

Dronedarone in the real world - how safe it is?



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MY CONFLICTS OF INTEREST ARE

Grants and/or lecturing fees from:
Bayer, Boehringer Ingelheim,
Bristol Myers Squibb,
Pfizer, Sanofi, St Jude Medical

Two studies stopped for safety reasons

2008

ANDROMEDA

(heart failure) n=627

8.1% vs 3.8% died (p=0.03)

2011

PALLAS

(permanent AF) n=3,236

4.7% vs 2.4% died (p=0.049)







Antiarrhythmic drugs are problematic





Dronedarone was introduced in Sweden May 24, 2010

A registry study of the first 3 years

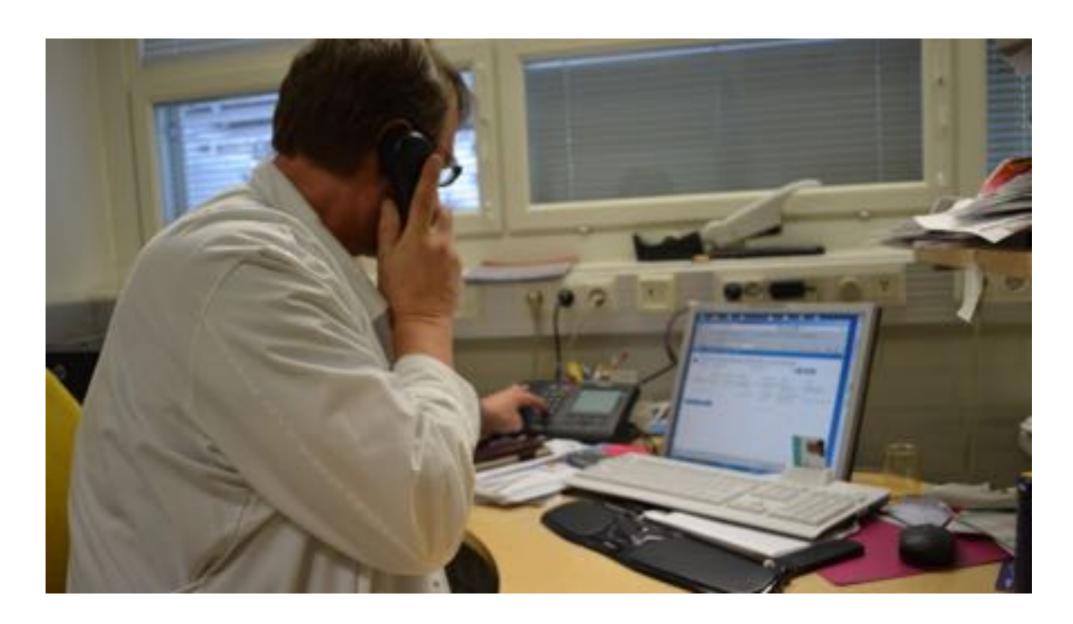
Friberg. Safety of Dronedarone in Routine Clinical Care, JACC 2014;63:2376

Linkage by civic registration number

CCYYMMDD-XXXX

All residents irrespective of citizenship

Used in all health care contacts and for all drug purchases



The Patient-register

all hospital and hospital affiliated open care since 1987

not primary care



The Cause of Death register



The Drug register

all prescribed and dispensed drugs in Sweden since 2005

not over-the-counter medication and drugs used in hospitals

All patients with
AF
in the Patient register
2010-2012

n=174,995





Dronedarone (ever)

n=4,856

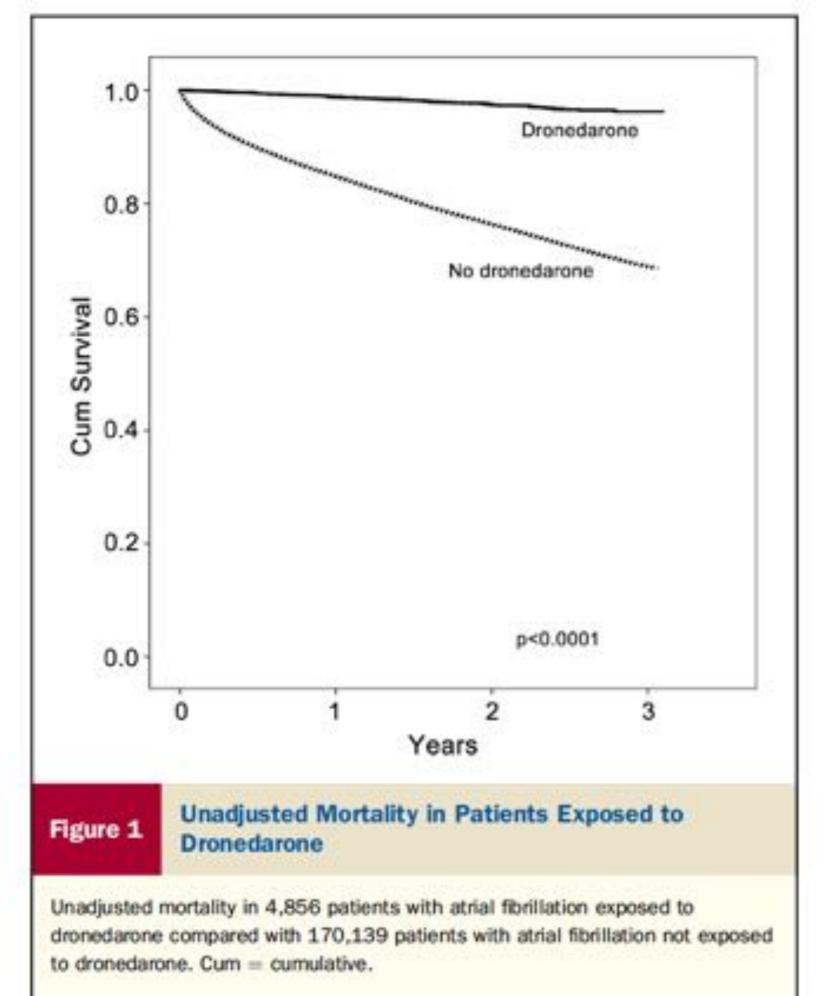
No dronedarone (never)

n=170,139

128 died

(annual mortality 1.3%)





Annual mortality (ITT)

Dronedarone 1,3%
No dronedarone 14,0%

Friberg. JACC 2014;63:2376



128 died

(annual mortality 1.3%)

66 had stopped taking dronedarone (medication only lasting 25% of the time at risk)

Dronedarone-patients were

much younger and healthier





| | Dronedarone (n=4,856) | No Dronedarone (n=170,139) |
|--|--------------------------|----------------------------|
| Age | <i>66</i> | 76 |
| CHA ₂ DS ₂ -VASc | 2.5 | <i>3.8</i> |
| HAS-BLED | 1.9 | 2.6 |

Like comparing apples and oranges

| | HR | 95% CI |
|--------------------------|------|-----------|
| Univariate | 0.10 | 0.08-0.12 |
| Adjusted for age and sex | 0.24 | 0.20-0.29 |
| Multivariable adjustment | 0.29 | 0.25-0.35 |





Propensity score matching



To make groups as similar as possible with regard to background factors

Propensity score matching



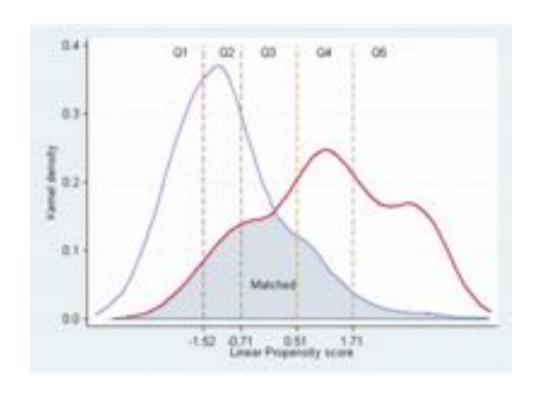
Step 1.

Multivariate logistic regression

Dependent variable: to get dronedarone

Independent variables: everything that may affect decisions about prescriptions

Propensity score matching

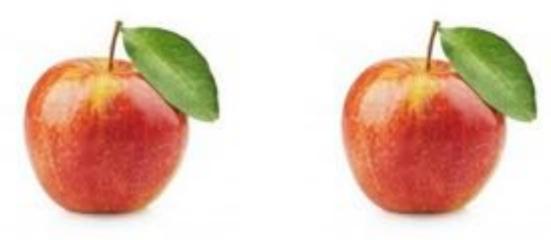


Step 2.

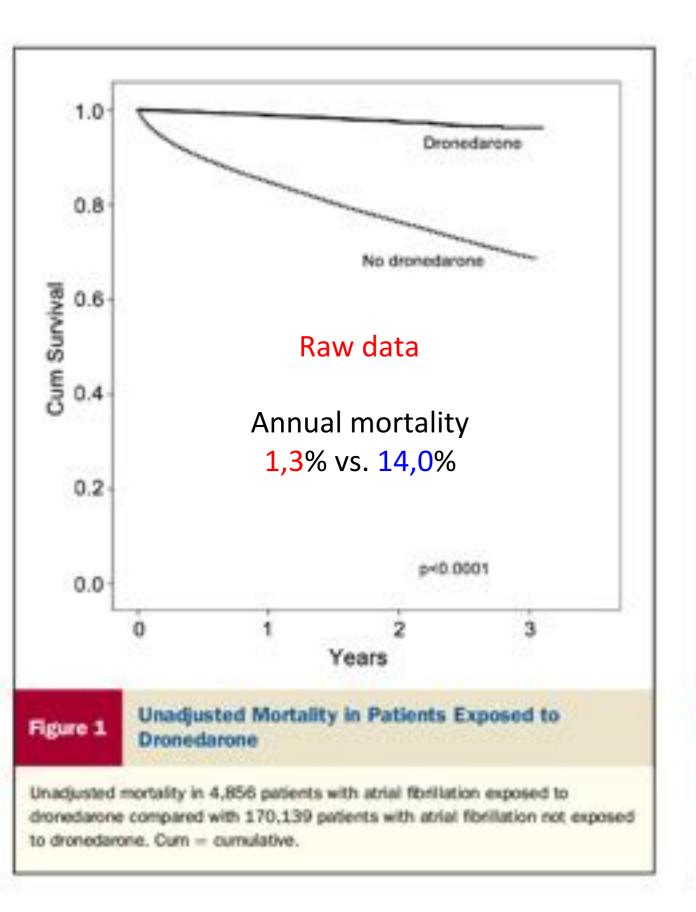
Match treated and untreated patients with similar scores pairwise

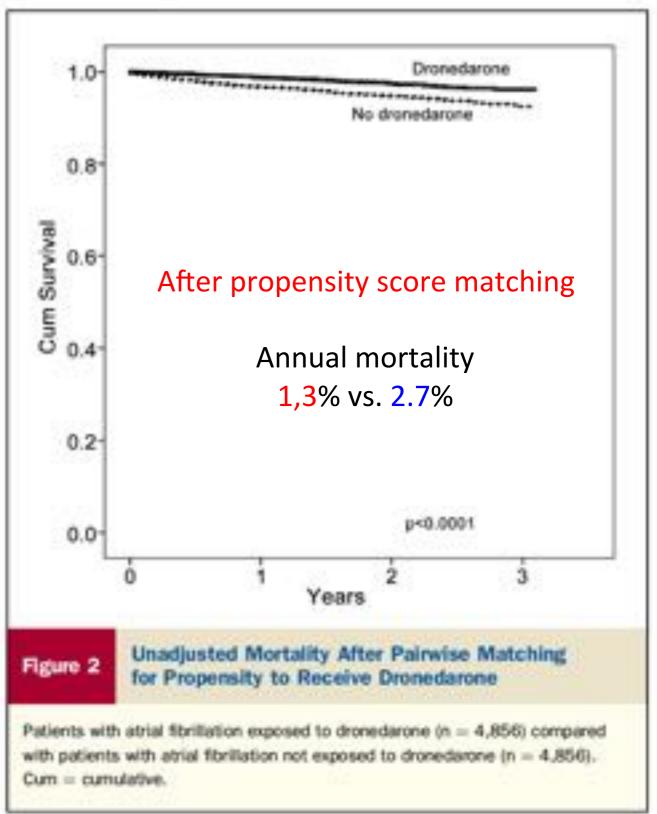
Exclude patients who does not find a match

Like comparing apples and ...apples



| | Dronedarone (n=4,856) | No Dronedarone (n=4,856) |
|--|--------------------------|--------------------------|
| Age | <i>65.5</i> | <i>65.1</i> |
| CHA ₂ DS ₂ -VASc | 2.48 | 2.52 |
| HAS-BLED | 1.86 | 1.84 |







observed number of deaths expected number of deaths

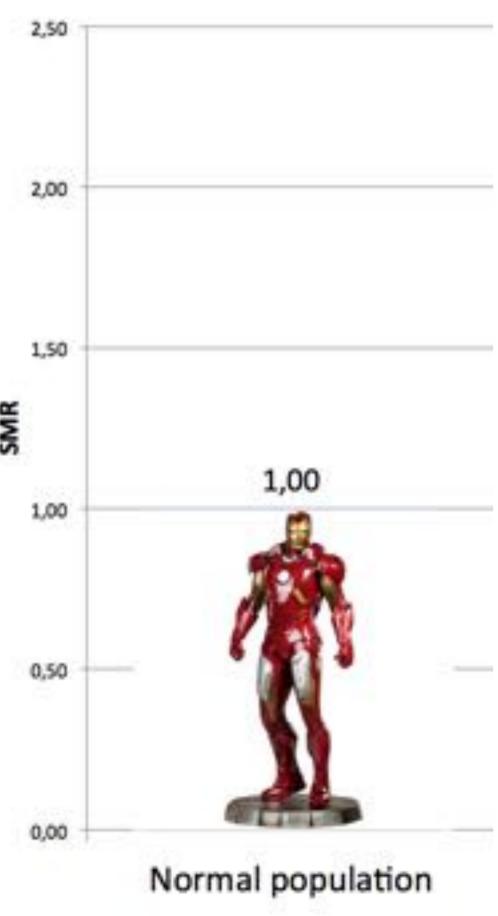
The expected number of deaths

http://www.scb.se/sv /Hitta-statistik/Statistik-efter-amne/Befolkning/Befolkningens-sammansattning/Befolkningsstatistik/25788/25795/

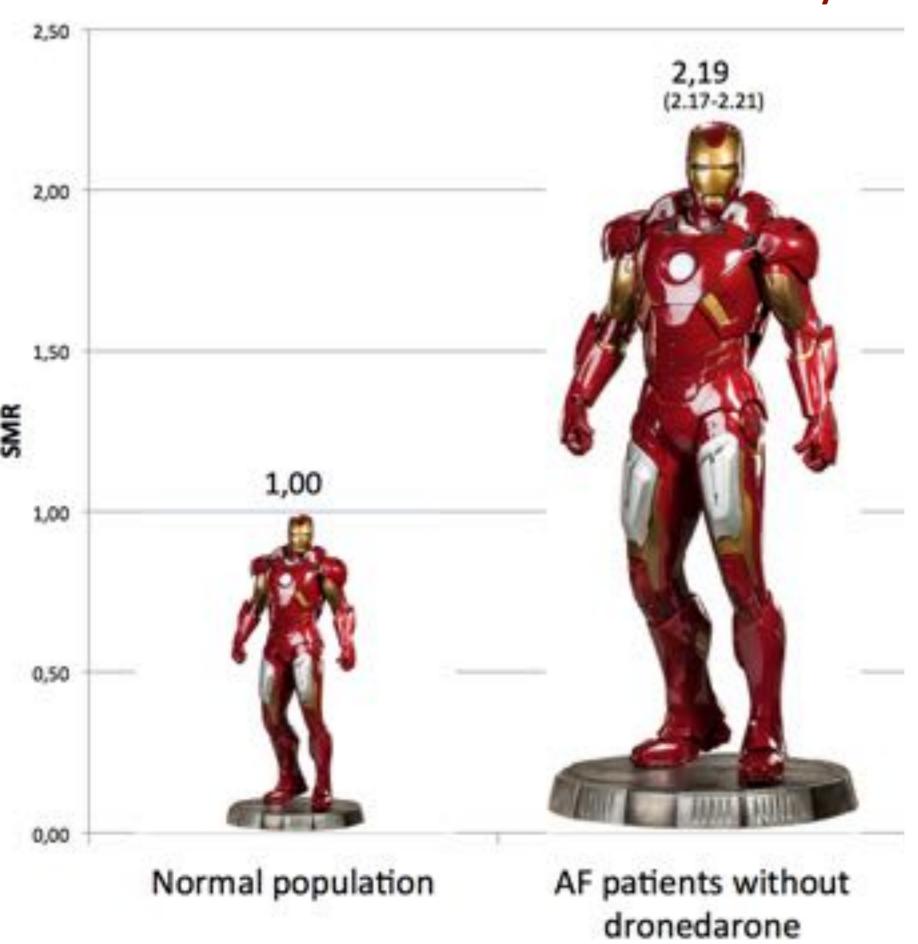




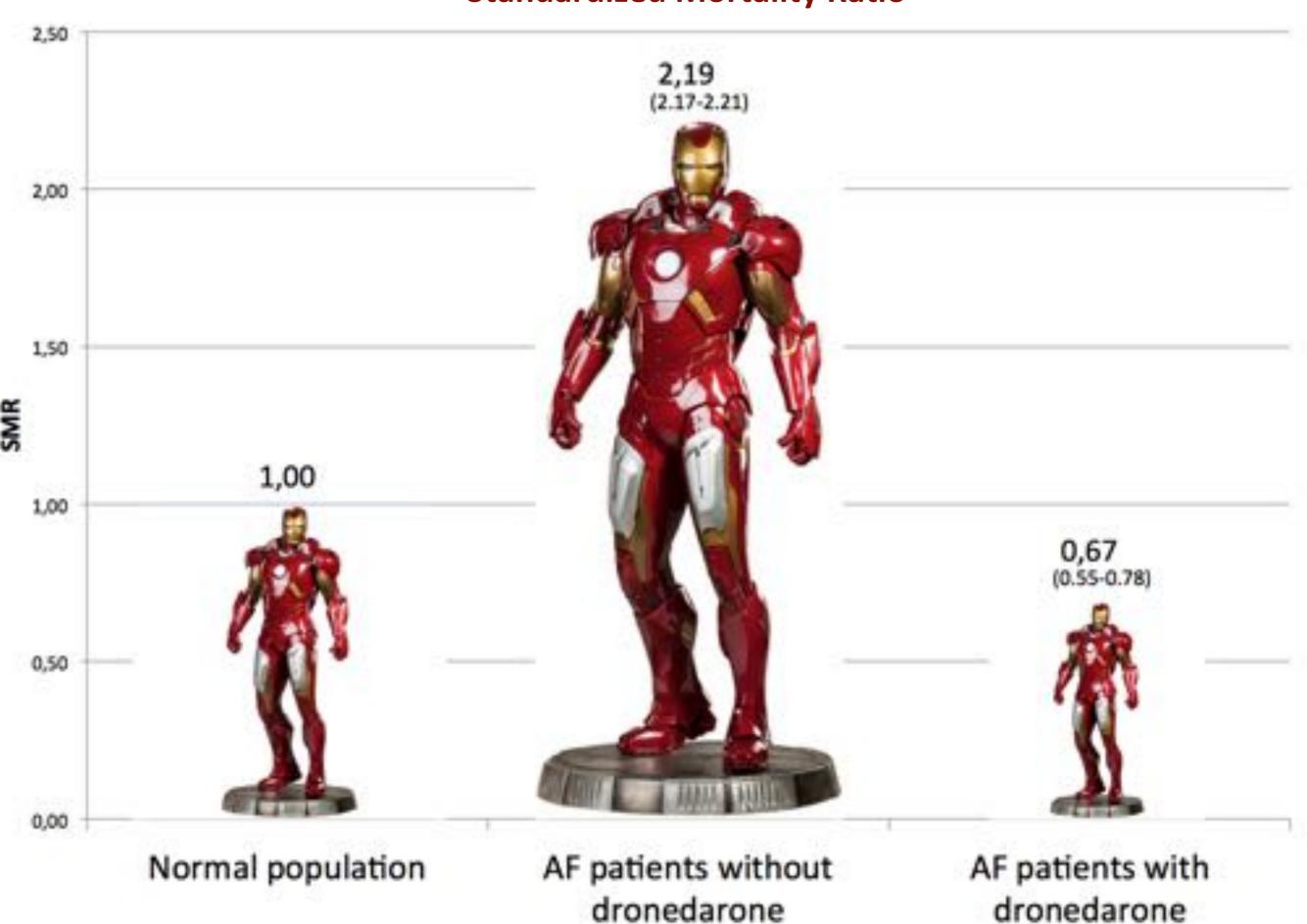
Standardized Mortality Ratio



Standardized Mortality Ratio



Standardized Mortality Ratio





one can adjust for what's in the registries everything's not in the registries

The Cause of Death Register

| | ever dronedarone | never dronedarone |
|-----------------------------|---------------------|----------------------|
| Cancer | 38% | 24% |
| Myocardial infarction | <i>15%</i> | 9% |
| Heart failure | 24% | 43% |
| Stroke (ischaemic) | 10% | 9% |
| Sudden or unwitnessed death | 1% (1) | 1% |
| Liver disease | <i>- (0)</i> | 1% |
| Other | 13% | 9% |
| | | |

The Cause of Death Register

| | | hypertension + IHD |
|-----------------------------|--------------|--|
| | ever | One purchase of 100 tablets |
| | dronedaror | Died 2 years later – treatment 8% of time |
| Cancer | 38% | |
| Myocardial infarction | 15% | Two later purchases of Amiodarone and Bisoprolol |
| Heart failure | 24% | 43% |
| Stroke (ischaemic) | 10% | 9% |
| Sudden or unwitnessed death | 1% (1) | 1% |
| Liver disease | - (0) | 1% |
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what about

heart failure patients

who got dronedarone although the shouldn't?

50 out of 1,707 died (annual mortality 2,9%)

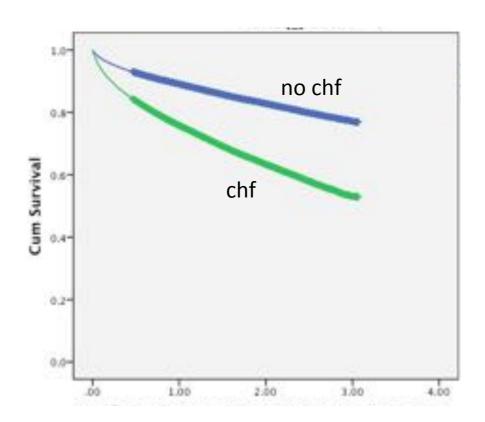
39 of them were no longer taking dronedarone

what about

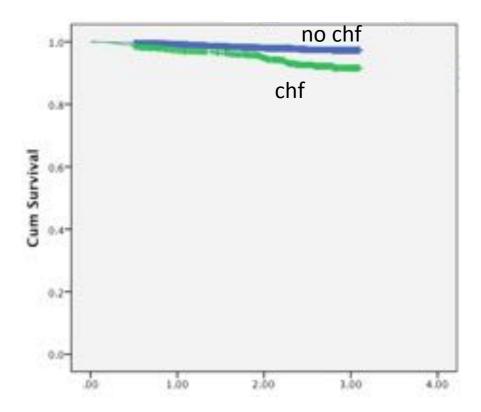
heart failure patients

who got dronedarone although the shouldn't?

Never dronedarone



Ever dronedarone



Annual mortality: ever dronedarone 2,9 % never dronedarone 23,9 % what about liver side effects?



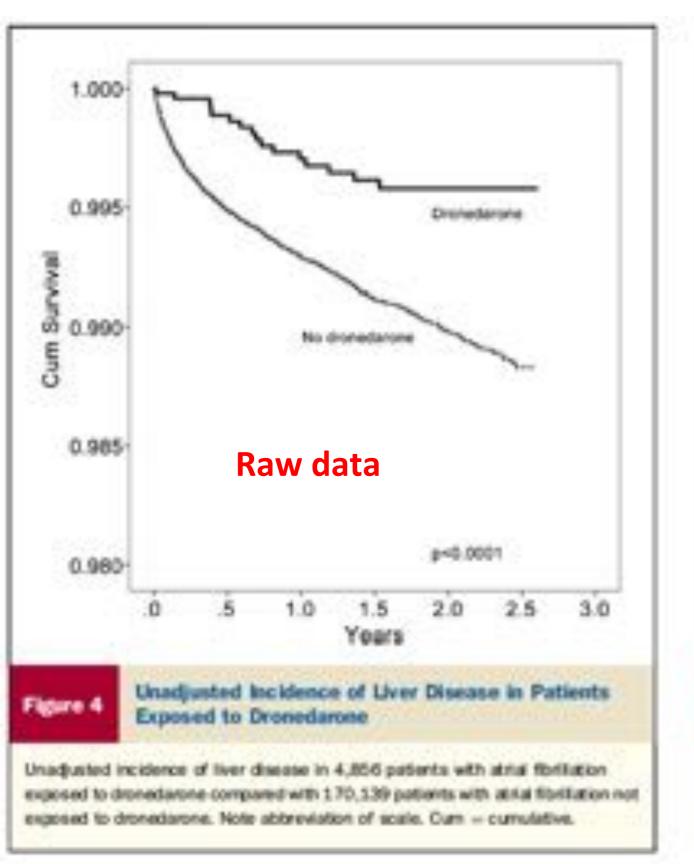
what about liver side effects?

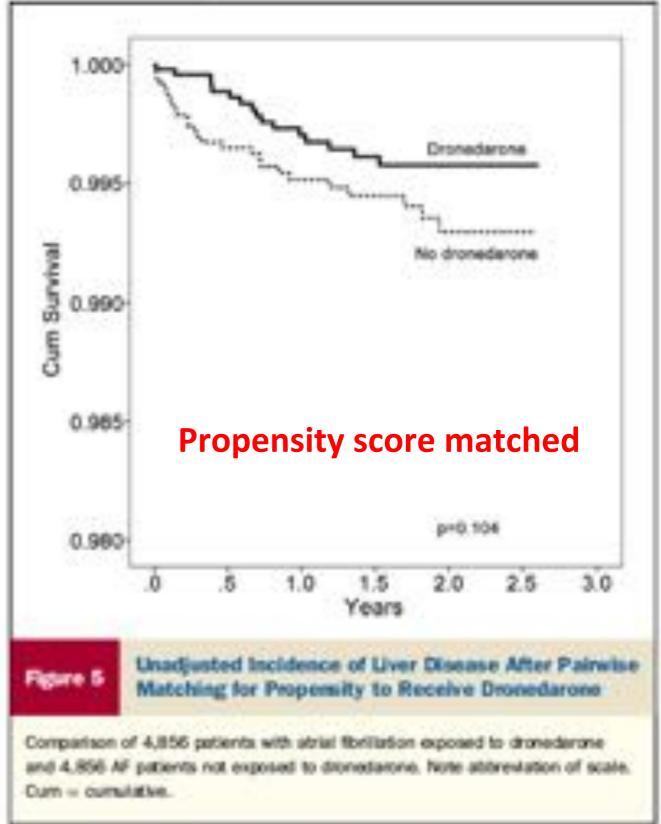


16 patients (0,22%) without previously known liver disease got a liver diagnosis (ICD-10 K70-77)

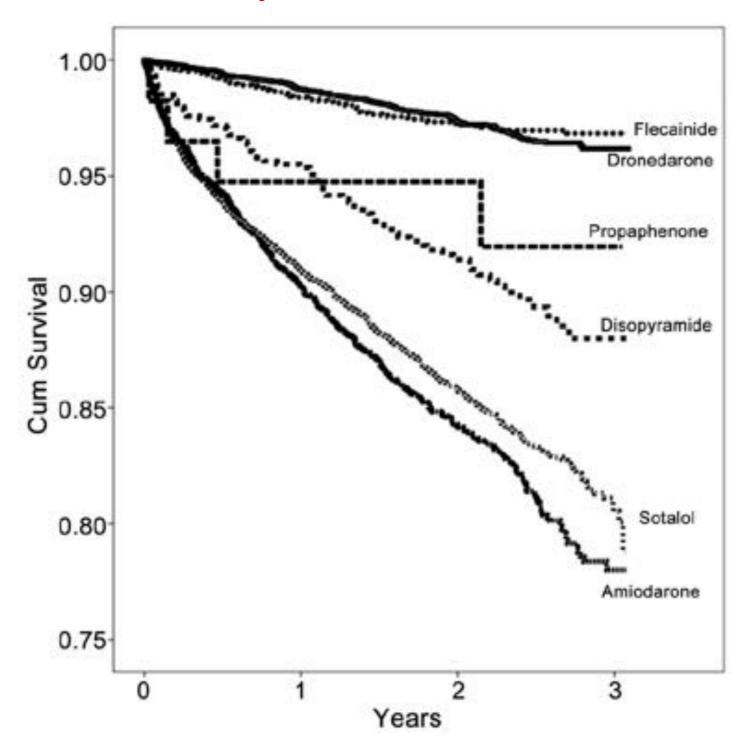
11 had stopped taking dronedarone before the diagnosis was made

New diagnosis of liver disease (ITT)





Mortality in relation to antiarrhythmic treatment at baseline



Conclusions:

1) Dronedarone patients in Sweden were much healthier than other AF patients

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- 2) Ample room for confounding by indication

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- 1) Dronedarone patients in Sweden were much healthier than other AF patients
- 2) Ample room for confounding by indication
- 3) Prescription of dronedarone to healthy patients (as in Sweden) appears to be safe.



Thank you



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