



Sex-Based Differences in Outcomes Following Peripheral Artery Revascularization: Insights from VOYAGER PAD

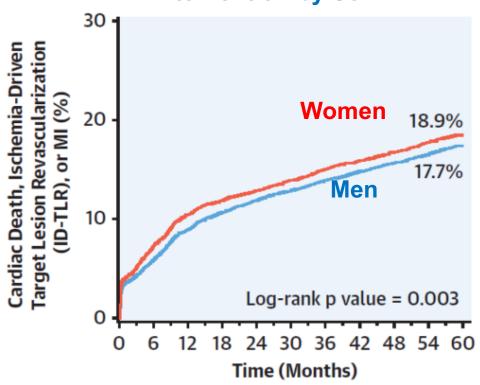
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European Society of Cardiology Congress 2021 Late-Breaking Science 26 August 2021

Peripheral Artery Disease in Women

- >200 million people w/ PAD globally
- Patients with PAD are at high risk of major adverse cardiovascular events and major adverse limb events
 - Dominant morbidity in PAD related to limb outcomes, including lower extremity revascularization (LER)
- Prevalence of PAD in women as high or higher than in men
- Coronary studies suggest outcomes may differ on the basis of sex

Outcomes after Percutaneous Coronary Intervention by Sex

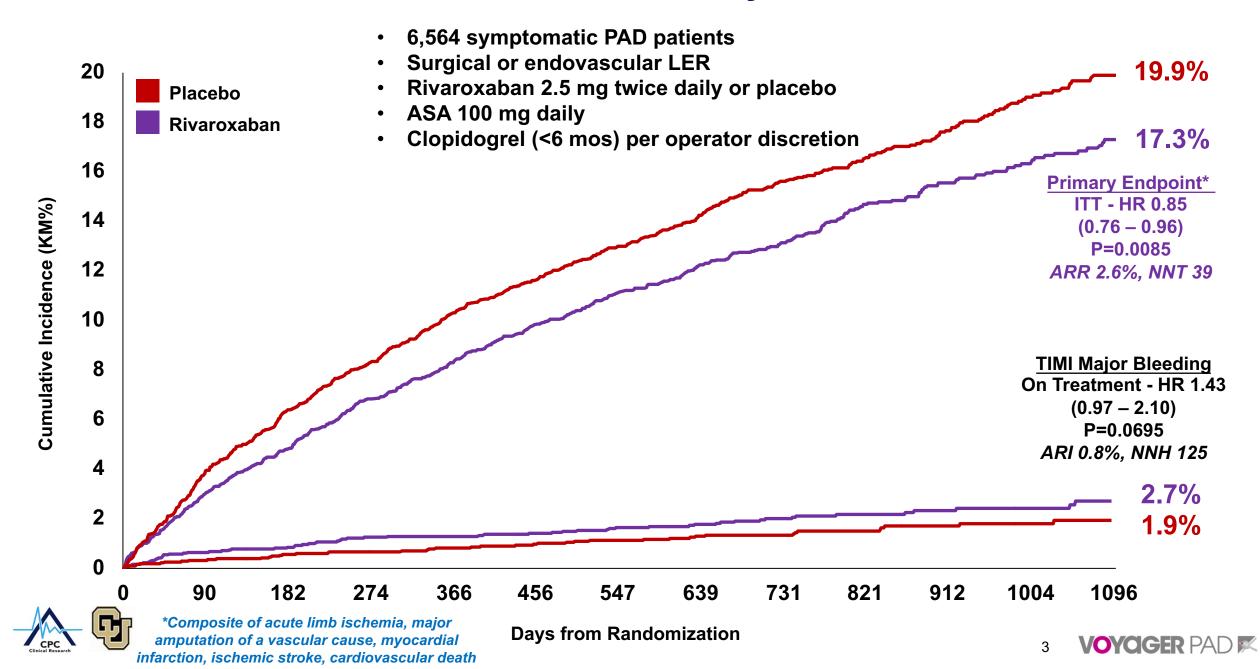


Risk profile and outcomes after LER in women w/ symptomatic PAD are not well understood





VOYAGER PAD Primary Results



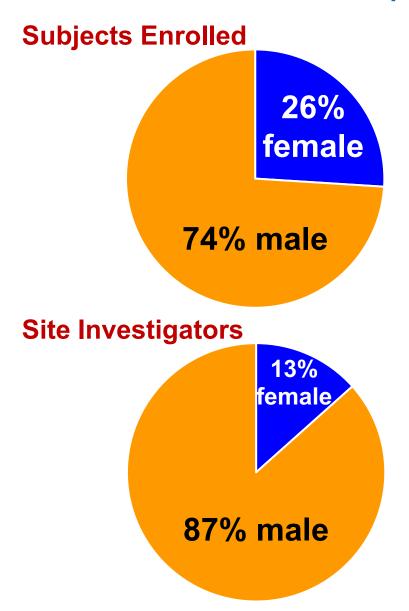
Objectives and Methods

- To examine sex-based differences in:
 - Trial metrics (recruitment and adherence)
 - Cardiovascular and limb outcomes
 - Efficacy and safety of rivaroxaban
- Prespecified subgroup analysis of VOYAGER PAD
- Outcomes prospectively ascertained and independently adjudicated by a blinded committee
- Associations between sex and outcomes and effects of rivaroxaban estimated with adjusted Cox proportional hazards models
 - Intention-to-treat and on-treatment analyses performed

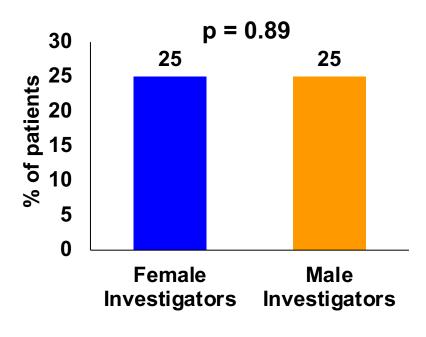


Female Participation in VOYAGER PAD

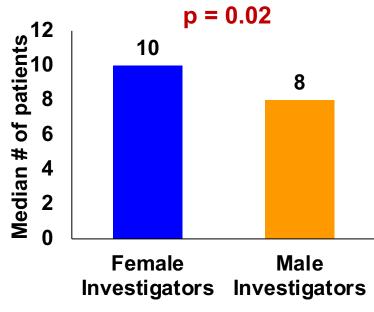
6,564 patients enrolled at 542 sites in 34 countries



Female enrollment



Overall enrollment



Baseline Characteristics

Characteristic at	Women	Men	P-value
Randomization	N=1704	N=4860	
	%	%	
Age, years median (IQR)	69 (63-76)	66 (60-72)	<0.0001
BMI, kg/m ² , median (IQR)	26 (23-29)	26 (24-29)	NS
Caucasian	80	81	NS
Hypertension	86	80	<0.0001
Diabetes mellitus	42	41	NS
Hyperlipidemia	63	59	0.005
eGFR < 60 ml/min/1.73m ²	30	17	<0.0001
Current smoking	26	38	<0.0001
Coronary artery disease	27	33	<0.0001
Baseline clopidogrel use	55	49	<0.0001
Baseline statin use	80	80	NS





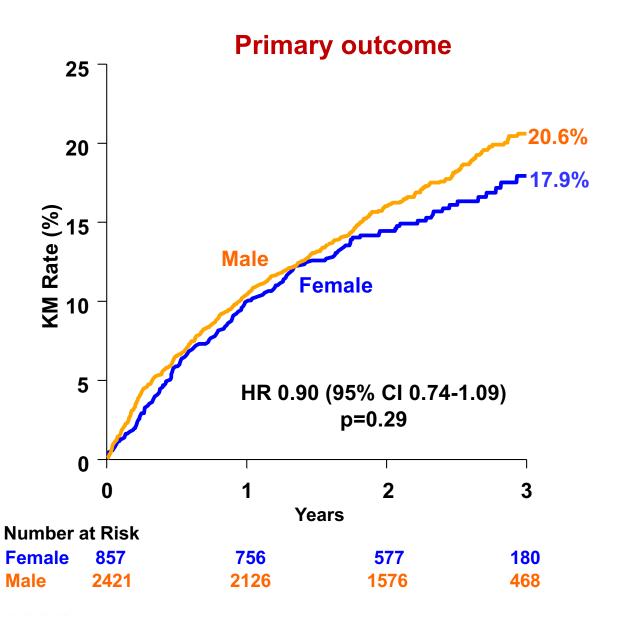
PAD & Procedural Characteristics

	Women N= 1704 %	Men N= 4860 %	P-value
Peripheral Artery Disease History			
Prior lower extremity revascularization	35	36	NS
Prior amputation	5	6	NS
Baseline ABI ≤0.50	40	41	NS
Index Revascularization			
Performed for critical limb ischemia	26	23	0.006
Long (≥15 cm) target lesion	33	35	NS
Endovascular (including hybrid)	74	64	<0.0001
Atherectomy*	9.1	6.3	0.002
Drug-coated device*	31	31	NS



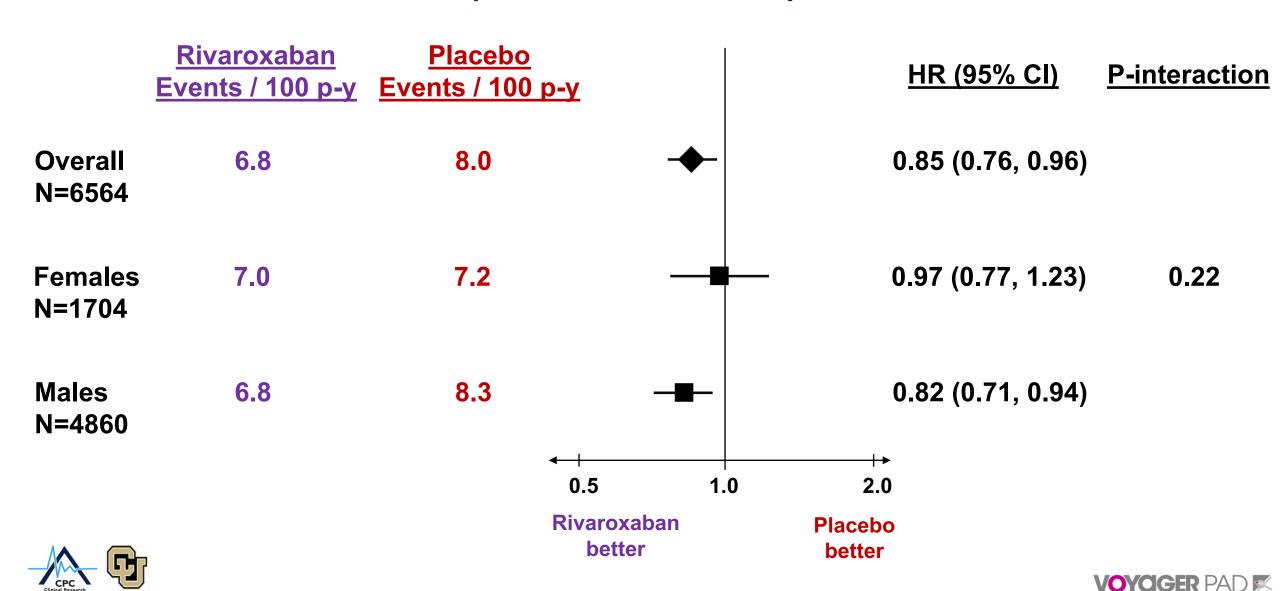


Outcomes in Placebo Patients by Sex

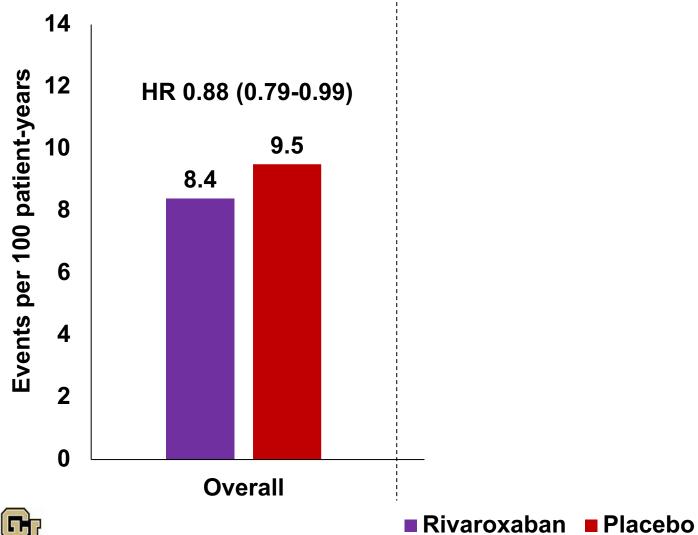




Effect of Rivaroxaban on the Primary Outcome by Sex (Intention-to-Treat)



Effect of Rivaroxaban on Unplanned Index Limb Revascularization by Sex







Women More Frequently Discontinued Study Medication

20

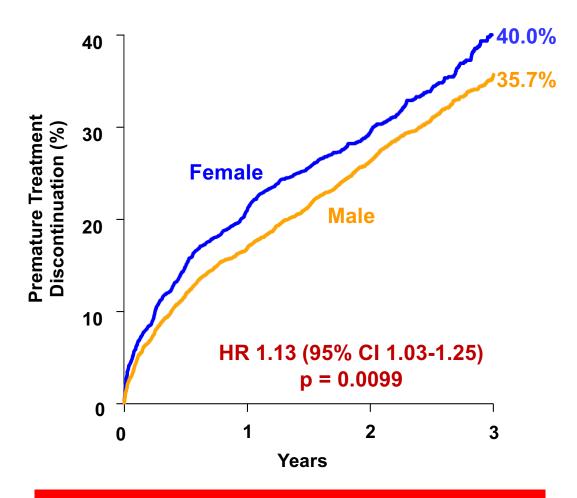
10

0

Adverse event

Patient

decision



Reasons for treatment discontinuation

Female N= 588

Male N= 1503

p = 0.0174*
28.1
23.0

2.6 2.3

Physician

decision

Pattern of d/c (rivaroxaban or placebo) similar for females and males

D/C at sites with female Pls 29.4% versus male Pls 32.7% (p=0.0375)

11.4

6.6 7.0

Administrative

9.2

Protocol

criteria



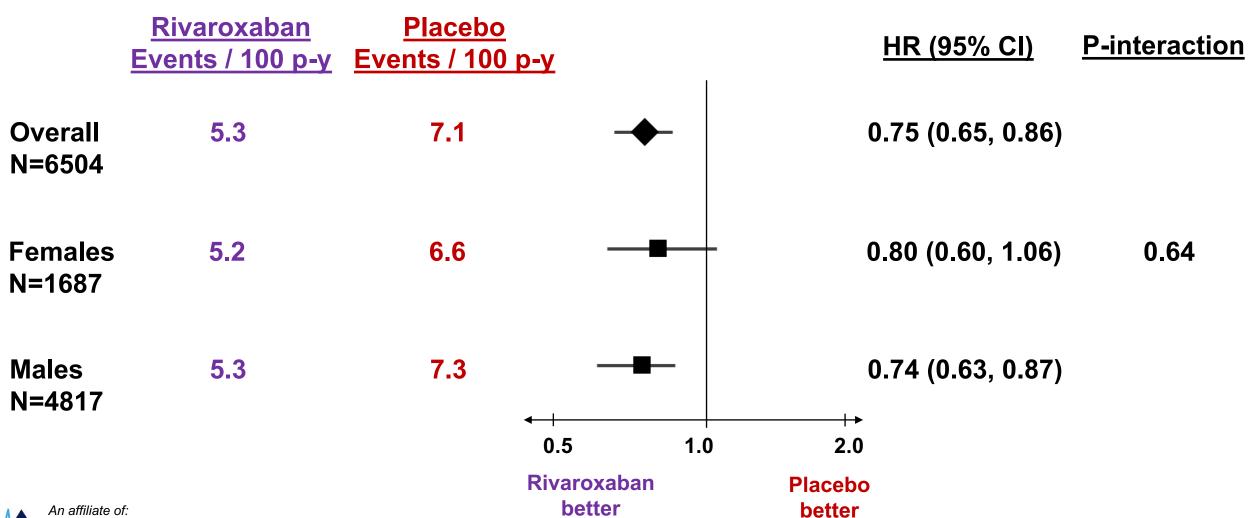


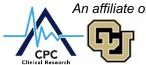


3.6 3.8

Other

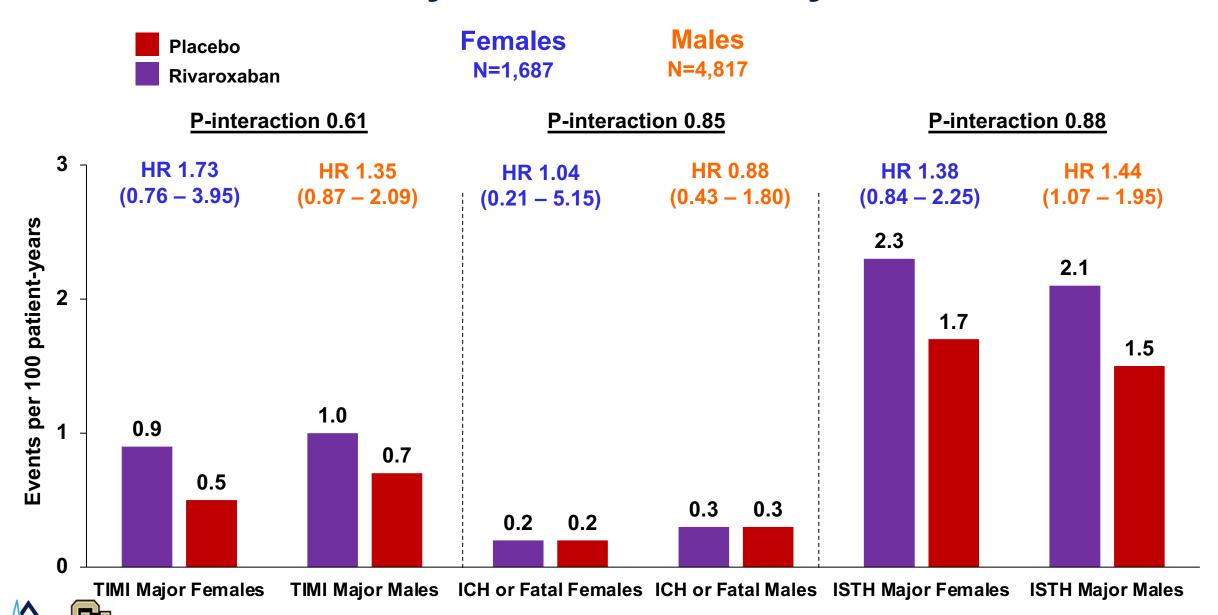
Effect of Rivaroxaban on the Primary Outcome by Sex (On-Treatment)







Safety of Rivaroxaban by Sex





Summary and Conclusions

- >1,700 women in VOYAGER PAD → one of the largest experiences of post-LER outcomes in women
 - − ~1/4 of patients female
- Compared with men, women were enriched for risk factors, presented with more severe PAD, underwent more endovascular LER, and had greater risk of unplanned index limb revascularization
- Efficacy and safety of rivaroxaban were consistent irrespective of sex
 - Study treatment discontinuation more common in women than men
- Efforts to understand sex-based differences in outcomes after LER and clinical trial participation and treatment adherence are needed
 - Prospective data collection and studies on the impact of women in site and leadership roles

