VA Heart Failure Network

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Outline

- Announcements (5 mins)
- Beta-Blockers (10 mins)
- Implanted Monitoring Devices (10 mins)
- National HF Training Program (10 mins)
 - Education for generalists / CBOCs
 - Setting up a Heart Failure Clinic
- Local Heart Failure Experience (20 mins)
 - Portland Greg Larsen

Looking for Interested VA Echocardiography Labs

- Create a multicenter registry of low LVEF patients to be linked with other VA data.
- Work toward a standard echocardiography report.
- Implement reminders.
- Examine quality of LVEF measurement.

Call for Description of HF Programs/Clinics

- Unique aspects
- Organizational factors (eg., leadership, resources, communication, staff, etc.)
- Why it worked (or didn't work)
 - Definition of Success
 - Lessons learned
 - Facilitators
 - Barriers

Contact: Anju.Sahay@va.gov

Guideline Modification to Recommend Specific Beta-blockers

Beta-Blockers: Draft VA Recommendation

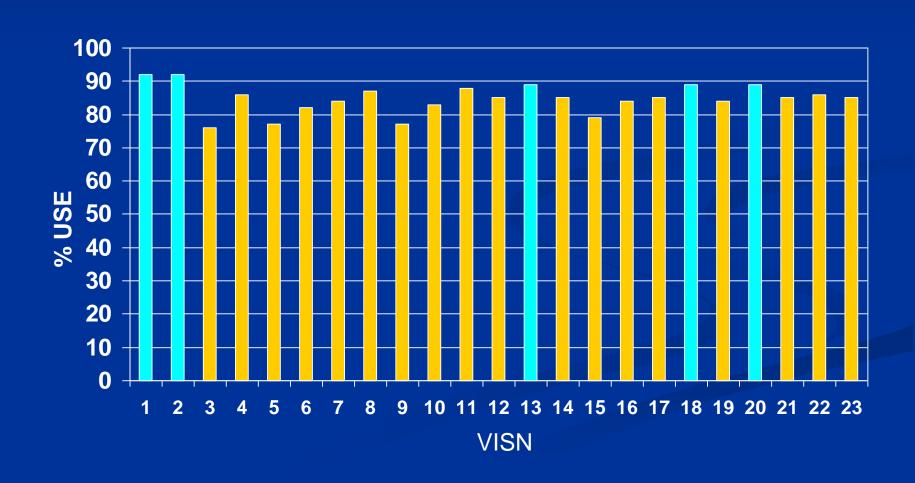
 Stable patients with current or prior symptoms of HF (Stage C*) due to systolic dysfunction should receive therapy with a beta-adrenergic blocker that has proven to reduce mortality (i.e., bisoprolol, carvedilol, sustained release metoprolol succinate) unless contraindicated.

How is the VA Doing? Beta-Blockers in Heart Failure

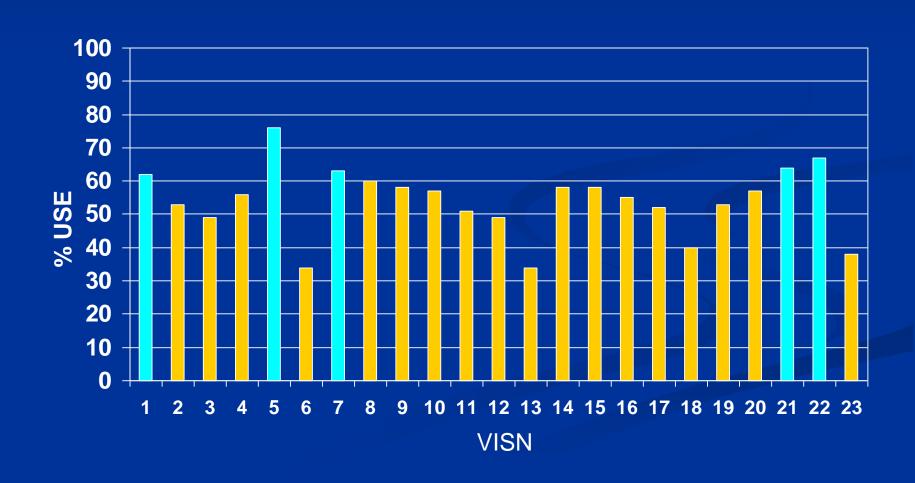
External Peer Review Program: Beta-Blocker Use

- 10,504 patients with an outpatient diagnosis of heart failure.
- 5,966 (56%) had an EF below 40% and, of these
- 5,497 had no contraindication to betablockers.
 - 4,646 (85%) were treated with a beta-blocker
 - 2,565 (47%) were treated with a recommended beta-blocker (carvedilol, metoprolol XL, bisoprolol)

VISN Distribution: Beta-Blockers



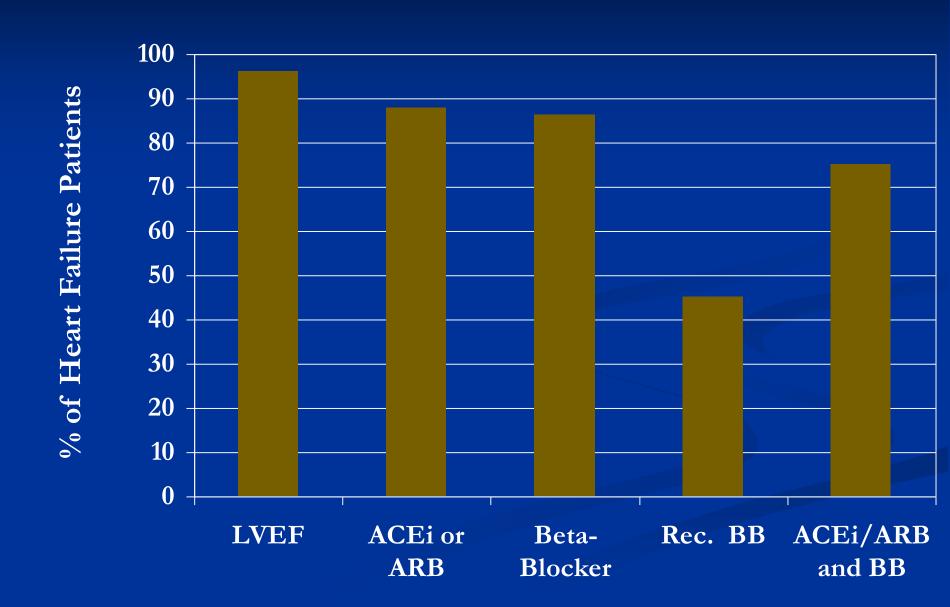
VISN Distribution: Recommended Beta-Blockers



Beta-Blockers Use Over Time



VA CHF Performance 2004-2005



Interventions to Improve Beta-Blocker Use

Potential Beta-Blocker Interventions

- Performance Measure
 - Outpatient
 - What about at Discharge?
 - Should specific medications be recommended?
 - Carvedilol
 - Metoprolol succinate
 - Bisoprolol
 - Should stable patients be switched to one of these three?

Initiation Titration Clinic

- Nurse Based
- Requires Staff
- We are developing the business case
 - cost-effectiveness analysis from a successful randomized trial

Implanted Monitoring Devices

- Hemodynamic monitors or devices that assess fluid content.
- Interest in "centralized" monitoring group to deal with the data similar to the ICD program.

Heart Failure Education

Interested in Setting Up a Heart Failure Clinic?

Options

- National Heart Failure Training (N-Heft) on line materials.
- Heart Failure Society of American developing materials
- If there is interest, we can modify the above to be VA specific.

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www.nheft.org





National Heart Failure Training Program

Today is March 1, 200

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Welcome to N-HeFT for Medical Professionals

We have recently redesigned our program for busy health care professionals challenged with the information explosion and increasing demands on limited resources, especially time. You now have access to training by our national network of heart failure experts through N-HeFT LIVE and N-HeFT ONLINE.

N-HeFT LIVE offers a one or two day training workshop for individual medical teams at one of 32 national sites led by some of the country's top heart failure experts. A full day of interactive sessions provides intensive small-group training on current optimal approaches to heart patient care at top tier heart failure clinics. There is no cost except travel and lodging.

In addition to N-HeFT LIVE we are excited to announce N-HeFT ONLINE. Presentations from our live workshops are now available online for medical professionals interested in learning how to improve the management of



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Training Instructions and Materials

Monthly Feature

Pulmonary Arterial Hypertension

- Diagnosis of PAH
- Treatment of PAH

NHEFT Leadership

NETWORK MEMBERS

The combined strength of all the members of the N-HeFT network has contributed to successfully reaching our goals. Our list of members includes the following:

- Executive Council,
 - o Co-Director-Dr. Ileana Piña (click for bio)
 - o Co-Director-Dr. Hector Ventura (click for bio)
 - Editor-in-Chief Dr. Mark Dunlap (click for bio)
 - Executive Director Jeanne A. Hitch, MEd, MA, LPC,
- N-HeFT staff
 - Lead Clinical Coordinator-Julie Gee, RN,

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Cardiology Care Core Curriculum

The explosion of new information in the field of cardiovascular disease and the increasing demand for accountability necessitates better ways to communicate real time information. In addition to expanding the scope of the program and adding depth, flexibility and convenience, the online component of

N-HeFT includes a bridge to our network of experts through our email. Online curriculum provides the format for introducing new concepts, reinforcing complex directives, and enrichment offering for the individual:

- · core curriculum for the cardiologist
- electives of interest to the cardiologist
- presentations of interest to specialists in the field of cardiology such as
 - Cardiovascular research and women related to heart failure or coronary artery disease.
 - Pulmonary Arterial Hypertension



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Training Instructions and Materials

Options for Adopting N-HEFT Programs

- Individual VA Heart Failure clinics could serve as educational sites for generalists/CBOCs.
- A national heart failure group could be formed to adopt/present curriculum
- Instruction could use technology to allow remote patient interaction examination.

Contact: Anju.Sahay@va.gov

Portland Experience Greg Larsen, MD

Next Call

- May 1st 10 am Pacific/ 1pm Eastern
- Please let us know if you would like to discuss heart failure related programs/experience.
 - Positive or Negative
- Any VA investigators leading multicenter clinical trials looking for sites.