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QUALITY OF CARE AND OUTCOMES ASSESSMENT

INTERNATIONAL VARIATION IN CARE AMONG PATIENTS HOSPITALIZED FOR HEART FAILURE: AN ANALYSIS OF THE ACUTE DECOMPENSATED HEART FAILURE NATIONAL REGISTRY UNITED STATES AND ACUTE DECOMPENSATED HEART FAILURE REGISTRY INTERNATIONAL

ACC Poster Contributions

Ernest N. Morial Convention Center, Hall F

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Background: Acute decompensated heart failure (ADHF) is a global problem; however, the extent of evidence-based therapy use, care patterns and the length of stay (LOS) after hospital admission internationally is not well described.

Methods: We compared HF hospitalizations in the ADHERE Core registry from 04/05-03/06 and ADHERE International-APLA registry from 03/05-01/09. Hospitalizations were stratified by region: US, Asia Pacific (AP) or Latin America (LA). Patient characteristics and therapies were compared.

Results: There were 16,994 (61%), 10,171 (36%) and 733 (3%) ADHF hospitalizations from 86 US, 43 AP and 27 LA centers. Median age of US, AP and LA patients was 75, 67 and 65 years, ($p < 0.0001$). Among US patients, fewer were male (US 49%, AP 57%, AP 61%; $p < 0.0001$) and CAD was more common (57% versus AP 50%, LA 30%; $p < 0.0001$). LA had increased use of inotropes (28% versus US 7%, AP 15%; $p < 0.0001$) and IV vasodilators (20% versus US 18%, AP 14%; $p < 0.0001$). The median LOS (IQR) was 4 (3,7), 6 (3,10) and 10 (5,19) days in US, AP and LA. Median time to first IV diuretic was lowest in AP and highest in LA. IV diuretic use in the ED was highest in the US, followed by AP then LA. US sites had increased adherence to EBT at discharge, except aldosterone antagonist for LVSD (Table).

Conclusion: Patient characteristics, patterns of care and length of hospitalization differ significantly for HF hospitalizations between US, LA and AP regions. Strategies are needed to improve care quality and outcomes among HF patients worldwide.

Quality of Care Metrics by Geographic Region				
Quality Metric	United States (N=16,994)	Asia Pacific (N=10,171)	Latin America (N=733)	P-value
Inpatient care: Time to first IV diuretic (hours) Median (IQR)	2.5 (1.1,5.8)	2.1 (0.8,6.6)	3.0 (1.0,9.3)	<.0001
Inpatient care: IV diuretic in ED (%)	76	60	56	<.0001
Discharge care: Discharge instructions (%)	99	94	87	<.0001
Discharge care: Smoking cessation (%)	79	24	13	<.0001
Discharge care: LVSD discharged on ACE/ARB (%)	78	74	72	<.0001
Discharge care: LVSD discharged on beta blocker (%)	84	49	57	<.0001
Discharge care: AFib discharged on warfarin (%)	61	43	38	<.0001
Discharge care: LVSD discharged on aldosterone antagonist (%)	28	43	50	<.0001