

Improving awareness and adherence to medications amongst heart failure patients is the most cost effective way of reducing healthcare costs

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Background: Heart Failure (HF) is a common medical condition and an important public health issue. This carries with it high mortality and frequent hospitalization. There is generally high re-admission rate and patients of heart failure tend to have a duration of stay in the hospital. Heart failure management is costly and puts a burden on healthcare budget. Lack of awareness of different aspects of management of heart failure leads to poor adherence to treatment which further adds to the healthcare cost. Despite a number of evidence based medications being available, the utilization are not always satisfactory.

Objective: We conducted a study to explore patients' understanding and adherence to Heart Failure (HF) medications at a general hospital setting.

Materials and Methods: We prospectively studied from January 2016 till December 2017, 196 patients (outpatients plus inpatients) of HF at our hospital. The information was gathered by oral interview as well as using questionnaire.

Results: There were 110 male and 86 female patients with average age of 54 years. The majority of patients (78%) were in NYHA class II and III and 72% of patients were from Outpatient visits. 15% of patients stopped or reduced the dose of diuretics on their own as they thought they didn't need them anymore or they were thought to interfere in their life style. 36% patients believed that ACE Inhibitors or ARBs were for blood pressure and therefore they had either stopped or were intending to stop. 43% patients were not keen on taking beta-blocker because of fear of various side effects and 12% of them already stopped the beta-

blocker on their own. 56% of patients did not like the idea of increasing the dose of ACE Inhibitor, ARBs or beta-blocker to the maximum, mainly out of fear of side effects. In addition, 54% of the patients reported that they were not informed by the prescribing physician regarding the purpose and benefits of up titrating the dose of these medication. Patients were ignorant of the role of different HF medications such as Aldosterone antagonists(86%), ACE Inhibitor or ARBs (76%), Beta blocker(70%). None of the patients who were on Ivabradine knew the role of the drug in HF but at the same time were not informed of any known side effects.

Conclusion: Inadequate understanding and poor adherence to medications is a common problem among heart failure (HF) patients. as shown in our study. Inadequate adherence leads to increased HF de-compensation, reduced exercise tolerance, poor quality of life and higher risk for hospital admission and death. They all lead to increase in heart failure treatment and management costs.

Speaker Biography

Syed Raza graduated from Aligarh University in India in 1993. After completing his postgraduate degree in Medicine from the same university, he moved to the UK for higher specialist studies. He successfully completed MRCP and CCT and later also awarded Fellow of the Royal College of Physicians of Edinburgh. He was awarded professor John Goodwin prize for outstanding performance in Diploma Cardiology exam at Hammersmith Hospital, University of London in 2001. He is Fellow of American College of Cardiology, American College of Chest Physicians as well as Fellow of European Society of Cardiology. He is currently serving as consultant in Cardiology at Mid Cheshire Hospitals, NHS trust, UK. He is the educational coordinator and examiner for MRCP exam for the Royal College of Physicians of Edinburgh.

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