DEMONSTRATING PRODUCT VALUE THROUGH A RETROSPECTIVE CHART REVIEW

CLIENT

A top tier pharmaceutical company, this client markets a broad portfolio of products and treatments supporting wellness and prevention, as well as treatment and cures for diseases across a broad range of therapeutic areas. The company has a long history of successfully developing cardiovascular treatments.

CHALLENGE

Venous thromboembolisms (VTE), including deep venous thrombosis (DVT) and pulmonary embolism (PE), is a potentially serious complication, occurring in 1% to 2% of hospitalized patients. VTE is an important cause of morbidity and mortality in hospitalized patients, affecting approximately 900,000 patients each year in the US. One-third of these patients suffer fatal pulmonary emboli, while two-thirds experience non-fatal DVT or PE. Patients with reduced mobility and the presence of one or more risk factors are considered to be at risk for developing VTE, and treatment guidelines recommend thromboprophylaxis with anticoagulants (heparin, low molecular weight heparins, warfarin, direct thrombin inhibitors, Factor Xa inhibitors) unless they have contraindications leaving them prone to bleeding events.

Low molecular weight heparins (LMWH) were developed to overcome some of the disadvantages of heparin. This client introduced a new LMWH to the US market, but faced resistance in adoption in some key market segments (e.g., rehabilitation hospitals).

SOLUTION

We collaborated with the client to develop a “formulary switch” program where, as of a certain date, all eligible patients requiring LMWH therapy at an institution were placed on the new treatment. We designed and managed this program, which was initiated at more than a dozen rehabilitation hospitals across the US. The switch program was instituted for nine months at each institution; data were collected via a chart review. The focus of the study was on effectiveness (prevention of VTE) and safety (bleeding events). Following the formulary change period a comparative (pre-post formulary switch) analysis was conducted for each institution.

OUTCOME

The study succeeded in demonstrating significant improvements in effectiveness – and comparable safety – with the new drug versus its predecessor. This provided the client with critical evidence needed to convince providers and formulary decision-makers of the value of their new treatment in a real-world setting. As a result, the new drug was placed on the formulary at each of these hospitals. This program led to numerous peer-reviewed publications and presentations at scientific meetings.