

Characteristics of patients with idiopathic pulmonary fibrosis admitted to hospital: data from the IPF-PRO Registry

Mary E Strek¹, Laurie D Snyder,^{2,3} Ayodeji Adegunsoye,¹ Megan L Neely,^{2,3} Shaun Bender,⁴ Eric S White,⁴ Craig S Conoscenti,⁴ Hyun J Kim⁵ on behalf of the IPF-PRO Registry investigators

¹Section of Pulmonary, Critical Care Medicine, University of Chicago, Chicago, USA; ²Duke Clinical Research Institute, Durham, North Carolina, USA; ³Duke University Medical Center, Durham, North Carolina, USA; ⁴Boehringer Ingelheim Pharmaceuticals, Inc., Ridgefield, Connecticut, USA; ⁵University of Minnesota, Minneapolis, Minnesota, USA.

INTRODUCTION

- Hospitalizations are common among patients with idiopathic pulmonary fibrosis (IPF) and are associated with high mortality.¹⁻³
- The Idiopathic Pulmonary Fibrosis Prospective Outcomes (IPF-PRO) Registry (NCT01915511) is a prospective observational US registry of patients with IPF.⁴

AIM

- To evaluate the risk of hospitalization and the characteristics of patients who were hospitalized in the IPF-PRO Registry.

METHODS

- We compared the characteristics at enrollment into the registry of patients who were and were not hospitalized during follow-up.
- Hospitalizations were categorized by the investigator as having a respiratory or a non-respiratory cause and as with or without ventilatory support.
- Associations between patient characteristics at enrollment and the time to first respiratory-related hospitalization were analyzed using a Cox regression model.

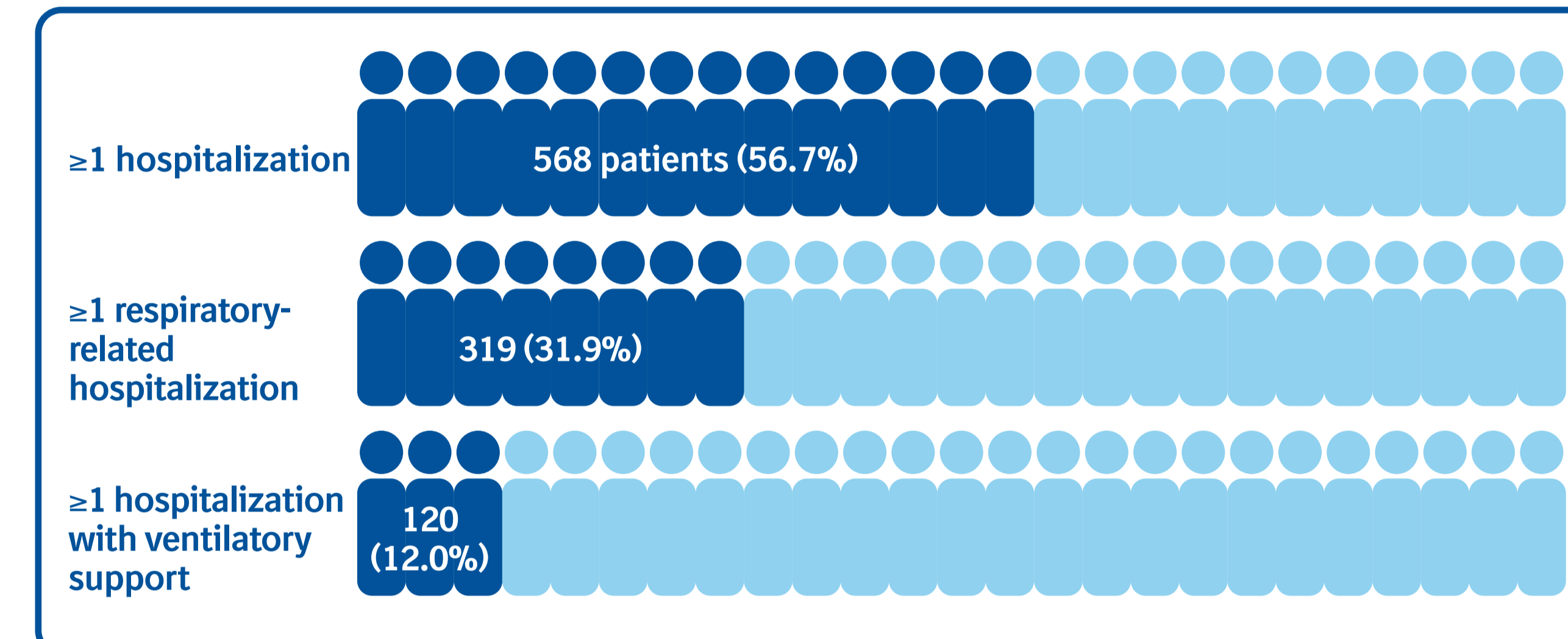
CONCLUSIONS

- Hospitalizations were common in patients in the IPF-PRO Registry.
- Younger age, lower BMI, lower FVC, oxygen use at rest, and a history of pulmonary hypertension at enrollment were associated with an increased risk of respiratory hospitalization during follow-up.

RESULTS

Hospitalizations

- The analysis cohort included 1001 patients enrolled at 46 sites. Median (Q1, Q3) follow-up time in the registry was 23.7 (15.4, 36.0) months.



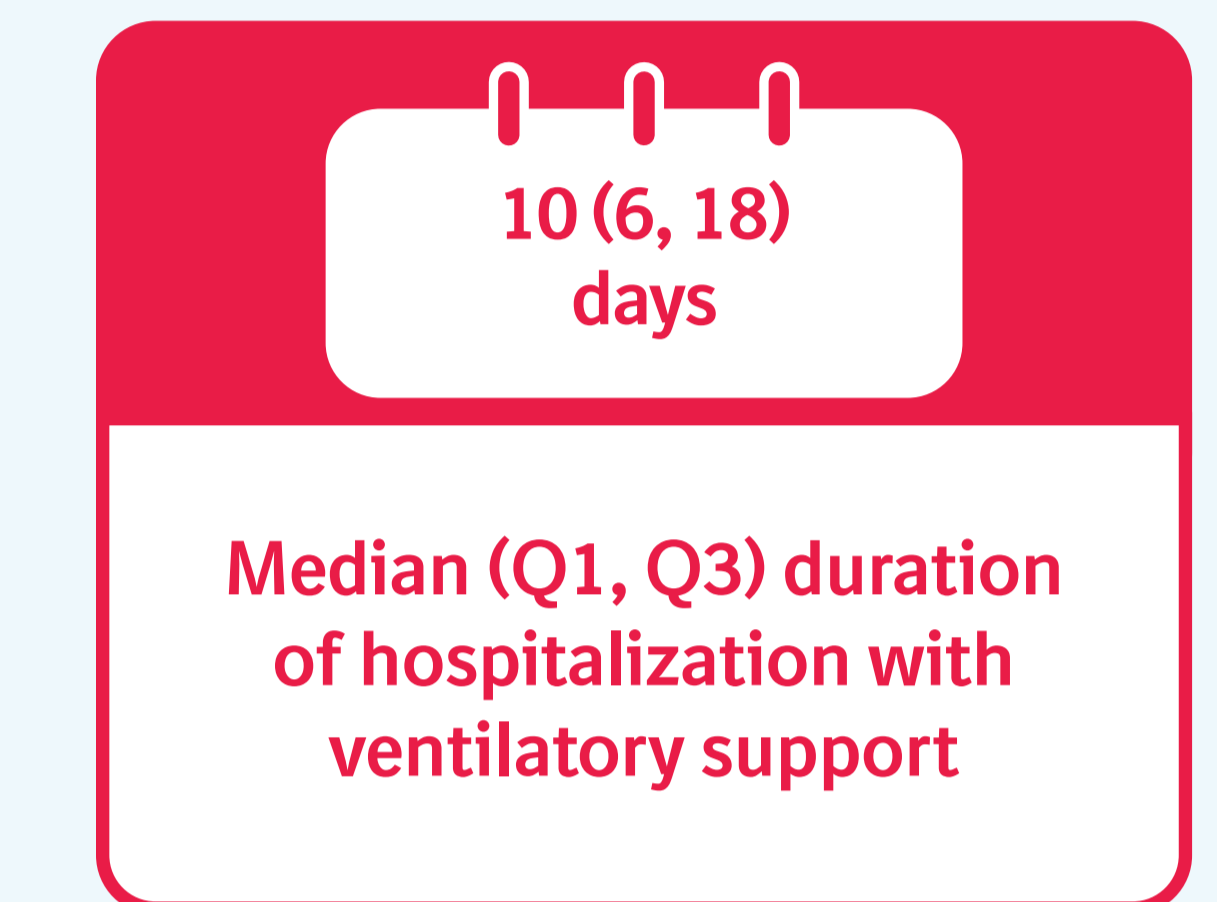
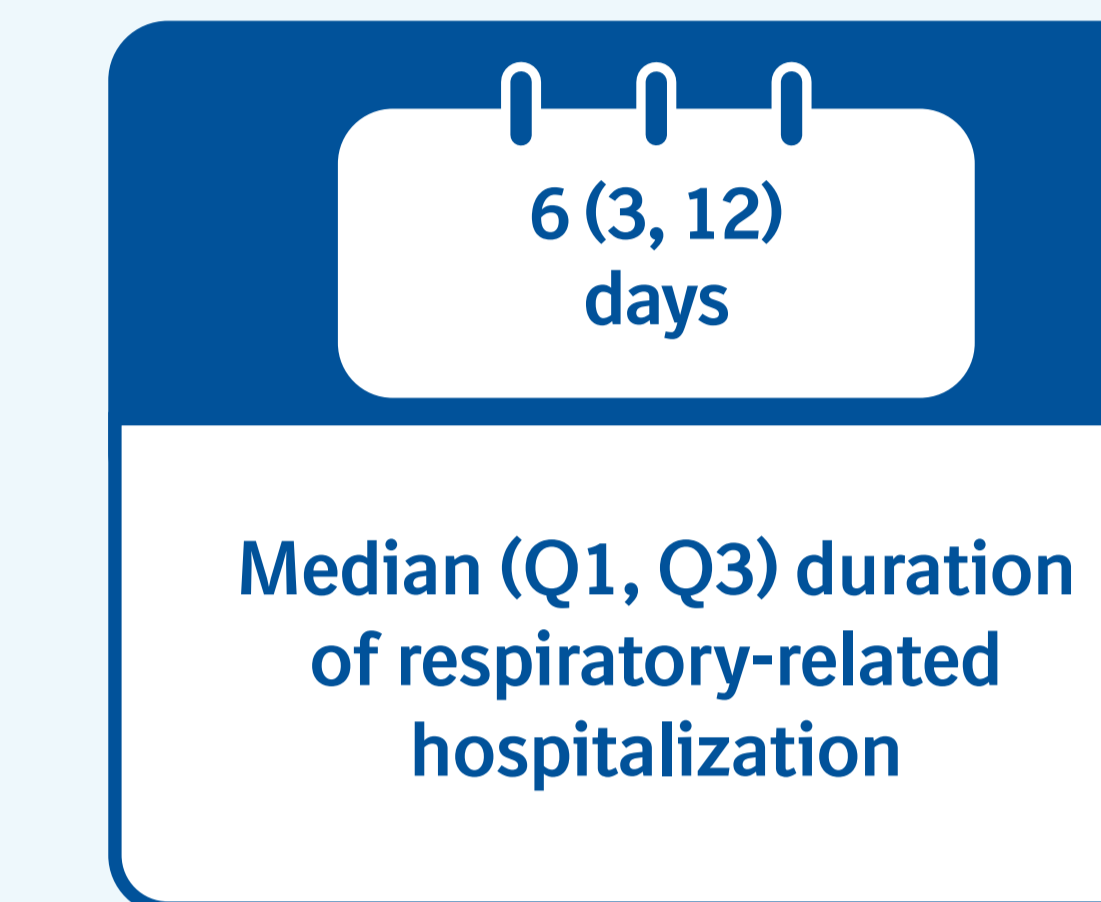
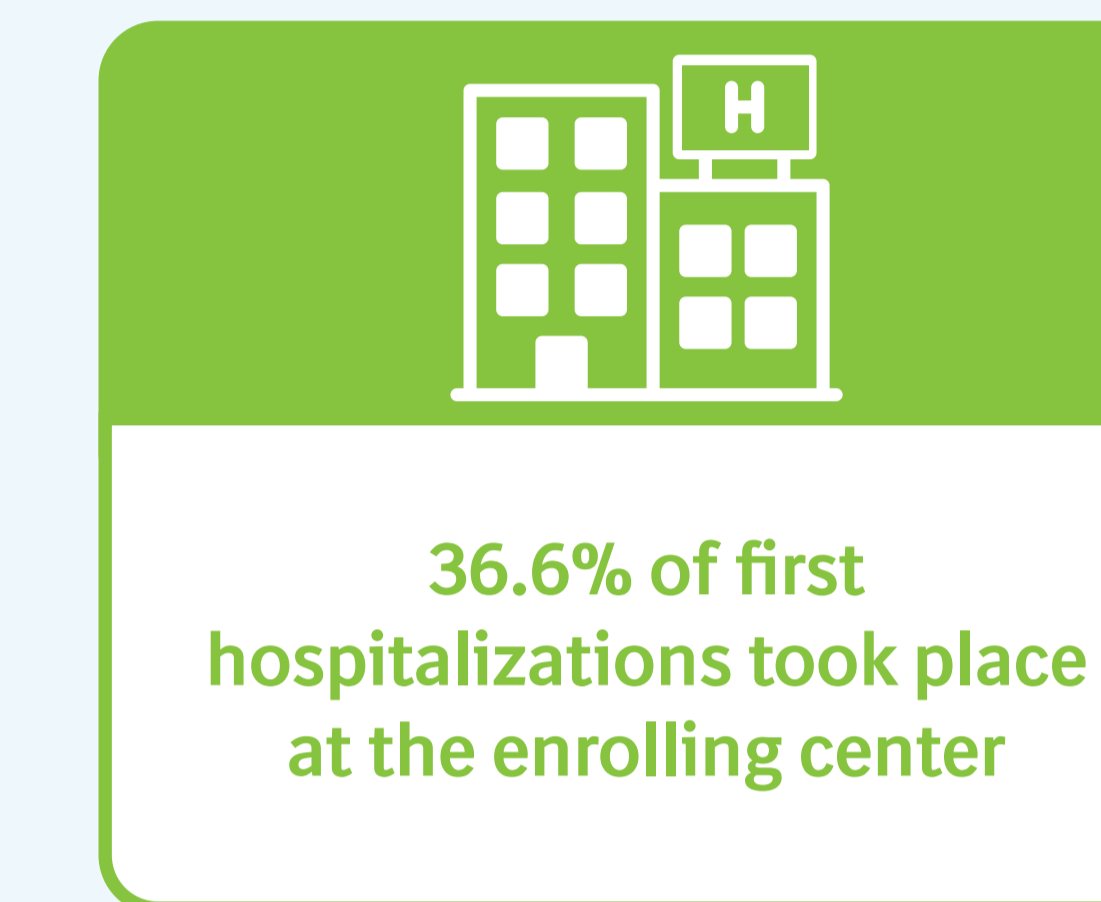
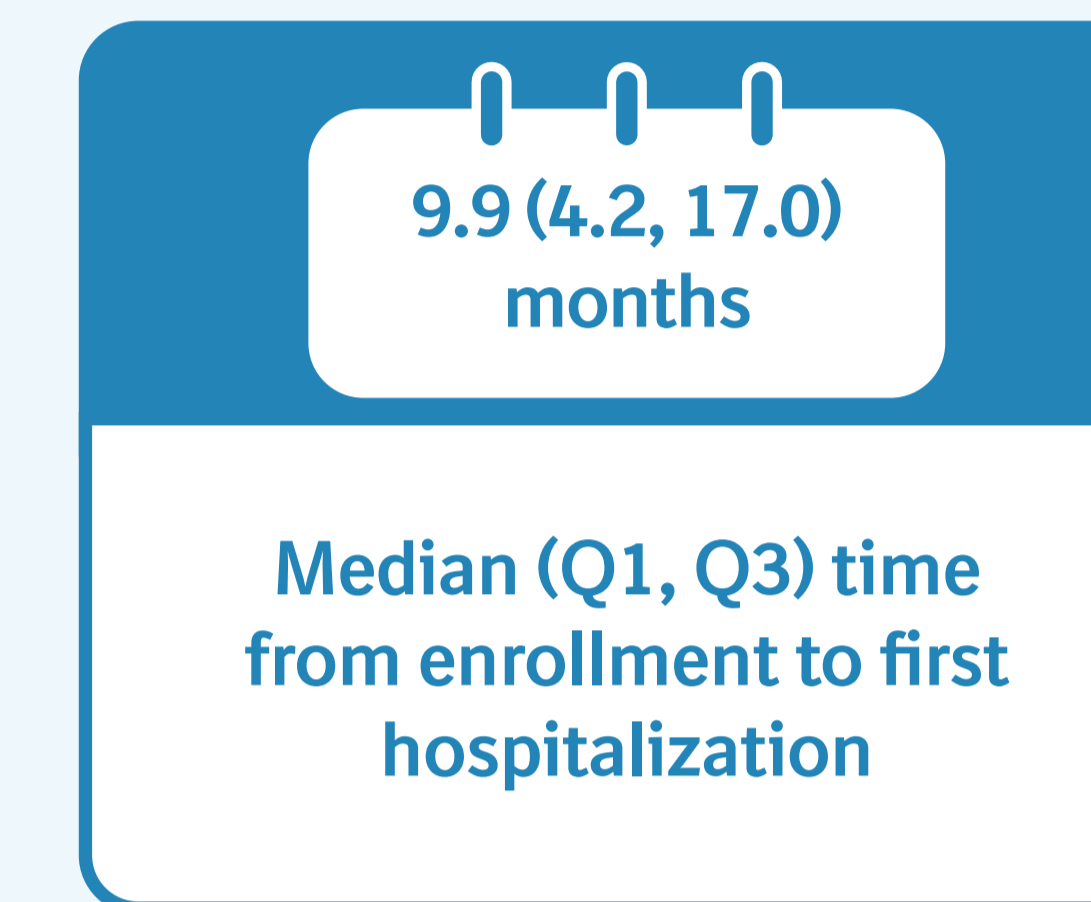
Baseline characteristics of patients who were and were not hospitalized during follow-up

- Compared with those who were not hospitalized, a greater proportion of the patients who were hospitalized during follow-up were current or former smokers, used oxygen at rest and used oxygen with activity at enrollment.

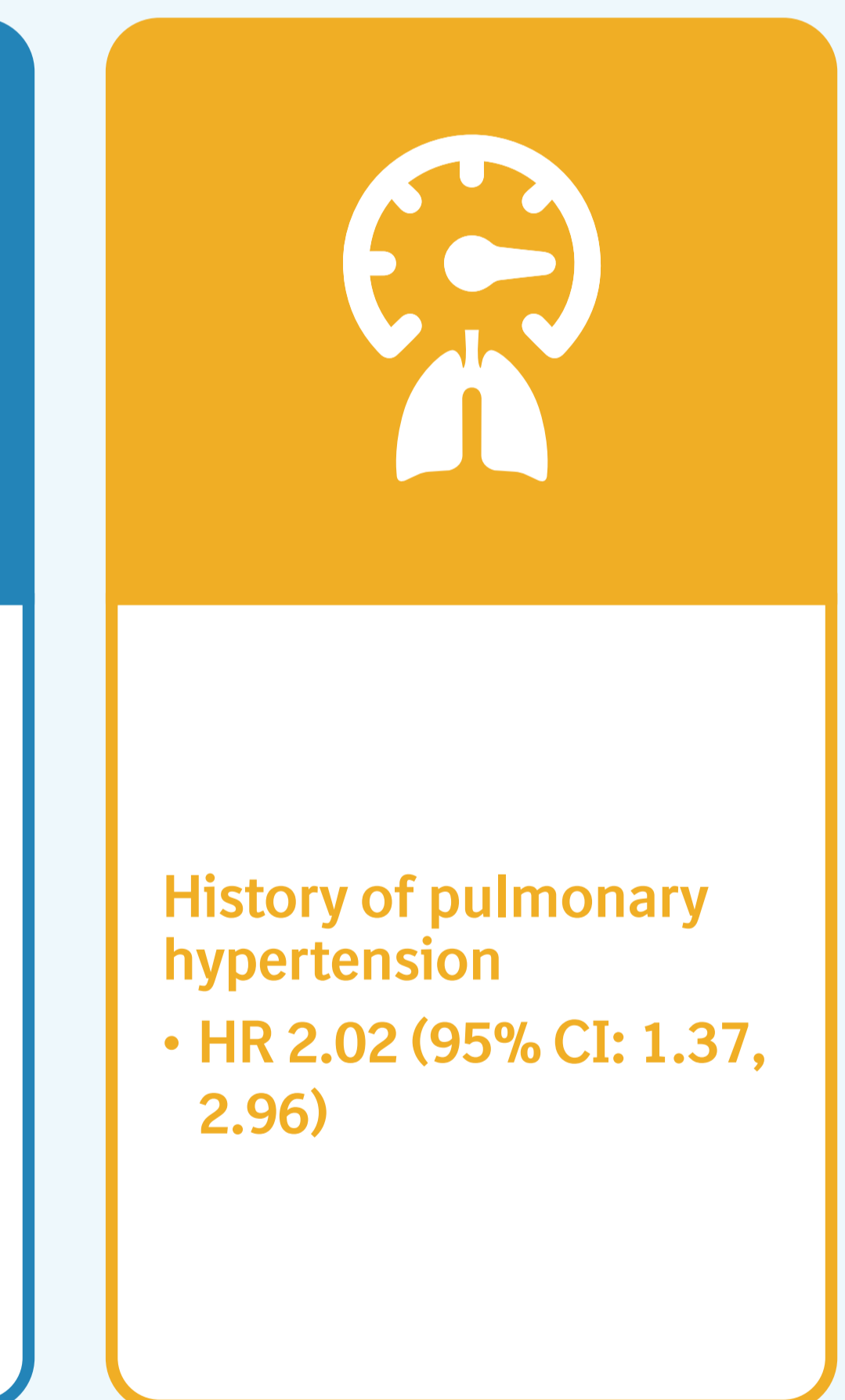
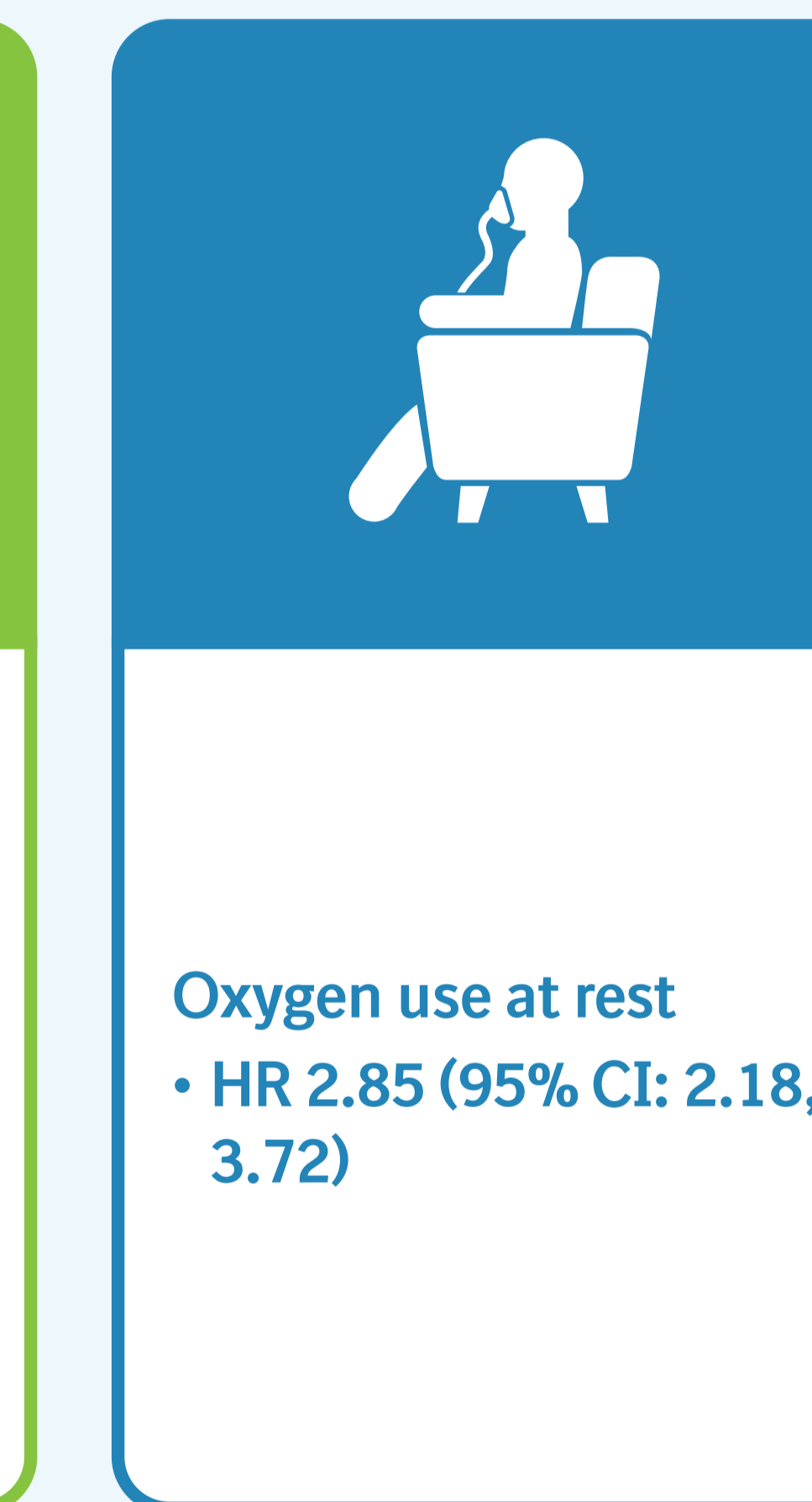
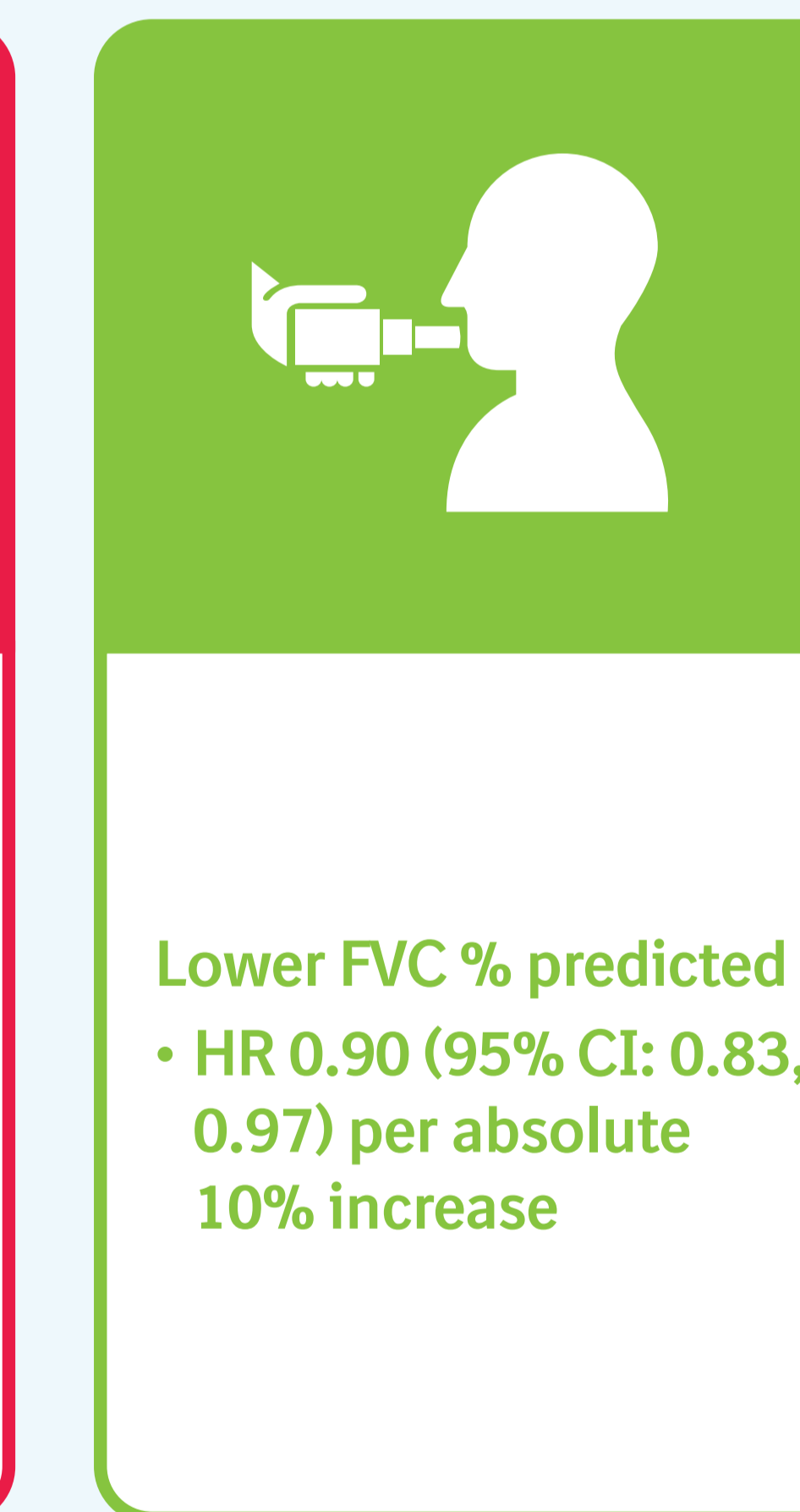
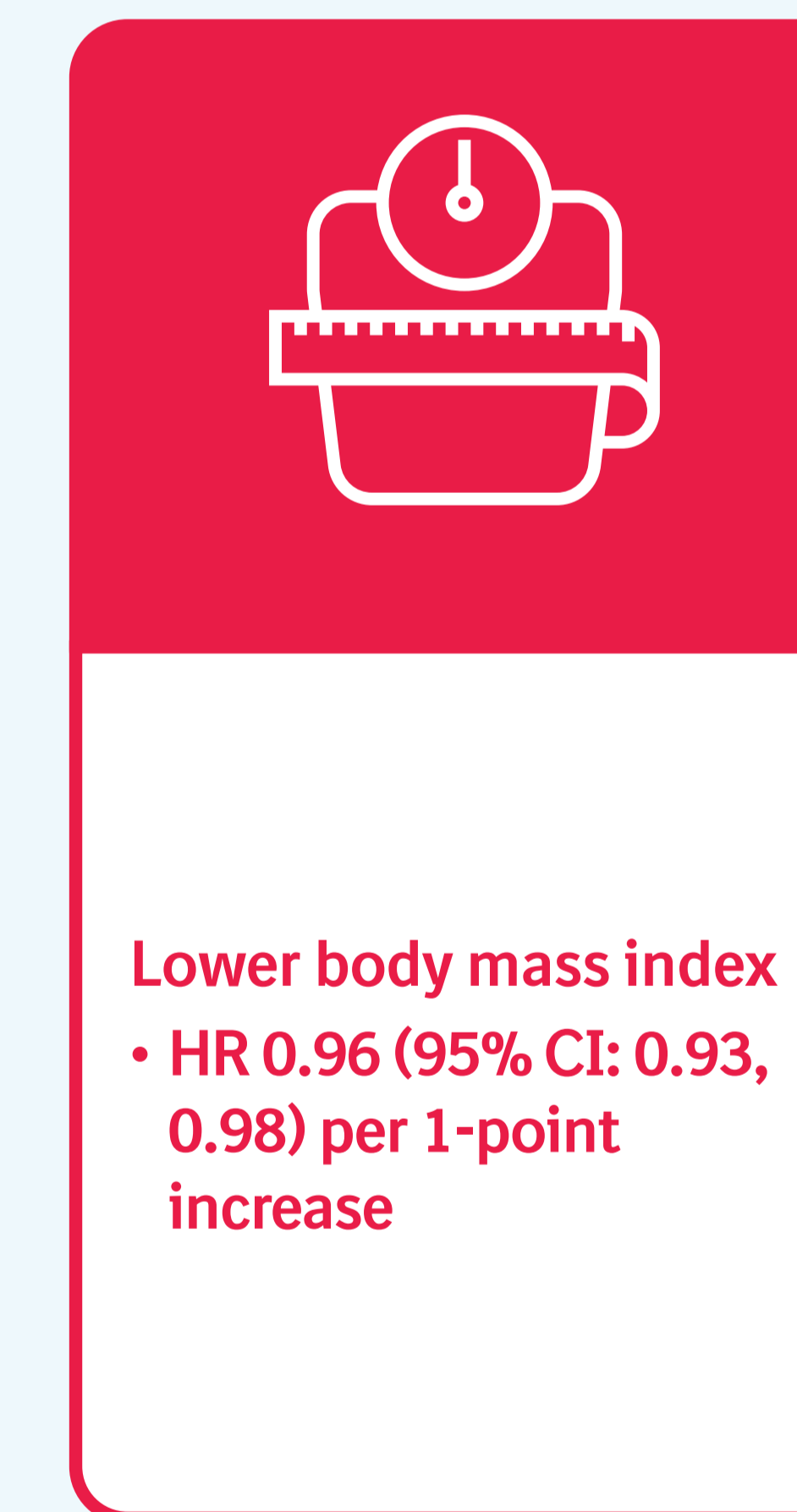
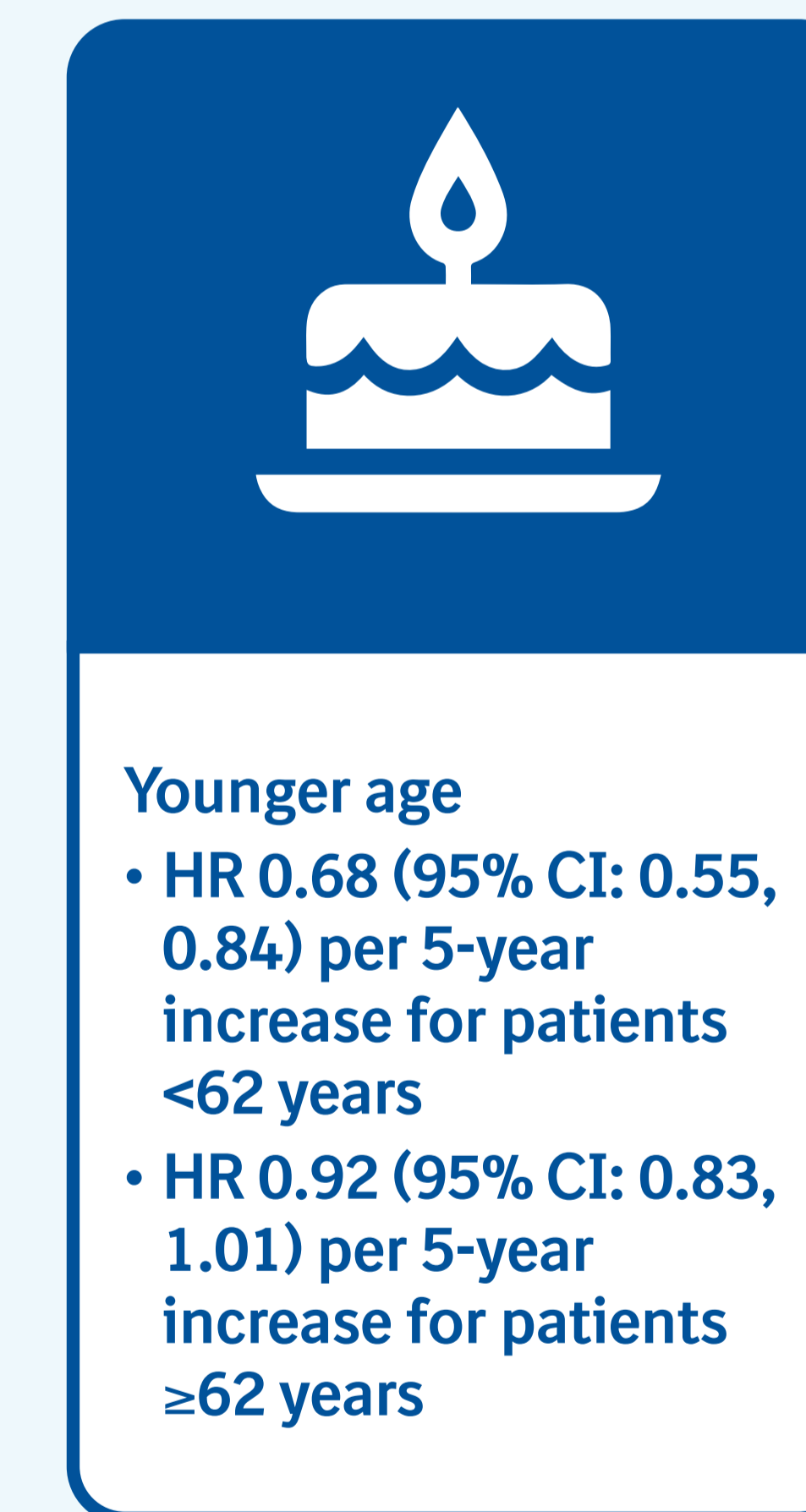
	Hospitalized during follow-up (n=568)	Not hospitalized during follow-up (n=433)
73.8	Male	75.8
71 (66, 75)	Age, years	70 (66, 76)
93.0	White	92.4
29.0 (25.9, 32.6)	Body mass index, kg/m ²	28.8 (26.0, 31.8)
70.6	Current or former smoker	61.9
69.2 (58.5, 79.3)	FVC % predicted	71.4 (60.8, 84.7)
40.8 (30.9, 49.8)	DLco % predicted	44.5 (35.5, 54.3)
38.9	Oxygen use with activity	28.4
22.9	Oxygen use at rest	15.9

Data are median (Q1, Q3) or % of patients without missing data.

First hospitalizations during follow-up



Factors assessed at enrollment that were associated with increased risk of respiratory-related hospitalization during follow-up



Based on time to first respiratory-related hospitalization.

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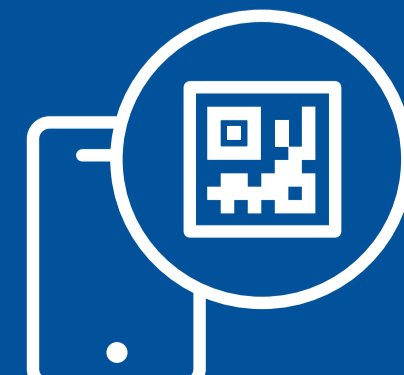
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IPF-PRO™ Registry enrolling centers: Albany Medical Center, Albany, NY; Baylor College of Medicine, Houston, TX; Baylor University Medical Center at Dallas, Dallas, TX; Cleveland Clinic, Cleveland, OH; Columbia University Medical Center/New York Presbyterian Hospital, New York, NY; Duke University Medical Center, Durham, NC; Froedtert & The Medical College of Wisconsin Community Physicians, Milwaukee, WI; Houston Methodist Lung Center, Houston, TX; Lahey Clinic, Burlington, MA; Loyola University Health System, Maywood, IL; Lynchburg Pulmonary Associates, Lynchburg, VA; Medical University of South Carolina, Charleston, SC; National Jewish Health, Denver, CO; NYU Medical Center, New York, NY; Piedmont Healthcare, Austell, GA; Pulmonary Associates of Stamford, Stamford, CT; Pulmonix LLC, Greensboro, NC; Renovatio Clinical, The Woodlands, TX; Salem Chest and Southeastern Clinical Research Center, Winston Salem, NC; South Miami Hospital, South Miami, FL; St. Joseph's Hospital, Phoenix, AZ; Stanford University, Stanford, CA; Temple University, Philadelphia, PA; The Oregon Clinic, Portland, OR; Tulane University, New Orleans, LA; UNC Chapel Hill, Chapel Hill, NC; University of Alabama at Birmingham, Birmingham, AL; University of California, Davis, Sacramento, CA; University of California Los Angeles, Los Angeles, CA; University of Chicago, Chicago, IL; University of Cincinnati Medical Center, Cincinnati, OH; University of Louisville, Louisville, KY; University of Miami, Miami, FL; University of Michigan, Ann Arbor, MI; University of Minnesota, Minneapolis, MN; University of Pennsylvania, Philadelphia, PA; University of Pittsburgh, Pittsburgh, PA; University of Virginia, Charlottesville, VA; UT Southwestern Medical Center, Dallas, TX; Vanderbilt University Medical Center, Nashville, TN; Vermont Lung Center, Colchester, VT; Wake Forest University, Winston Salem, NC; Washington University, St. Louis, MO; Weill Cornell Medical College, New York, NY; Wilmington Health and PMG Research, Wilmington, NC; Yale School of Medicine, New Haven, CT.

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