

Study finds equitable heart failure care, but challenges remain

April 19 2023



Credit: American Heart Association

Black adults with heart failure (HF) are more likely to die than white adults with the same condition. A new study published today in *JAMA Cardiology* that used the American Heart Association's Get With The Guidelines—Heart Failure registry data to examine quality and outcomes at hospitals treating high proportions of Black patients with HF found that care is equitable, although areas for improvement remain to



examine quality and outcomes at hospitals treating high proportions of Black patients.

For the study, researchers used a comprehensive set of quality measures to examine data on clinical treatment decisions and health outcomes from nearly 500 hospitals fully participating in Get With The Guidelines—HF, an in-hospital program for improving care by promoting consistent adherence to the latest scientific treatment guidelines. They found that quality of <u>heart failure</u> care was equitable for 11 of 14 evidence-based clinical care measures and that there were no in-<u>hospital</u> disparities in care between Black and white patients.

"These findings suggest Get With The Guidelines can help hospitals achieve equitable care for patients hospitalized with heart failure, an important American Heart Association aim," said Gregg Fonarow, M.D., FAHA, an author of the study and an American Heart Association volunteer. Fonarow is interim chief of the division of cardiology, director of the Ahmanson-UCLA Cardiomyopathy Center, co-director of the Preventative Cardiology Program and the Eliot Corday Chair in Cardiovascular Medicine and Science at the University of California, Los Angeles. "While there remain critical population-level disparities in access to care, social determinants of health and care quality in other settings, the Get With The Guidelines—HF program is having an important impact."

The study suggests inequities in HF outcomes are not only driven by gaps in care quality at hospitals, but also that there is a need for renewed focus on public health and policy efforts to target upstream factors that disproportionately affect Black adults. Researchers note that the findings have important implications for public policymakers, health system leaders and clinicians as they work toward equitable delivery of HF care.

"For more than 20 years, Get With The Guidelines has made strides



toward equitable, evidence-based care for all," said Michelle Albert, MD, MPH, FACC, FAHA, volunteer president of the American Heart Association and the Walter A. Haas-Lucie Stern Endowed chair in cardiology and professor in medicine at the University of California at San Francisco (UCSF), admissions dean for UCSF Medical School and director of the CeNter for the StUdy of AdveRsiTy and CardiovascUlaR DiseasE (NURTURE Center). "This study shows the great strides we have made in heart failure care, as well as opportunities for even more improvement."

More information: Jamie Diamond et al, Quality of Care and Clinical Outcomes for Patients With Heart Failure at Hospitals Caring for a High Proportion of Black Adults, *JAMA Cardiology* (2023). DOI: 10.1001/jamacardio.2023.0695

Provided by American Heart Association

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