

Hospital survival differs among Hispanic and non-Hispanic heart failure patients

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The odds of surviving their hospital stay for heart failure differ between Hispanic and non-Hispanic white patients according to their level of heart function, even when they received equal care in hospitals participating in the American Heart Association's Get With The Guidelines®–Heart Failure quality improvement program, researchers said.

The study, published in the <u>American Heart Association</u> journal, *Circulation: Heart Failure*, is the first in which researchers compare the <u>care</u> and outcomes of Hispanic to non-Hispanic heart failure patients admitted to U.S. hospitals with either preserved (normal) or reduced heart function.

"Hispanics have multiple risk factors for heart failure and many face barriers to receiving health care," said Rey P. Vivo, M.D., lead author of the study and a fellow in the Division of Cardiology at the University of Texas Medical Branch in Galveston and the Methodist DeBakey Heart and Vascular Center in Houston, Texas. "Hispanics make up the largest and fastest growing ethnic minority in the United States. Yet, we know very little about the quality and results of care for Hispanic heart failure patients."

Researchers reviewed data from 247 U.S. hospitals in the Get With The Guidelines-Heart Failure program in 2005-2010. They divided Hispanic and non-Hispanic white patients into groups based on preserved or reduced ejection fraction.



Ejection fraction measures a heart's contracting ability by how much blood the left ventricle pumps out with each heart beat. Heart failure patients with reduced heart function have lower than normal ejection fraction measures.

The researchers found:

- Among patients with preserved (normal) heart function, Hispanic patients were 50 percent less likely than non-Hispanic whites to die during their hospital stays.
- There were no differences in hospital survival between Hispanic and non-Hispanic heart failure patients with reduced heart function.
- There were no major differences in quality of care among any Hispanic and non-Hispanic whites, regardless of heart function.
- The quality of care at Get With The Guidelines-Heart Failure hospitals improved consistently during the five years of the study.

"One possible reason for the survival difference between heart failure patients with preserved <u>heart function</u> is that Hispanics tend to be younger and may not be as sick as hospitalized white heart failure patients," Vivo said. "That could be because Hispanics are more likely to have inadequate or no health insurance. So, they are more likely to go to the hospital for their care, versus seeking care in doctors' offices or outpatient clinics."

The finding that hospitals improved their adherence to quality of care guidelines for all heart failure patients, regardless of ethnic background, is encouraging, according to Vivo.

"The study suggests that participation in quality of care initiatives, such



as Get With The Guidelines, is a positive step toward reduction in healthcare disparities, in terms of delivering quality of care to all heart failure patients," he said.

In future studies, researchers should focus on what happens to <u>heart</u> <u>failure</u> patients from diverse ethnic groups after they leave the hospital, such as looking at readmission rates for six months or one year, Vivo said.

Provided by American Heart Association

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