

Atrial Fibrillation Patient Survey

Online survey of AFib Patients 65+ Exploring Experiences with the Diagnosis and Treatment of AFib

September 2012

Objectives and Methodology

Objectives

Achieve better understanding of:

- Experiences of patients during diagnosis
- Sources of information that patients use
- Dynamics of treatment decisions
- Use (or lack thereof) of anticoagulant medications
- Stroke and bleeding risk discussion with AFib patients and their health care professionals (HCPs)
- Compliance with treatment options
- Add to the knowledge gleaned from the HCP survey (primary care physicians, internists, and geriatricians)

Methodology

- 502 Atrial Fibrillation patients from an online panel.
- Invites were sent to 3,901 people nationwide, specifically targeting older respondents with heart conditions and/or atrial fibrillation based on information the panel has on file. 1,777 respondents accessed the survey. Of those who accessed the survey:
- 963 were terminated based on screening criteria,

- 66 started but did not complete the survey, and 24 were disqualified for taking the survey too quickly (quality control measure).
- Online research best practices were employed and the survey was closely monitored throughout the data collection process.

Summary of Key Findings

AFib Diagnosis

- Most of these 65 year+ AFib patients were diagnosed after experiencing symptoms, though detection through regular check-ups has become more common.
- Most were diagnosed by a cardiologist and/or referred to one after diagnosis.

AFib Treatment

- Cardiologists are also the most common HCP these patients see for treatment. While large majorities of these AFib patients are satisfied with their treatment, those seeing cardiologists are more so than those being treated by primary care physicians (PCPs).
- Patients say discussions about treatment typically revolved around options (both medication and others), symptoms, and risk factors. Most patients say their HCP recommended one particular medication; few recommended no treatment or didn't mention anticoagulation at all.

Medication Options

- More than two thirds of these AFib patients are on prescription anticoagulants.
- As reported in the physician survey conducted earlier this year, Warfarin is the most popular anticoagulant, though aspirin is more likely to be used overall, sometimes in conjunction with prescription medication.
- To patients, cost is the most tangible barrier to new medications.

Understanding the Risks

- In the aggregate, the level of worry about stroke and bleeding risk are about equal. However, in a head-to-head comparison, most of these AFib patients are more concerned about stroke or both risks equally (few bleeding only).
- When it comes to stroke risk, AFib patients are fairly well-versed in risk factors – most come up organically when patients are asked to list them.
- There is less understanding of bleeding risk factors. Patients are most likely to mention straight-forward/simple factors (injuries, other medications, previous bleeding problems), rather than specific underlying factors.
- While many of these patients said their HCP discussed risks with them, few recall their doctor using an assessment tool or giving them a 1- or 5-year stroke risk number.