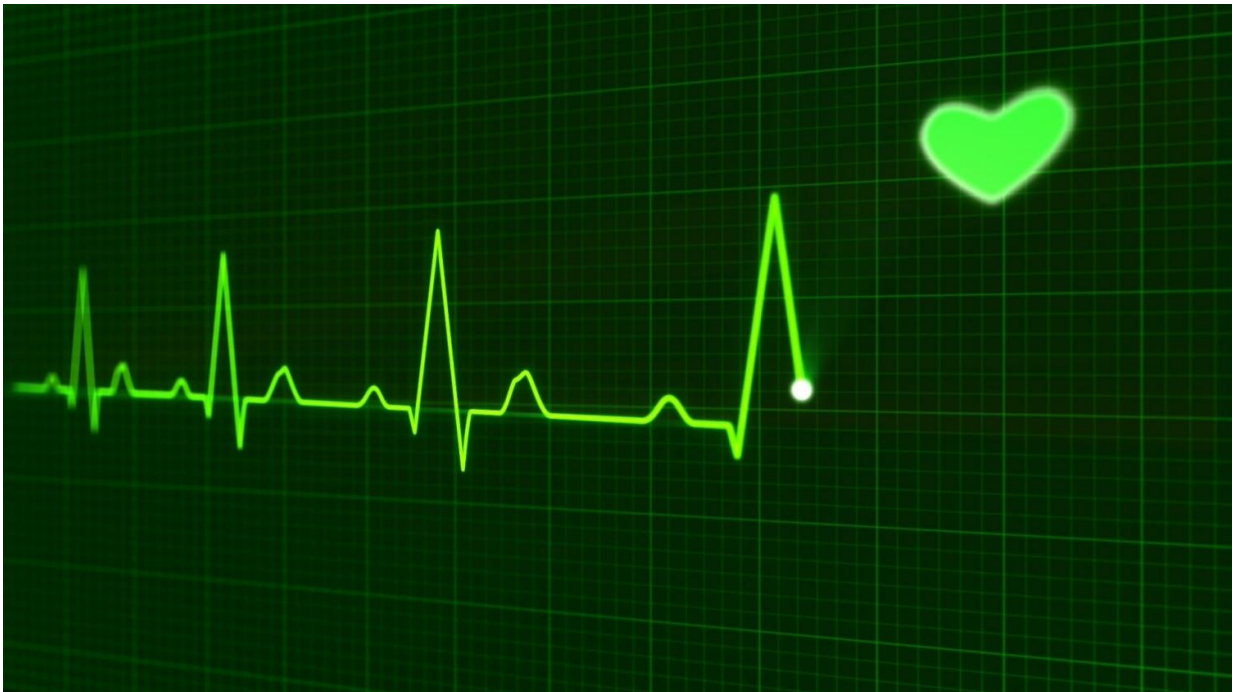


Improving cardiovascular health of the most vulnerable

January 17 2020, by Brittany Phillips



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Starting in 2016, a two-year partnership between the North Carolina Chapter of the American College of Cardiology (NCACC) and the North Carolina Association of Free and Charitable Clinics (NCAFCC) provided free lipid lowering therapy and clopidogrel to patients at seven free clinics in North Carolina. The results of this pilot study were recently published in the *Journal of the American College of Cardiology*.

"Through this pilot, we were able to increase the number of [patients](#) treated with [statin](#) medications, the number of statin [medication](#) tablets dispensed, and the use of high-intensity statins, resulting in significant decreases in total cholesterol and LDL levels," said Stouffer, who is the Ernest and Hazel Craige Distinguished Professor of Cardiovascular Medicine and chief of the division of cardiology.

"This shows the feasibility of a partnership between a medical specialty society and an association of free and charitable clinics, demonstrating the impact that a public health partnership can have on treating cardiovascular disease."

During year one, the seven clinics provided 1,296 patients with statin medications and dispensed a total of 178,384 tablets. During year two, the seven clinics provided 1,550 patients with statin medications, and dispensed a total of 279,474 tablets.

Altogether, the collaboration enabled more patients to receive statins (24% increase in year one and 45% increase in year two) and resulted in more statin tablets being dispensed (61% increase in year one and 83% increase in year two). In addition, there was an increase of 349% in the use of high intensity statin treatment in year one and a 38% increase in year two. In a random sample of 815 patients, who had lipid levels measured before and after initiation of the grant, total cholesterol decreased from 208 [173, 236] mg/dl to 175 [147, 209] mg/dl (p

During the first year, the seven clinics provided 70 patients with clopidogrel (9854 tablets) and during the second year, the seven clinics provided 81 patients with clopidogrel (13,205 tablets).

"In this project, the North Carolina chapter of the American College of Cardiology was able to provide important cardiovascular medications to a group of vulnerable patients. Most of the patients who attend [free](#)

[clinics](#) rarely, if ever, see a cardiologist. They usually only come to our attention when they get acutely ill and seek care in an emergency department. This project provides a model for specialty societies to improve the health of individuals who lack the resources to visit the specialist in their office."

More information: George A. Stouffer et al. Improving Patient Access to Medication, *Journal of the American College of Cardiology* (2019). [DOI: 10.1016/j.jacc.2019.11.002](https://doi.org/10.1016/j.jacc.2019.11.002)

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