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Coronary Artery Disease, Acute Coronary Syndromes, Acute Cardiac Care –
Coronary Artery Disease – Epidemiology, Prognosis, Outcome

Prevalence of type 2 diabetes with stable coronary artery disease but without prior myocardial infarction or stroke and THEMIS-like patients from the SNDS French nationwide claims database

P. Blin[1], P. Darmon[2], P. Henry[3], C. Dureau-Pournin[1], M.-A. Bernard[1], E. Guiard[1], H. Maizi[1], F. Thomas-Delecourt[4], R. Lassalle[1], C. Droz-Perroteau[1], N. Moore[1]

[1]University of Bordeaux, BordeauxPharmacoEpi INSERM CIC1401, Bordeaux, France; [2]Hospital La Conception, Marseille, France; [3]Hospital Lariboisiere, Paris, France; [4]AstraZeneca, Courbevoie, France

Background: The THEMIS randomized controlled trial showed that patients with stable coronary artery disease and type 2 diabetes mellitus (CAD-T2DM), without prior myocardial infarction (MI) or stroke, and who received ticagrelor plus aspirin, had a lower incidence of ischemic cardiovascular events but a higher incidence of major bleeding than those who received placebo plus aspirin. The number of patients concerned and their characteristics in current practice are not well known.

Purpose: To assess the characteristics of CAD-T2DM adults (≥18 years) without prior MI-stroke, and more specifically, of THEMIS-like patients in a real world setting.

Methods: Cohort within the main scheme of the SNDS (Système National des Données de Santé), the French nationwide claims database, representing about 86% of 66 million people. All CAD-T2DM prevalent patients without prior MI-stroke were identified on January 1st, 2014 (index date) based on a 5-year database history, and followed for two years. The THEMIS-like population included CAD-T2DM patients without prior MI-stroke ≥50 years at index date without renal failure with dialysis, cirrhosis or liver cancer history, as well as no intracranial and gastro-intestinal bleed-ing for the last 6 months, or anticoagulant or antiplatelet agent 2 months before and after index date. Study prevalence was standardized for the European population for 1,000 adults (‰) using sex and 5-year age classes from Eurostat statistics.

Results: From the 359,595 CAD-T2DM patients identified in the database, 71.8% had no prior MI-stroke (n=258,260), including 24.9% of THEMIS-like patients (n=64,334). CAD-T2DM without prior MI-stroke and THEMIS-like patients had the same mean age of 72 years, with 68% and 66% men, 26% and 25% with more than 4-year CAD and T2DM history, 79% and 76% of hypertension, 28% and 19% of revascularisation procedure, 19% and 11% of peripheral arterial disease, 16% and 9% of heart failure, and 39% and 32% of diabetes complications, respectively. The table below presents prevalence estimation per 1,000 European adults with differences according to both populations, as well as sex and age-classes.

Conclusions: The two populations had similar characteristics, although noting some differences in comorbidities. The THEMIS-like prevalence was estimated to 1.50‰ European adults, representing about a quarter of CAD-T2DM patients without prior MI-stroke.

	CAD-T2DM without prior MI-stroke population (‰)			THEMIS-like population (‰)		
	Men	Women	All	Men	Women	All
All/18–64 years/65–75 years/>75 years	8.74/2.71/27.74/40.54	3.51/0.76/7.54/16.20	6.04/1.73/16.88/25.38	2.09/0.70/6.95/8.71	0.95/0.22/2.16/4.11	1.50/0.46/4.37/5.84