DAPAGLIFOZIN PRESCRIPTION PRACTICE IN PATIENTS WITH CHRONIC HEART FAILURE - 4CPS-254

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Background and importance

Dapagliflozin is a sodium-glucose cotransporter 2 (SGLT2) inhibitor authorized by the Spanish Medication and Healthcare Products Agency for chronic symptomatic heart failure (HF) with reduced left ventricular ejection fraction (LVEF). In the pivotal study DAPA-HF, the risk of cardiovascular death or worsening of the HF was reduced with dapaglifozin compared with placebo.

Aim and objectives

Evaluate the use of dapagliflozin in a level four university hospital for HF indication according to the DAPA-HF study inclusion criteria, emergency room visits, and hospital readmissions due to HF decompensation, or death from any cause.

Materials and Methods

Retrospective study January-July 2021

VARIABLES: Gender, age, LVEF, NT-proBNP, standard therapy, NYHA class II-IV, readmissions/emergency room visits for HF, and death

Inclusion criteria of the DAPA-HF :

1. **LVEF ≤40%**
2. **NT-proBNP ≥600 pg/mL**
3. **NYHA class II-IV**
4. **Standard theraphy** →
   - **ACEI, ARB[1] or sacurbitril/valsartan**
   - **Beta-blockers**
   - **MA[2]**

[1]ACEI: angiotensin converting enzyme inhibitors; ARB: angiotensin II receptor blockers. [2]MA: mineralocorticoid antagonists

Results

N: 51 patients (20% female)
Median age: 71 (49-88) years

Adherence to all of the criteria: ✓30/51 patients (59%)

Follow-up (14 months)

- ✓ **Seventy-six percent (39/51) of patients continued with dapagliflozin at 14 months.**
- ✓ **10/51 visited an emergency room and 10/51 were readmitted for HF decompensation.**
- ✓ **The cause of death of three of the four patients who died was cardiovascular.**

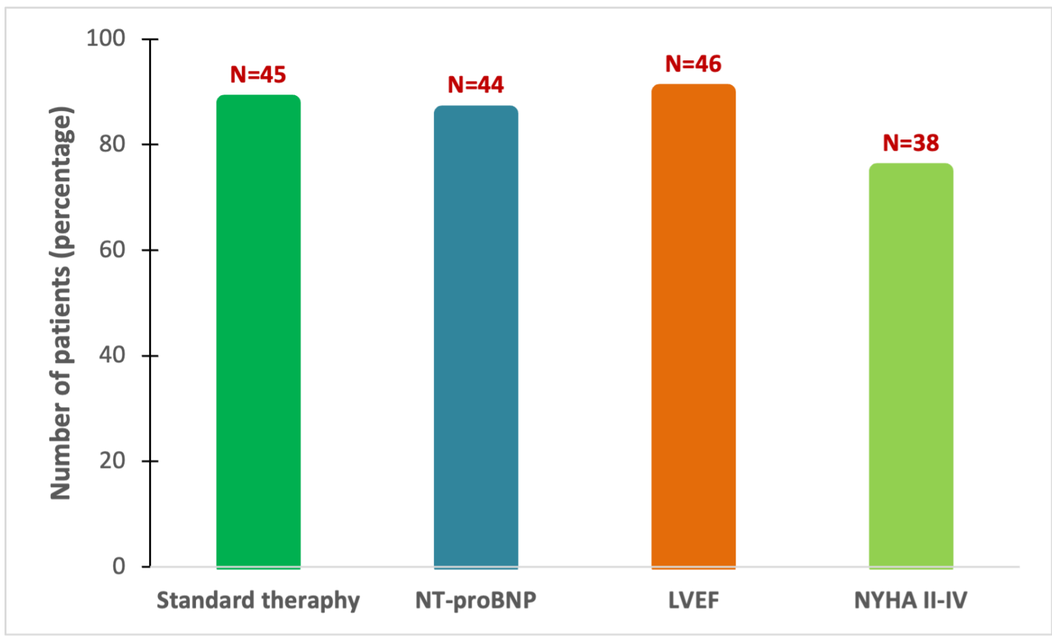

Figure 1. Adequation for each individual item.

Conclusion and relevance

More than half of the prescriptions for dapagliflozin met the criteria for inclusion in the study. The percentage of HF decompensation or death from cardiovascular causes was greater in our cohort than in the clinical trial sample.

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