Limited health literacy is a major barrier to heart disease prevention and treatment

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Limited healthy literacy is a major barrier blocking many people from achieving good cardiovascular health or benefiting from effective treatment for heart attacks, heart failure, strokes and other cardiovascular diseases, according to a scientific statement published in the American Heart Association's journal *Circulation*.

Health literacy encompasses not only the ability to read, but skills such as being able to ask questions about your care, understand documents with medical terminology, perform the basic arithmetic needed to take medication correctly and negotiate with health care providers and insurance companies. Inability to do these things effectively can have serious health consequences.

The statement provides an overview of the issues faced by people with limited health literacy, based on a review of studies on the topic that were published between 2004 and 2016. Highlights include:

- More than half of people with low health literacy did not recognize a blood pressure reading of 160/100 mmHg as abnormal and limited health literacy makes it 1.8 to 2.7 times less likely that those with high blood pressure will get it under control;
- People with low health literacy are more likely to be dependent on nicotine and are 3 times as likely to relapse after going through a smoking cessation program;
- People with diabetes and low health literacy are more likely to
develop complications of the disease, such as diabetic retinopathy. They are 1.7 times less likely to use an online patient portal, which is an increasingly used technology for patient communication and disease management;
• Parents with low health literacy are twice as likely to perceive their overweight child as being normal weight.

"The opportunities for communication failure by healthcare providers who treat people for heart disease risk factors, heart diseases and strokes are rampant," said Jared W. Magnani, M.D., M.Sc., chair of the writing group for the scientific statement and associate professor of medicine at the University of Pittsburgh School of Medicine in Pennsylvania. "Many patients do not understand the written materials they receive as part of health care, or do not have the numeric skills to understand quantitative information. Also, medical care uses a considerable amount of specialized terminology, which some call jargon.

"A patient with limited health literacy may not understand that a stress test described as "positive" is not a good result," he continued. "Or we instruct patients to avoid sodium, when they may not know how to identify and quantify sodium intake or even how to interpret nutrition labels."

Currently, only 12 percent of Americans have the health literacy skills to successfully navigate the health care system, and the difficulties associated with inadequate health literacy will likely get worse, the committee found. Limited health literacy is common among racial and ethnic minorities, older adults, people who with limited English skills and those with less education and economic stability, according to the statement. The statement authors emphasized that even people with higher education may have poor or limited health literacy if they are not familiar with health terminology and face situations that beyond their normal experience.
"The last decade has seen technological and pharmacologic advances in health care, cardiac devices, and mobile health initiatives alongside a growing emphasis on shared decision-making and patient-reported outcomes. If we don't address health literacy these advances won't benefit many of the people who have the greatest need," Magnani said.

The authors of the statement advocate the use of The Universal Precautions Toolkit, which was created by the federal Agency for Health Research and Quality.

"The toolkit reminds us that health literacy is not a patient problem but is the result of the complexities of health care delivery. It calls on health care professionals to make changes that improve access to care for all patients," said Magnani. Some of the strategies recommended for healthcare providers in the toolkit include:

- Avoiding jargon and integrating pictures as teaching tools;
- Creating understandable forms, informed consents and brochures;
- Improving patient follow-up and telephone access;
- Asking patients to bring in all of their medications so that the healthcare provider can assess medication adherence and safety;
- Considering the patient's culture, customs and beliefs in their care;
- Linking patients to support from specialists, case management and community resources.

"We employ specialized care for our patients and expect them to understand the reasons for it and make lifestyle changes and take medications daily, many of them for life. We owe it to our patients to ensure that they fully understand their conditions and treatments," Magnani said.

Provided by American Heart Association

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