

Online treatment beneficial to heart disease patients

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Patients with vascular disease are at higher risk of suffering a further event or death. Treatment of vascular risk factors by nurse practitioners is proven to be very effective in reducing this risk although treatment goals are often not reached and it is costly and time-consuming. Previous studies did not show clear beneficial effects but this study looks at one year effect in a relatively large group of patients.

Researchers from the University Medical Center Utrecht in The Netherlands, therefore carried out a <u>randomised controlled trial</u> to assess whether including an internet-based programme would be effective in reducing <u>vascular risk factors</u> in patients with the disease.

The internet-based programme included a personalised website, mail communication via the website with a nurse practitioner, self-management support, monitoring of disease control and pharmacotherapy. The study lasted 12 months and included 330 participants.

The main outcome of the study measured a relative change in the Framingham Heart score after one year. The Framingham Heart Score represents the predicted 10-years risk for <u>coronary heart disease</u> and is developed for patients free of vascular disease.

Results show that after one year, Framingham Heart Scores had fallen 12% further among patients who took part in the internet-based programme, compared with controls. The programme made a small



difference to participants risk scores that was statistically significant in two out of three analyses.

Other outcomes measured included whether the participants had ever smoked, blood pressure, weight, height and <u>waist circumference</u>. Participants showed improvement in smoking (8 smokers stopped compared to 4 starting in usual care group), BMI, blood pressure and renal function.

The authors conclude that an internet-based nurse-led vascular prevention programme, on top of usual care, may help reduce long term risk of vascular event or death. They stress that the clinical importance of this is "small and limited" but do state that this intervention would be easy to implement in clinical practice and might be useful for various groups of patients at high cardiovascular risk.

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