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**Title:** Management of chronic thromboembolic pulmonary hypertension (CTEPH): A physician-based perception study

Henning 14990 Tiede Henning.Tiede@innere.med.uni-giessen.de MD <sup>1</sup>, Barbara 14991 Hinzmann barbara.hinzmann@bayer.com MD <sup>2</sup>, Nicholas 14992 Bawden nicholas.bawden@ipsos.com <sup>3</sup> and Ioana 14993 Preston ipreston@tuftsmedicalcenter.org MD <sup>4</sup>. <sup>1</sup> Medical Clinic 2, University of Giessen Lung Centre, Giessen, Germany ; <sup>2</sup> Global Market Research Department, Bayer HealthCare Pharmaceuticals, Berlin, Germany ; <sup>3</sup> Healthcare Department, Ipsos MORI, London, United Kingdom and <sup>4</sup> Pulmonary and Critical Care and Sleep Medicine Departments, Tufts University School of Medicine, Tufts Medical Center, Boston, United States .

**Body:** Background: Therapeutic approach to CTEPH includes surgical and medical management. Pulmonary endarterectomy (PEA) is the standard of care in eligible patients (pts). Medical therapy with pulmonary arterial hypertension (PAH)-specific drugs has not been formally studied in this population. Objectives: To compare therapeutic management of CTEPH between different countries. Methods: Quantitative online survey conducted in 7 countries in Europe and North America, during 2010, of 331 physicians with experience in managing CTEPH for  $\geq 2$  years and who were treating  $\geq 3$  pts. Results: CTEPH pts were mostly treated by cardiologists (38%) and pulmonologists (34%) and 59% of physicians were affiliated with a pulmonary hypertension (PH) centre. Only 26% of pts were evaluated for PEA; 10% of all pts had undergone or were awaiting PEA. The proportion of pts who had been evaluated for and undergone/awaiting PEA was higher in PH centres compared with non-specialist centres (31% vs 17%; 12% vs 6%, respectively). A subset of physicians in the US was found to 'self-screen' pts for PEA using subjective criteria. 59% of CTEPH pts were receiving PAH-specific therapies with little variation between countries. Comparison with a similar perceptual study in PAH pts demonstrated that the treatment of CTEPH mirrors that of PAH in terms of PAH-specific therapy usage and combination therapy. Conclusions: Despite PEA being the standard of care and a potentially curative treatment for CTEPH, a low referral rate for PEA evaluation was observed in clinical practice. There is a need for education about CTEPH, implementation of specific CTEPH management guidelines, and an established referral process after diagnosis.