

Follow-up by trained nurses helps myocardial infarction patients

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The quality of life of elderly myocardial infarction patients can be significantly improved without extra costs by means of so-called case management following hospitalization. Health economists from the Helmholtz Zentrum München have reported these results in the journal *Value in Health*.

According to the authors headed by Dr. Hildegard Seidl from the Institute of Health Economics and Health Care Management (IGM) and Dr. Inge Kirchberger from the Institute of Epidemiology II (EPI II), regular contact and information programs provided by trained nurses additionally produce further positive effects: improved muscle strength and blood fat levels with less significant physical restrictions and healthier diets of the patients.

The results are based on the evaluation of data from the KORINNA study, in which the scientists examined more than 300 cardiac infarction patients aged 65 years or older. After being discharged from the hospital, the patients were randomly divided into two groups. One group received the customary treatment in accordance with German standards, while the other additionally received so-called case management support from appropriately trained nurses. This included such measures as informative material at the time of the hospital discharge, home visits, and regular telephone contact (at least every three months).

First author Seidl explains the hypothesis: "We wanted to test whether or not the greater information density on topics such as medication intake,

nutrition, and psychosocial aspects, combined with instructions on the measurement of important parameters such as blood pressure, pulse or blood sugar levels in patients, leads to improved quality of life. Because according to the authors, older patients with [myocardial infarction](#) frequently suffer from concurrent conditions that can lead to multiple medications, reduced quality of life, and readmission to the hospital. In Germany, however, until now no case management program has been offered and evaluated for elderly patients with myocardial infarction.

"Good information basis for rational decisions"

"Our health care system faces constantly increasing costs due to demographic developments and expensive innovations," reports study leader Prof. Dr. Rolf Holle. "Cost-effective solutions that improve the patients' health are more necessary than ever," the IGM deputy director states. It is therefore useful to see if the results that have now been published should also lead to possible treatment recommendations.

"The study that we conducted creates a good information basis that the relevant healthcare policy authorities can use to make rational decisions," Seidl explains. "The results provide scientific evidence that supplementary care in a case management program can cost-effectively improve the health of elderly [patients](#). It is worth considering adding a cardiac infarction diagnosis to the guideline for transferring a physician's activities to a nursing staff* in order to allow case management for this patient group."

Myocardial infarction is one of the leading causes of death around the world. Patients who have already suffered a cardiac infarction have a high risk for a renewed heart attack, but this risk can be reduced if the patient makes certain life style changes and reliably takes the prescribed medication. These changes are facilitated by close and continuing contact with therapists, and this contact can be promoted by low-

threshold programs.

More information: Hildegard Seidl et al, The 3-Year Cost-Effectiveness of a Nurse-Based Case Management versus Usual Care for Elderly Patients with Myocardial Infarction: Results from the KORINNA Follow-Up Study, *Value in Health* (2016). [DOI: 10.1016/j.jval.2016.10.001](https://doi.org/10.1016/j.jval.2016.10.001)

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