



ARTEMIS = Affordability and Real-world antiplatelet Treatment Effectiveness after Myocardial Infarction Study

WHY WAS THIS STUDY CONDUCTED?

When a person has a heart attack, their doctor usually prescribes an antiplatelet drug to help prevent another heart attack or a stroke.



However, approximately 60 percent of patients prematurely stop taking their antiplatelet drug after having a heart attack. Patients who stop taking the drug too early are at increased risk of having another heart attack or having a stroke.

WHEN WAS THE STUDY CONDUCTED?



June 2015 – September 2017

WHO WAS INVOLVED



11,001
participants who had
a heart attack



301
U.S. hospitals

ANTIPLATELET DRUGS HELP KEEP BLOOD FLOWING BY PREVENTING BLOOD CLOTS.



Examples of these include:

Ticagrelor (Brilinta)
Clopidogrel (Plavix)
Prasugrel (Effient)

WHY DO PATIENTS STOP TAKING THE DRUG TOO EARLY?



Patients and doctors often say the cost of the drugs is a main reason.

Researchers conducted the ARTEMIS study to find out if helping patients pay for their antiplatelet drug would allow:

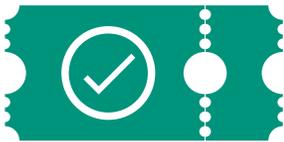
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1. Patients to continue to take their antiplatelet drug as prescribed.
 2. Doctors to treat patients with the best drug possible.
 3. A reduction in the number of future:
 - deaths
 - heart attacks
 - strokes





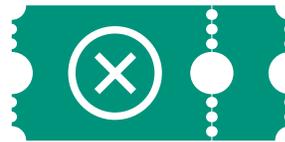
WHAT HAPPENED DURING THE STUDY?

In order to test if helping patients pay for their antiplatelet drug made a difference, hospitals were assigned to one of two groups. Hospital patients in one group received a coupon to help pay for their antiplatelet drug and the other group did not receive a coupon. The coupon made the price about the same for two antiplatelet drugs, one of which was older than the other. Doctors prefer newer antiplatelet drugs because they are safe and work better. For many patients, the coupon was used in addition to the patient's insurance. The coupon was good for up to one year after the patient was discharged from the hospital. Doctors decided which of the two drugs were best to prescribe to each patient.



RECEIVED A COUPON
6,436 participants

135 hospitals



DID NOT RECEIVE A COUPON
4,565 participants

166 hospitals

WHAT DID RESEARCHERS LEARN FROM THE STUDY?



Researchers found that using a coupon to help patients pay for their antiplatelet drug:

- Helped patients take their drug as long as prescribed/recommended.
- Removed the issue of cost, so doctors prescribed the drug needed for the patient as supported by clinical trial evidence.

WHAT RESEARCHERS FOUND SURPRISING IS THAT:

- **28 percent** of the patients chose not to use the coupon. This may suggest that drug costs may not have been a top priority for these patients.
- **80 percent** of patients reported taking their antiplatelet drug, but pharmacy records showed that only **55 percent** of patients filled their prescriptions consistently. This may indicate that patients over-report how they take their drug.
- There was no difference in the number of deaths, heart attacks, or strokes between patients who got the coupon and those who did not.

WHAT'S NEXT?

The results of this study showed that both doctors and patients do consider drug costs when prescribing and taking antiplatelet drugs.

"Our study confirms some of our thoughts on how drug prices affect doctors' and patients' behaviors," said lead researcher and associate professor of cardiology at Duke University Medical Center, Tracy Wang, MD. "But, we still have a lot of work to do to understand how we can best help patients take their medications to improve long-term health changes."

LEARN MORE

For ARTEMIS research participants, if you have questions about the results or your participation, please contact your study doctor or research team.

This summary was completed on March 2019. Newer information since this summary was written may now exist.

