

## **EPOETIN ALFA UTILIZATION FROM 2000 THROUGH 2007 FOR CHRONIC KIDNEY DISEASE PATIENTS NOT ON DIALYSIS**

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Dosing of epoetin alfa (EPO) in adult dialysis patients is known to have increased markedly since treatment approval. The purpose of this study was to examine EPO drug utilization trends from 2000 through 2007 in adult patients with chronic kidney disease (CKD) not on dialysis. An analysis of longitudinal medical claims from the Ingenix Impact National Managed Care database was conducted to evaluate the dosing trend of EPO. Patients included in the study were  $\geq 18$  years, had  $\geq 1$  claim for CKD, were treated with EPO and received  $\geq 2$  doses during a treatment episode. Patients diagnosed with cancer, receiving chemotherapy, treated with darbepoetin alfa (DARB) were excluded. If a patient had received renal dialysis, data were censored 30 days prior to the first date of dialysis. If two consecutive EPO doses were more than 60 days apart, the second claim marked a new treatment episode. The treatment episodes were classified by semester (S1: Jan-June; S2: July-Dec) according to the date of treatment initiation. Average weekly dose of EPO, weighted by the duration of treatment, was calculated and evaluated using semester intervals to assess trends. A total of 2,284 treatment episodes were identified between January 2000 and December 2007. Mean age at treatment initiation was 63.6 years and women constituted 50.5% of the study population. Mean [SD] treatment duration remained relatively stable over time (127.5 [166.5] days). The weekly EPO dose over time was relatively stable during the study period (mean across semesters: 10,597 Units; median: 10,641 Units; 25th, 75th percentile: 9,779, 11,455 Units) After adjusting for confounding factors that may otherwise influence drug utilization such as age, gender, treatment duration, dialysis, payor type, diabetes, hypertension, and Charlson Comorbidity Index, mean weekly EPO dose has remained stable over time since 2000. In conclusion, this study of CKD patients not on dialysis observed relatively stable EPO dosing trends during the 8-year study period.