

Patients registered in a heart failure registry lived longer

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Dr. Lars H. Lund is Associate Professor at the Swedish medical university Karolinska Institutet. Credit: Ulf Sirborn

Heart failure patients registered in the Swedish Heart Failure Registry receive better medication and have a 35 percent lower risk of death than unregistered patients, according to a new study from Karolinska Institutet in Sweden. The findings are presented in the *European Journal of Heart Failure*.

Health quality registries are used for many purposes including to report quality of care and to identify areas for quality improvement. Sweden has been a pioneer in the establishment of quality registries for a broad range of diseases. The Swedish Heart Failure Registry (SwedeHF; RiksSvikt) registers clinical and treatment data for patients with [heart failure](#) from most hospitals in Sweden. RiksSvikt is voluntary, so some but not other patients get registered, and this is determined largely by the availability of staff and resources at local hospitals.

In the current study, a Swedish team comprising researchers at Karolinska Institutet, Linköping University, and Uppsala Clinical Research Center analyzed data from 231,437 patients who were diagnosed with heart failure in Sweden 2006-2013. A comparison between those who were registered in RiksSvikt and those who were not showed that the registered patients had a remarkable 35 percent lower risk of death.

The investment in quality registries in Sweden has provided helpful quality reporting and contributed to improved quality of care, but the concrete health benefits for patients have been less clear.

"Now we also see that in heart failure, quality reporting translates directly into better survival," says Associate Professor Lars H. Lund at Karolinska Institutet's Department of Medicine who led the study. "It is imperative that the investment in registries from the government, hospitals and clinicians continues to expand, as this will lead to better patient survival".

Further analyses showed that patients who were registered in RiksSvikt were more likely to receive heart failure medications than unregistered [patients](#), and that this to a large extent explained the difference in survival.

"There are several common treatments for heart failure which are known to cost-effectively reduce

the risk of hospitalization and death, but these are underutilized," says Associate Professor Lars H. Lund.

Heart failure is a common condition in which the heart is unable to pump sufficient quantities of blood around the body. It is the most common cause of hospitalization in Sweden and is associated with a high risk of death.

More information: Lars H. Lund et al, Association between enrolment in a heart failure quality registry and subsequent mortality-a nationwide cohort study, *European Journal of Heart Failure* (2017).
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