

Patient-centered Care Can Lower Risk of Death in Heart Attack

July 23 2010, By Katherine Kahn

In 2001, the Institutes of Medicine named patient-centered health care — based on patient preferences and needs — as a major and necessary change in America’s health care system to improve the quality of medical care.

A new study shows that this kind of care is not just a nice idea; it can also lower death rates from heart attacks.

The study, led by Mark Meterko, Ph.D., at the VA Boston Healthcare System, appears online in the journal Health Services Research.

Researchers looked at medical records and patient survey results for a national sample of more than 1,800 veterans hospitalized for a first heart attack. They evaluated different components of patient-centered care, such as access to [health care providers](#), courtesy, coordination of care, attention to patient preferences and whether patients were well prepared for discharge.

In addition, researchers evaluated the technical quality of care, such as whether patients received drugs or procedures recommended for the treatment of heart attacks by most cardiology experts.

Patients who received better patient-centered care had a reduced risk of death of about 1 percent at one year after the heart attack.

“If you look at this large group of patients and adjust the data so that

everyone has the same technical quality of care, those with better patient-centered care were more likely to survive,” said study co-author Paul Cleary, Ph.D., dean of the Yale School of Public Health at the Yale School of Medicine.

Although 1 percent might not seem like much, this translates into a 16 percent reduction in risk of death for the patients who received the best patient-centered care.

“Even though the effect is relatively small, if you asked people if they would prefer a place that had a 16 percent lower probability of mortality, I don’t know many who would say that’s not an important difference,” Cleary said.

Ann O’Malley, M.D., a senior researcher at the Center for Studying Health System Change in Washington, commented: “I think the study adds to the evidence that more patient-centered care in the form of better access and improved coordination and communication with patients about their preferences is associated with better [heart attack](#) survival.”

O’Malley, who has no affiliation with the study, said that while technical quality of care is very important, “we also need to ensure we’re delivering high-quality patient-centered care in terms of communicating with patients, in terms of coordinating their care and making sure they have good access to care when they need it.”

More information: Meterko M, et al. Mortality among patients with acute myocardial infarction: the influences of patient-centered care and evidence-based medicine. Health Services Research online, 2010.

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