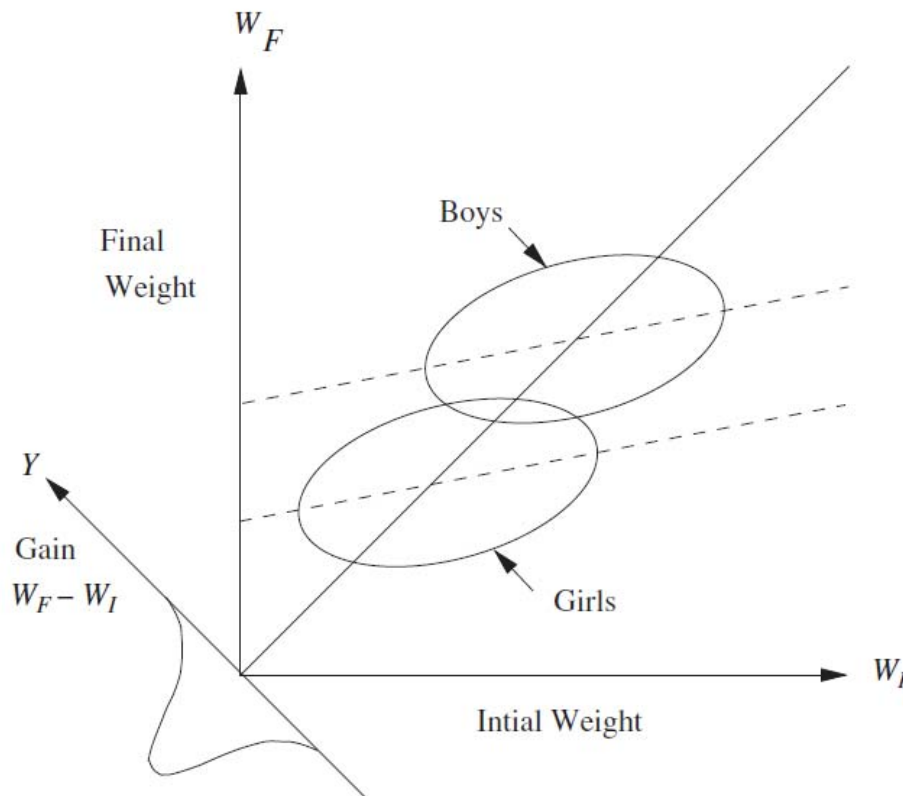
Table 2. Prevalence of Chronic Medical Conditions in Men and Women; Change in Log Odds of Medical Condition with a 1-Year Increase in Age (Slope) Across the Age Span 65 to 100 for Each Sex; Age and Sex Interaction

Medical Condition	Women,%	Men,%	P-Value ^a	Women, Slope Age ^b	Women, P-Value ^c	Men, Slope Age	Men, P-Value ^c	Age by Sex, P-Value ^d
Atrial fibrillation	11	14	.01	0.029	<.001	0.034	<.001	.91
Anemia	20	17	.005	0.013	.004	0.019	.02	.91
Arthritis	35	26	<.001	0.026	<.001	0.036	<.001	.58
Atherosclerosis	20	24	<.001	0.014	.002	0.012	.08	.91
Benign prostatic hyperplasia	NA	13	NA	NA	NA	0.027	.003	NA
Congestive heart failure	21	18	.003	0.020	<.001	0.024	.002	.91
Constipation	10	10	.75	0.007	.28	0.007	.53	.96
Chronic obstructive pulmonary disease	14	20	<.001	-0.029	<.001	-0.015	.06	.45
Cerebrovascular disease	19	24	<.001	-0.017	<.001	-0.020	.006	.91
Dementia	52	45	<.001	0.035	<.001	0.034	<.001	.95
Depression	37	31	<.001	-0.005	.13	-0.008	.21	.91
Diabetes mellitus	23	26	.002	-0.056	<.001	-0.033	<.001	.01
Gastroesophageal reflux disease	23	23	.66	3×10^{-4}	.98	-0.007	.38	.82
Hypertension	56	53	.08	0.005	.22	-0.018	.003	.006
Lipid disorder	9	11	.03	-0.045	<.001	-0.046	<.001	.95
Osteoporosis	21	5	.001	0.028	<.001	0.022	.17	.91
Parkinson's disease	6	10	<.001	-0.045	<.001	0.007	.52	<.001
Peripheral vascular disease	11	14	<.001	0.001	.96	-0.005	.62	.91
Renal failure	3	5	<.001	-0.027	.006	-0.010	.52	.81
Thyroid disorders	20	9	<.001	0.011	.008	0.037	.002	.11
All vascular disease	41	49	<.001	-7×10^{-5}	.98	-0.002	.67	.91

Why sex-disparities?

- Adjust with risk factors, stent number, ACS/no n-ACS
- Worse clinical presentation and inadequate pharmacotherapy?
- Lord's paradox

Lord's paradox



How how the
d if there had

“filled differences”

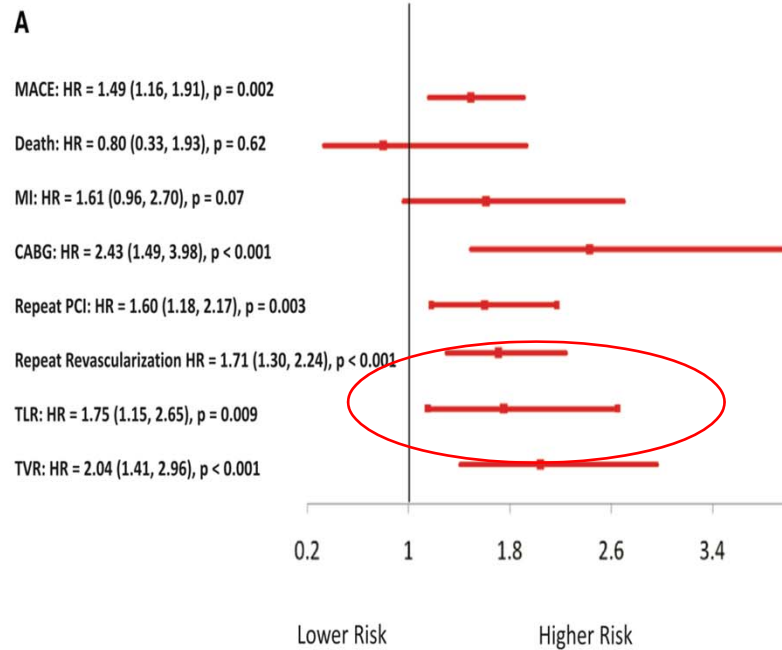
Statistician 1 :
Weight gain between boys and girls shows
no differences (Solid line)

Statistician 2 :
Weight gain between boys and girls shows
differences (Dotted line) after initial weight
adjustment.

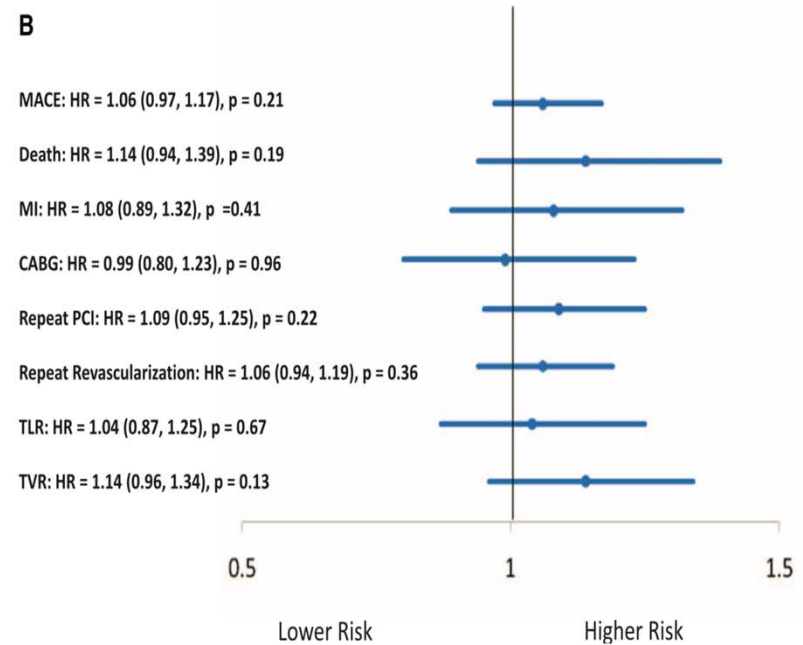
Young women have less severe CAD but increased risk of TLF/TVF

Source, NHLBI dynamic PCI registry, 1997 – 2006
 N = 10963

Women age < 50 vs men age < 50



Women age >= 50 vs men age >= 50



Epps, Circ Qual Outcomes 2016