A total of 1,117 patients (27.3% of 4,097 PHOENIX US population) and their hospital bills from 21 study sites served as the study cohort. Cangrelor, as the first IV antiplatelet with rapid, potent, and consistent platelet inhibition, has been shown to reduce life-threatening thrombotic events, yet the economic benefits of proving such gains are not well-known. A separate decision analytic model was performed to compare costs and outcomes of cangrelor and clopidogrel treatment in the US, which is the focus of this analysis.

**Methods**

**Study Design and Conduct:**
- PHOENIX ECONOMICS was a non-interventional, retrospective bill review and substudy study, conducted at 21 US study sites.
- All US sites enrolled in the PHOENIX ECONOMICS trial had to include at least one PCI site. The PHOENIX ECONOMICS population was restricted to the subset of PCI patients.
- Patient data were collected from hospital discharge and outreach forms, and analyzed using SAS 9.4 software.

**Study Population:**
- All patients who had undergone PCI for ACS and NSTE-ACS at participating study sites were included in the analysis.
- Exclusion criteria included patients who died, underwent CABG, or were transferred out of the index hospital.

**Variables of Interest:**
- Costs of medications during the index hospitalization.
- Costs of supplies/implants.
- Costs of imaging performed during the PCI.
- Costs of medications during the PCI (including brinostat, heparin, GPI, and antiplatelet medications).

**Key Variations:**
- **Patient characteristics:**
  - Age (≥65 vs. <65 years).
  - Sex.
  - Prior CABG (%).
  - Diabetes.
  - Hypertension.
  - Smoking status.
  - Prior PCI.
  - CABG.
  - STEMI.
  - Non-STEMI.
  - TIA.
  - Death/MI/IDR/ST.

**Table 1.** Comparison of Demographics and Medical History between Treatments and the CHAMPION PHOEONIX US Population and PHOENIX ECONOMICS Population

**Table 2.** Comparison of Efficacy and Bleeding at 48 hours between Treatments and the CHAMPION PHOENIX US Population and PHOENIX ECONOMICS Population

**Table 3.** Summary of costs by treatment (PHOENIX ECONOMICS population).

**Table 4.** Summary of MICE-imputed costs by treatment (PHOENIX ECONOMICS population).

**Conclusions:**
- A total of 1,117 patients (27.3% of 4,097 PHOENIX US population) and their hospital bills from 21 study sites served as the study cohort. Cangrelor, as the first IV antiplatelet with rapid, potent, and consistent platelet inhibition, has been shown to reduce life-threatening thrombotic events, yet the economic benefits of proving such gains are not well-known. A separate decision analytic model was performed to compare costs and outcomes of cangrelor and clopidogrel treatment in the US, which is the focus of this analysis.

**References:**

**Disclosures:**
- This study was funded by The Medicines Company.