

Quality improvement program increases hospitals' adherence to evidenced-based care

October 27 2009

Participation in the American Heart Association's Get With The Guidelines quality improvement program significantly improves hospitals' adherence to evidence-based therapies and reduces gender- and age-related disparities in the care of coronary artery disease patients, according to research reported in *Circulation: Cardiovascular Quality & Outcomes*, a journal of the American Heart Association.

"It has been shown that, in many healthcare settings, evidence-based therapies for coronary artery disease are applied less to women than to men and less to elderly patients than to younger patients," said William R. Lewis, M.D., lead author of the study and chief of clinical cardiology at MetroHealth Medical Center and the Heart and Vascular Center in Cleveland, Ohio.

"We tested the hypothesis that participation in a quality improvement program, such as Get With The Guidelines, would improve care for all patients, therefore narrowing these known treatment gaps over time."

Lewis and colleagues analyzed the treatment of 237,225 coronary artery disease patients in 472 hospitals before and after the facilities implemented the Get With The Guidelines quality improvement initiative.

From 2002 to 2007 (the time of the study) the average adherence to quality measures in the program increased from 87.1 percent to 97.7 percent for patients younger than 75 years and from 83 percent to 95.1

percent in those 75 years and older, researchers said.

They found that gender data showed the average adherence to the guidelines increased from 86.5 percent to 97.4 percent in men and 84.8 percent to 96.2 percent in women.

"Specifically, we found that the gender gaps in care were more related to women younger than 75 years," said Lewis, who is also associate professor of medicine at Case Western Reserve University in Cleveland. "Elderly women were treated similarly to men. That trend continued over the study period and the gap narrowed to the point that it was clinically insignificant at the end of the study."

The study's results help to confirm that evidence-based quality improvement processes work, said Clyde W. Yancy, M.D., president of the American Heart Association and medical director at Baylor Heart and Vascular Institute in Dallas, Texas.

"At the start of the study, before Get With The Guidelines was in place, there was clear evidence of differences, based on gender and age, in the adequacy and quality of care for patients that presented with acute coronary syndrome," Yancy said. "The application of the quality improvement process improved outcomes for all patients — young and elderly; male and female."

While this study did not measure outcomes, Yancy said it is reasonable to conclude that the sometimes dramatic improvements in guideline compliance in the care of [coronary artery disease](#) patients could lead to improved outcomes, including saved lives.

A limitation to the study is that it showed only what happens within the Get With The Guidelines program and was not randomized to compare hospitals in that specific initiative to hospitals that were not, Lewis said.

More information: For more information on the American Heart Association's Get With the Guidelines program, visit www.americanheart.org/getwiththeguidelines .

Source: American Heart Association ([news](#) : [web](#))

Citation: Quality improvement program increases hospitals' adherence to evidenced-based care (2009, October 27) retrieved 14 May 2024 from <https://medicalxpress.com/news/2009-10-quality-hospitals-adherence-evidenced-based.html>

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