Clinical Burden and Practice Patterns in Patients With Chronic Hypoparathyroidism in the United States (US): A Claims Data Analysis Using Surgery-Based Criteria

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INTRODUCTION

- Chronic hypoparathyroidism (CHP) is a rare disorder, characterized by low serum calcium and low endogenous parathyroid hormone (PTH).
- Few studies to date have characterized patients with CHP.
- Study Objective: To assess the clinical burden and practice patterns in patients with CHP identified using surgery-based criteria in a US claims database.

METHODS

- Study Design: Non-interventional retrospective claims data analysis
- Data Source: HealthVerity closed payer claim medical and pharmacy database (Private Source 2) with 130 million covered lives.
- Study Period: October 1, 2014 - December 31, 2019
- Study Population: Patients identified with CHP using a diagnosis-based approach. Eligibility criteria (Figure 1) were adapted from a study by Powers et al.
  - Presence of a claim with a procedure code for parathyroidectomy, complete or partial thyroidectomy, or neck dissection, followed by a claim with a diagnosis of HP (E20.0, E20.8, E20.9, E22.1, E45.4) within 15 months apart; with a subsequent second HP diagnosis claim at any time point
  - Index date: Day of the first qualifying HP diagnosis claim
  - Patients continuously enrolled for 15 months before the index date and a minimum of 6 months after the index date

RESULTS

- A total of 1,406 patients met the eligibility criteria, among which 1,184 patients had complete data for 1-Year follow-up. The mean time interval between surgery and qualifying HP diagnosis claim was 8.2 ± 3.5 (SD) months, and 115 patients (8.2%) had an HP diagnosis prior to surgery.

Table 2. Comorbidities

Table 4. Number of patients with at least one lab test

CONCLUSION

- This study employed a large US claims database with a sizable number of HP claims and used rigorous inclusion and exclusion criteria to identify a CHP population.
- Findings provide insights into the diagnostic and treatment patterns of patients with CHP, aligned with the monitoring patterns.
- Future studies can compare the findings with a control group and examine the healthcare utilization and costs associated with the disease and its complications.

DISCLOSURES

- Study was funded by Amalya Pharmaceuticals, PLLC, MDC, SA and BW are current employees of Amalya Pharmaceuticals, LLC and KL is an employee of amalya Pharmaceuticals associated with the development and execution of this study.
- DMW and MM were scientific advisors on this study, and they received an honorarium from Amalya Pharma. Paper presented at ENDO 2021, March 20-23 [Virtual].