

## **Asia Pacific experts uncover gender-based disparity in diagnosis, treatment, and management of Atrial Fibrillation**

*A new report, including insights from international experts, reveals that Atrial Fibrillation diagnosis is more challenging in women, needing a tailored management approach*

**Singapore – December 6, 2022** – Biosense Webster, Inc., part of Johnson & Johnson MedTech<sup>†</sup>, today announced the release of a report titled, ‘*Atrial Fibrillation Exact's Toll on Women: Addressing the Gender Disparity in the Treatment and Management of Atrial Fibrillation in the Asia-Pacific Region*’.

Endorsed by the Asia Pacific Heart Rhythm Society (APHRS), the report brings together a panel of experts from various geographic locations including Australia, China, and Japan to address the unique features of Atrial Fibrillation (AFib) in women and provide recommendations for improving its management across the region.

AFib is the most common type of cardiac arrhythmia and impacts nearly 40 million people worldwide.<sup>1</sup> It is a progressive disease, and if left untreated, can get worse over time, or lead to other serious complications like heart disease or stroke.<sup>2,3</sup> Across Asia Pacific (APAC), the prevalence of AFib has increased in recent decades, with AFib-related hospitalizations on the rise. By 2050, it is estimated that 49 million men and 23 million women in the region will carry a diagnosis of AFib.<sup>4</sup> Given the rapid increase in the number of older populations in the region, the number of women with AFib is expected to rise sharply and exert a significant societal and economic burden on the population.

### **Key insights from the report**

- **100% of the experts who contributed to the report have observed sex-related differences in the epidemiology, diagnosis, and management approaches for AFib**
  - Women often present with AFib at a later age with more comorbidities than men and with more severe symptoms that can often be atypical. Women also have a higher risk of stroke and mortality from AFib and are more likely to have a pacemaker implant than men.
  - A combination of atypical symptoms, low awareness of AFib, and low accessibility to AFib screening tools make it challenging to diagnose women with AFib accurately.
  - Women are less likely than men to be offered rhythm control treatments including anti-arrhythmic drugs, electrical cardioversions, and catheter ablation.

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<sup>†</sup>The Johnson & Johnson MedTech Companies comprise the surgery, orthopaedics, vision and interventional solutions businesses within Johnson & Johnson's MedTech segment.

- **71% of the experts felt that an accurate diagnosis and management of AFib is more challenging in women**
  - Women often present with atypical symptoms, such as weakness rather than palpitations, which makes accurate diagnoses a challenge, and may only be diagnosed with AFib subsequently upon further clinical workups.
  - Digital technologies used for enhanced screenings also pose challenges, particularly in female patients. For example, the use of lotion among female patients hinders the proper attachment of electrodes.
- **43% of the experts tailor their management approach to AFib based on the patient's gender**
  - It was highlighted that the innate pathology and biological differences, such as thinner atrial walls and smaller body size of female patients could also contribute to a higher risk of complications, further exacerbating the complexities of managing these patients and the need to customize the approach.

Dr. Kelvin Chua, Senior Consultant, Department of Cardiology, National Heart Centre, Singapore, and one of the contributors to the report said, *“During our discussion, we noted that many female patients present with atypical symptoms, tend to be more averse to invasive treatment options, have a more prolonged decision-making process and a tendency to de-prioritize their care. Given the surmounting experiential evidence, there is a need to take a closer look to improve our understanding of the gender-based disparity to improve the quality of life of women with AFib.”*

Experts also agreed on the need for a holistic approach comprising collaborative partnerships to drive improvements in clinical outcomes for women with AFib. They further made recommendations for addressing the gender disparity, some of which include:

- **Increasing awareness** of the risk factors and the importance of early diagnosis and treatment of AFib
- **Facilitating increased uptake and adherence** to mHealth technologies among older women
- **Recommending equitable gender inclusion** in major clinical trials to evaluate gender-related differences
- **Promoting improved understanding** of gender-related disparities in AF epidemiology, presentation, and clinical course among the population and promoting tailored, context-specific strategies for women

Eisuke Yamamoto, Vice President, Cardiovascular and Specialty Solutions, APAC, Johnson & Johnson MedTech said, *“Enhancing the overall patient journey of women with AFib needs a collaborative approach among all stakeholders. As the global market leader in the science and technology behind the diagnosis and treatment of cardiac arrhythmias, we are committed to driving better patient outcomes through innovation, partnerships, and awareness. Towards this purpose, we hope that the report serves as a driver to facilitate equity for all patients with AFib, regardless of their gender.”*

#### **About Biosense Webster**

Biosense Webster is the global market leader in the science and technology behind the diagnosis and treatment of cardiac arrhythmias. Part of Johnson & Johnson MedTech, the specialized medical-technology company is headquartered in Irvine, Calif., and works across the world to advance the tools and solutions

that help electrophysiologists identify, treat, and deliver care. Learn more at [www.biosensewebster.com](http://www.biosensewebster.com) and connect on [LinkedIn](#) and [Twitter](#).

### **About Johnson & Johnson MedTech**

At Johnson & Johnson MedTech, we unleash diverse healthcare expertise, purposeful technology, and a passion for people to transform the future of medical intervention and empower everyone to live their best life possible. For more than a century, we have driven breakthrough scientific innovation to address unmet needs and reimagine health. In surgery, orthopaedics, vision, and interventional solutions, we continue to help save lives and create a future where healthcare solutions are smarter, less invasive, and more personalized. For more information, visit <https://www.jnjmedtech.com>.

### **Cautions Concerning Forward-Looking Statements**

This press release contains "forward-looking statements" as defined in the Private Securities Litigation Reform Act of 1995. The reader is cautioned not to rely on these forward-looking statements. These statements are based on current expectations of future events. If underlying assumptions prove inaccurate or known or unknown risks or uncertainties materialize, actual results could vary materially from the expectations and projections of Biosense Webster, Inc. any of the other Johnson & Johnson MedTech Companies and/or Johnson & Johnson. Risks and uncertainties include, but are not limited to: uncertainty of regulatory approvals; uncertainty of commercial success; challenges to patents; competition, including technological advances, new products and patents attained by competitors; manufacturing difficulties and delays; product efficacy or safety concerns resulting in product recalls or regulatory action; changes to applicable laws and regulations, including global health care reforms; changes in behavior and spending patterns of purchasers of health care products and services; and trends toward health care cost containment. A further list and descriptions of these risks, uncertainties and other factors can be found in Johnson & Johnson's Annual Report on Form 10-K for the fiscal year ended January 2, 2022, including in the sections captioned "Cautionary Note Regarding Forward-Looking Statements" and "Item 1A. Risk Factors," and in the company's most recently filed Quarterly Report on Form 10-Q, and the company's subsequent filings with the Securities and Exchange Commission. Copies of these filings are available online at [www.sec.gov](http://www.sec.gov), [www.jnj.com](http://www.jnj.com) or on request from Johnson & Johnson. Neither the Johnson & Johnson MedTech nor Johnson & Johnson undertakes to update any forward-looking statement as a result of new information or future events or developments.

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1 Lippi G, Sanchis-Gomar F, Cervellin G. Global epidemiology of atrial fibrillation: An increasing epidemic and public health challenge. *Int J Stroke*. 2021 Feb;16(2):217-221. doi: 10.1177/1747493019897870. Epub 2020 Jan 19. Erratum in: *Int J Stroke*. 2020 Jan 28;:1747493020905964. PMID: 31955707.

2 Hugh Calkins, Gerhard Hindricks, Ricardo Cappato, et al. 2017 HRS/EHRA/ECAS/APHRS/SOLAECE expert consensus statement on catheter ablation and surgical ablation of atrial fibrillation. 2017.

3 Odutayo A, Wong CX, Hsiao AJ, Hopewell S, Altman DG et al. (2016) Atrial fibrillation and risks of cardiovascular disease, renal disease, and death: systematic review and meta-analysis. *Bmj* 354 i4482.

<sup>4</sup> Wong CX, Brown A, Tse HF, et al. Epidemiology of Atrial Fibrillation: The Australian and Asia-Pacific Perspective. *Heart Lung Circ*. 2017;26(9):870-9.