Interventions to decrease cardiovascular disease are not one-size-fits-all

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In a recently published study in the Annals of Family Medicine, Aimee English, MD, et al, describe a cluster-randomized trial evaluating the differential impact on cardiovascular disease care of engaging patients and communities in practice transformation in addition to standard practice facilitation support.


Cluster-randomized trials with community-based interventions present study design and implementation challenges. The BCTs elicited unique contextual messages and materials, suggesting that interventions designed to help primary care practices decrease CVD risk may not be one-size-fits-all.
