

Heart Failure Network

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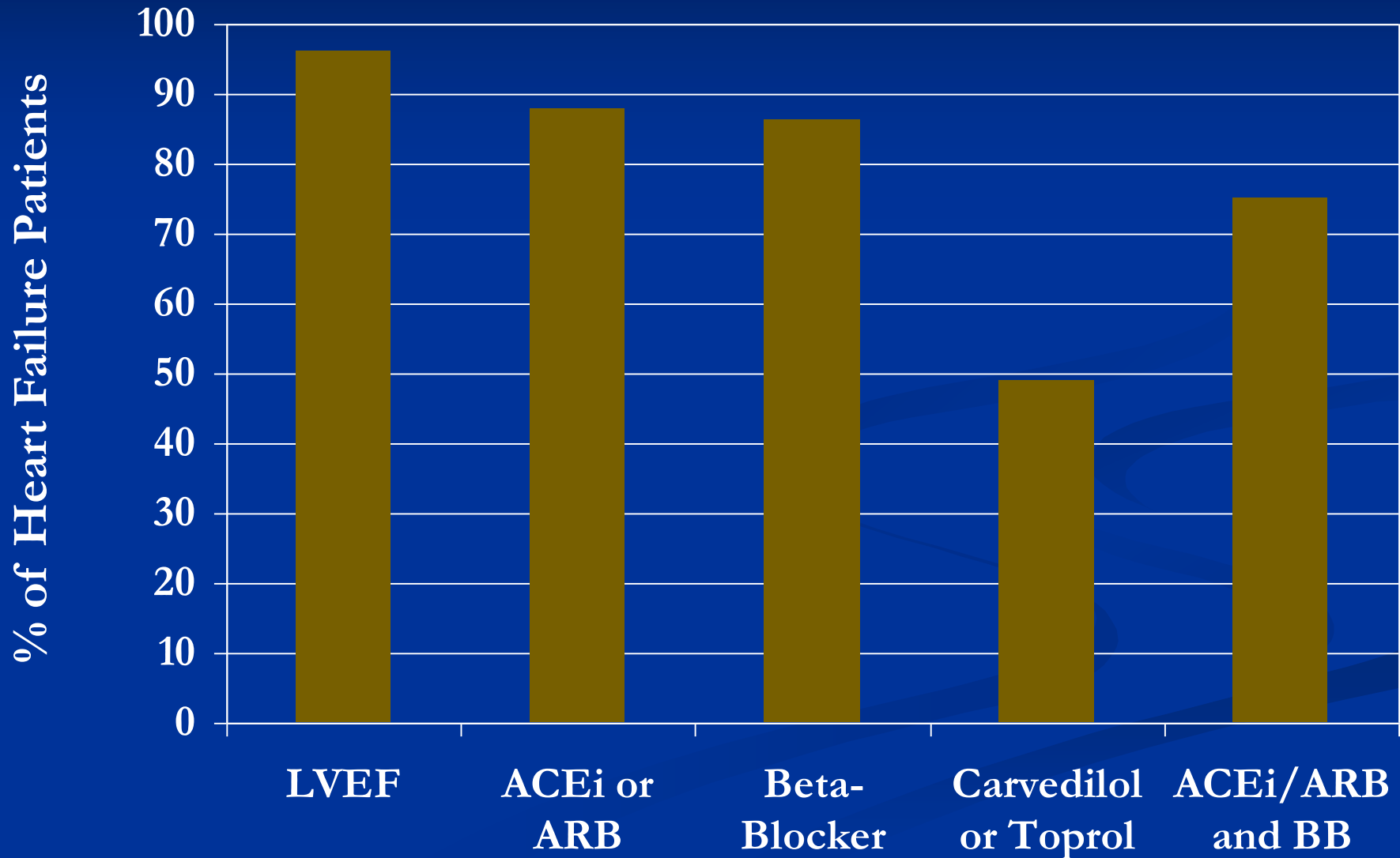
Outline

- Quality of Heart Failure in the VA: EPRP Data
- Quality of Care Goal: Increased use of recommended beta-blockers
- Database/Registry of VA Heart Failure Patients

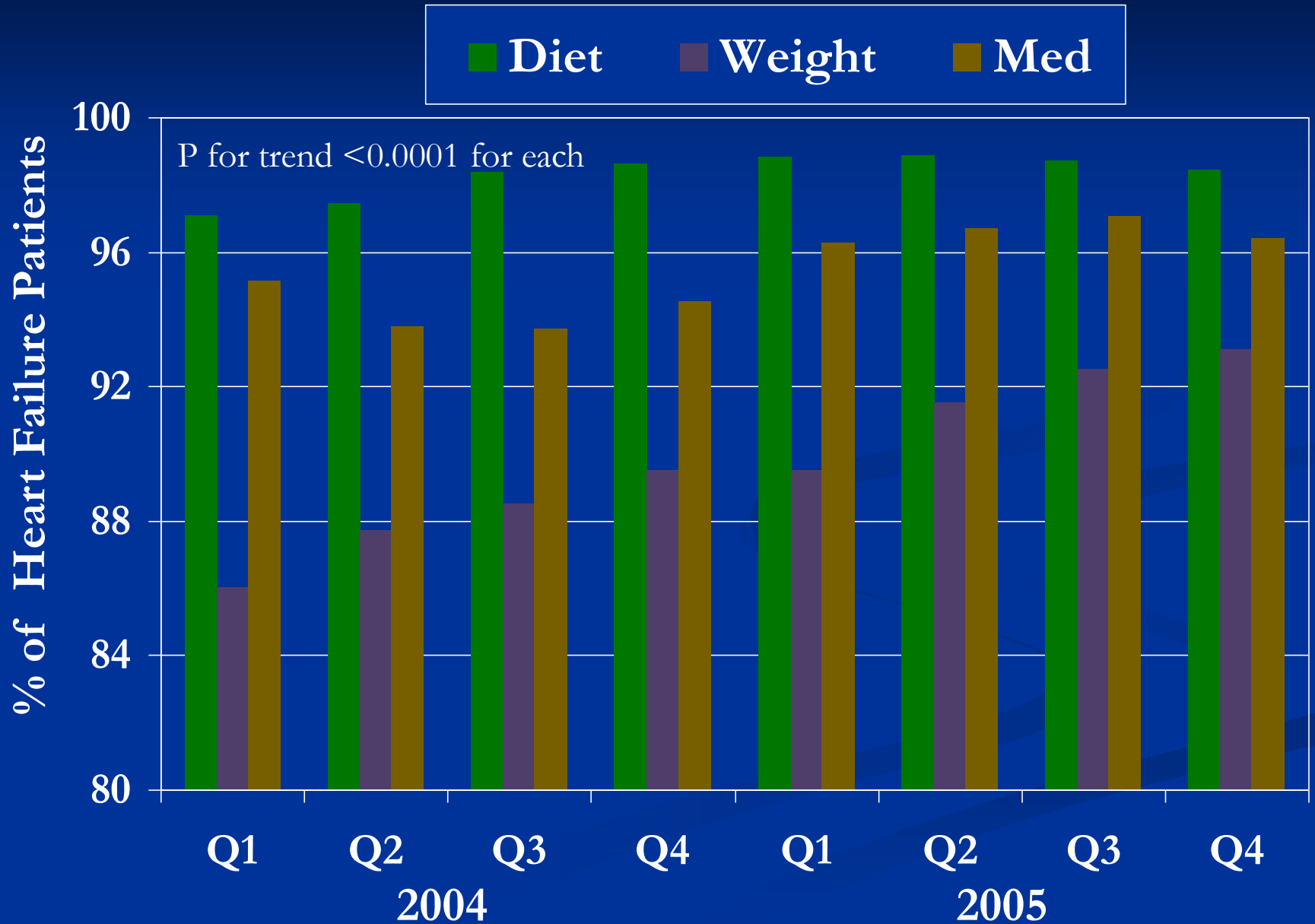
Guideline Compliance: EPRP Chart Reviews 2004-2005

- HF inpatients identified, prior outpatient care reviewed if CHF was already diagnosed.
- 18,000 candidates for LVEF
- 10,328 candidates for ACEi or ARB
- 10,210 candidates for beta-blocker

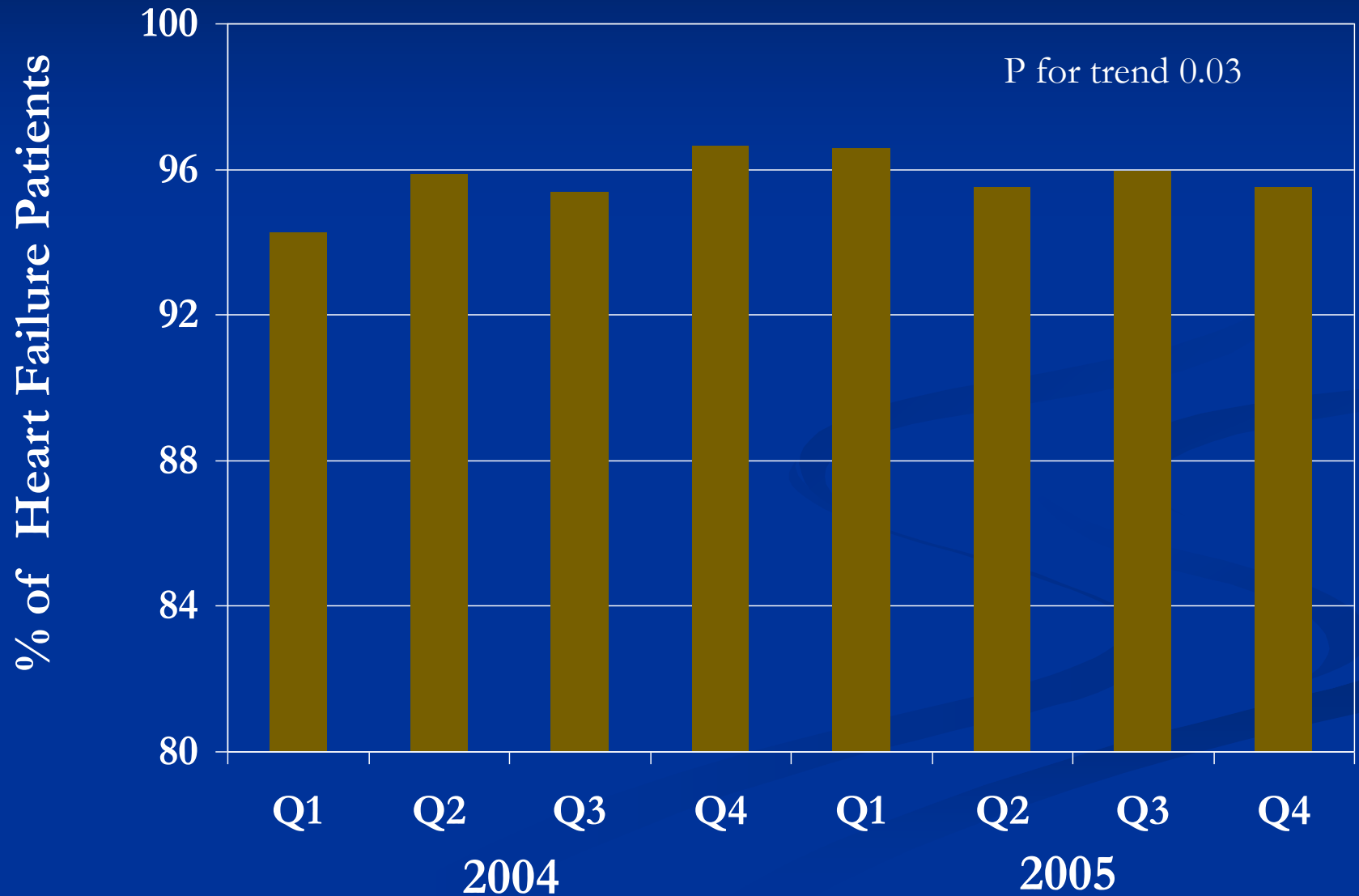
VA CHF Performance 2004-2005



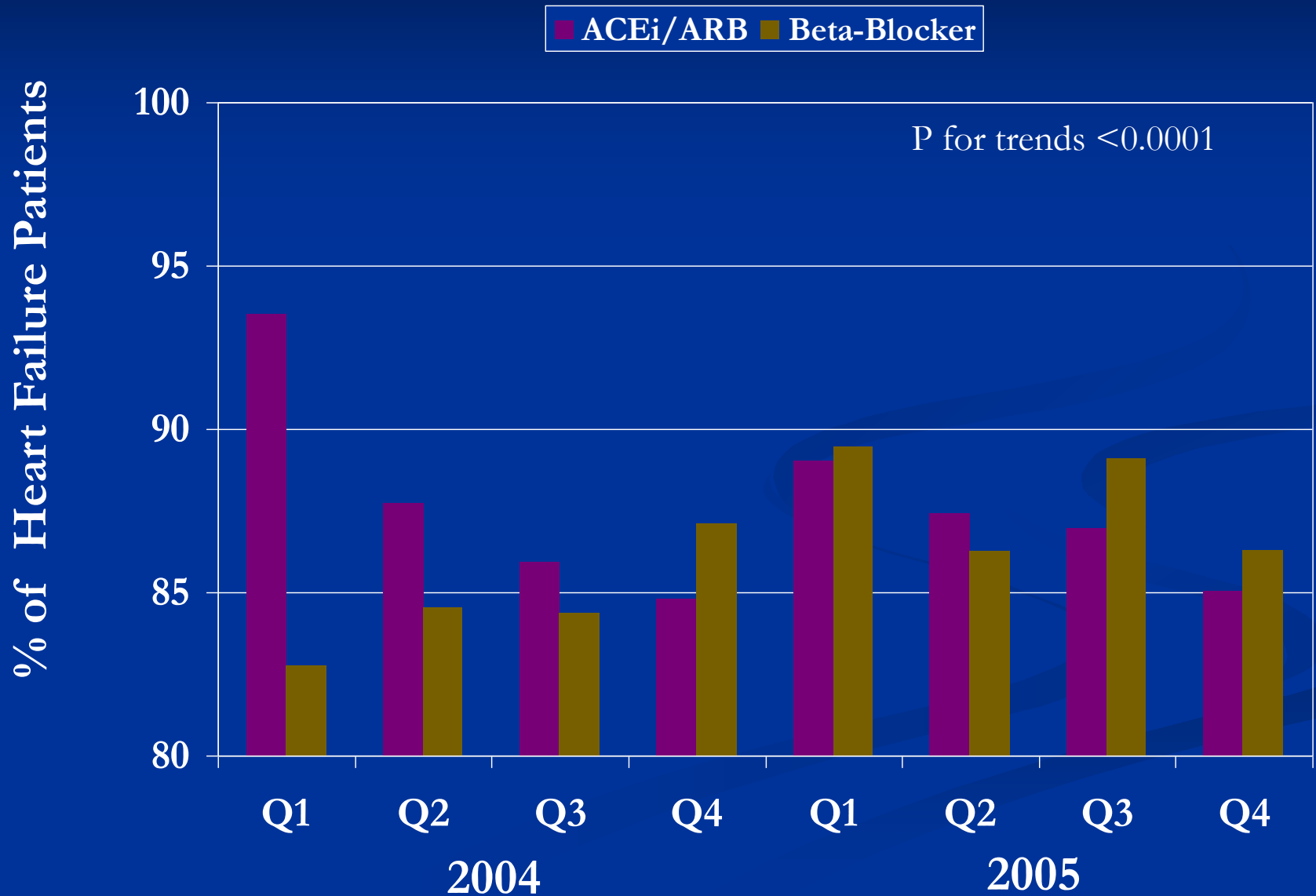
Education



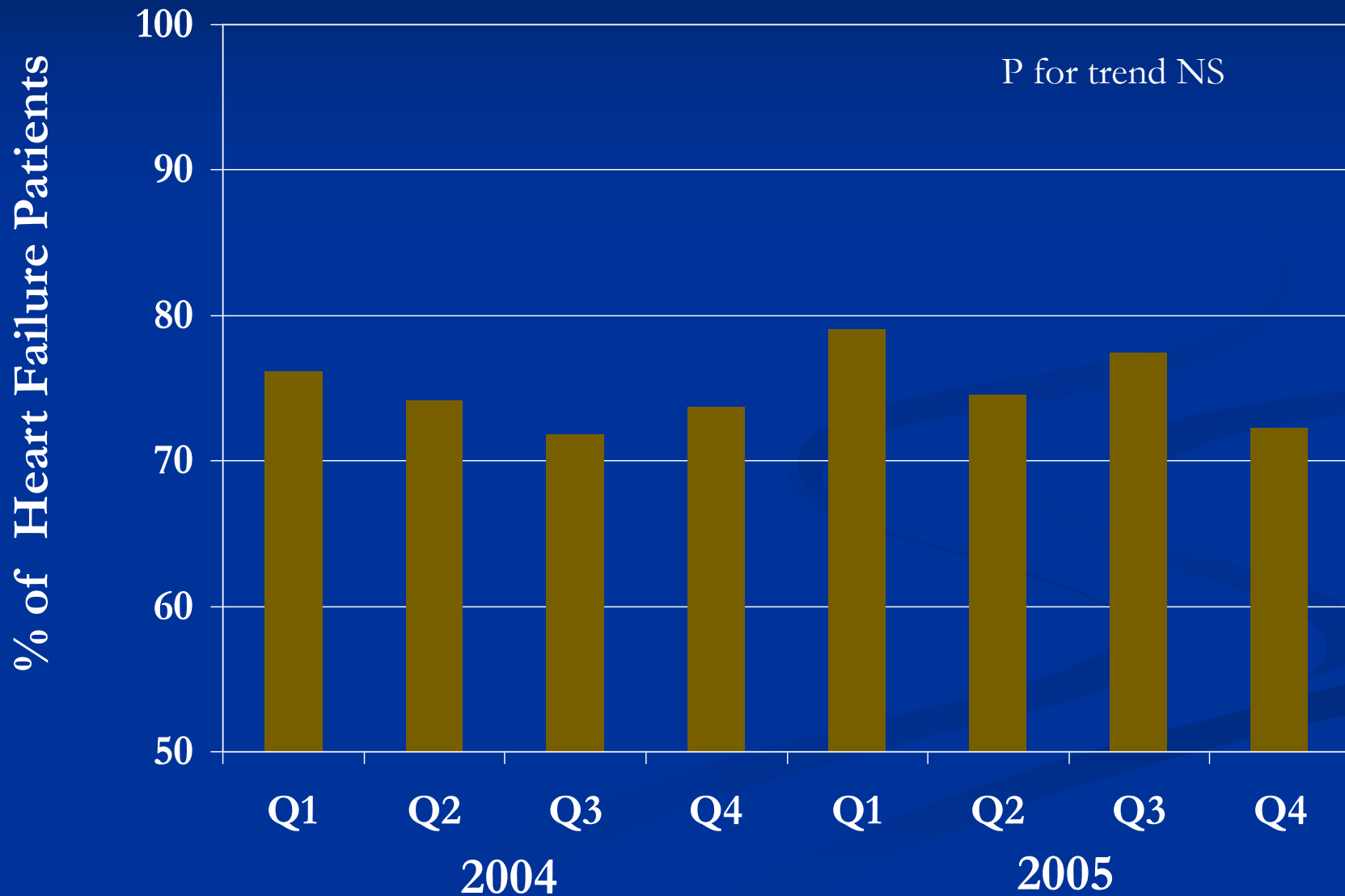
Trends in LVEF Measurement



Trends in ACEi/ARB and Beta-Blocker Use



Using Combination of ACEi/ARB And Beta-Blockers



Using Carvedilol or Metoprolol Succinate



Summary of VA CHF Guideline Compliance

- Doing well on LVEF, ACEi/ARB, BB and documentation of education.
- Recommended beta-blockers are only used in half of patients.

Goal: Increased use of Recommended Beta-Blockers

- Recommended by ACC/AHA Guideline and draft guideline from Pharmacy Benefits Management.
- Drugs
 - Carvedilol
 - Metoprolol Succinate
 - Bisoprolol (not routinely available in the VA)

Methods to Increase Use of Recommended Beta-Blockers

- Director Level: We are applying to make this a quality indicator and eventually a performance measure.

Methods to Increase Use of Recommended Beta-Blockers

- Pharmacy Intervention:
 - Identify those not on optimal therapy
 - ICD9 codes for heart failure
 - Prescription for non-recommended beta-blocker
 - EF < 40%
 - Will take chart review or local LVEF database.
 - Standardized switch to optimal beta-blocker

Methods to Increase Use of Recommended Beta-Blockers

- Echo Lab Reminder Intervention:
 - We have completed a randomized trial showing an increase in beta-blocker use.
 - For patients with low LVEF on echo, the echocardiographer adds in a line to the report saying certain beta-blockers are recommended.

Methods to Increase Use of Recommended Beta-Blockers

- CPRS Reminder Intervention:
 - A reminder could be created that would identify patients with
 - ICD9 codes for heart failure
 - Prescription for non-recommended beta-blocker
 - Provider would be prompted to state if the LVEF was $< 40\%$
 - If the response is YES, then they would need to switch the patient to a recommended beta-blocker or provide a reason for not doing so.

Methods to Increase Use of Recommended Beta-Blockers

- Looking for sites interested in trying one or more of these interventions.
 - Pharmacy switching of medications in appropriate patients
 - Echo lab reminder
 - CPRS reminder

Discussion

Database-Registry of VA HF Patients

- National VA Data: Diagnoses, admissions, medications, selective labs.
- What is missing?
 - LVEF Data

VA HF Database-Registry

- Looking for those sites with echocardiography databases.
 - Local IRB approval required to send the data within the VA.
 - Steering committee of those supplying data.
 - CHF QUERI would provide some programming support to answer questions prioritized by the Steering Committee.

Discussion