

SAND abstract No. 38 from the BEACH program 2002–03

Subject: Prevalence of chronic heart failure, management and control

Organisation supporting this study: Roche Products Pty Ltd

Issues: Chronic heart failure (CHF) is a condition with high mortality and a major burden in public health. This study investigated the prevalence of chronic heart failure (CHF) in general practice patients; management being used to treat CHF; whether the management was initiated by general practitioners or specialists; referrals to a cardiac specialist; clinical investigations being used to diagnose CHF; initiation of the clinical investigation of CHF.

Sample: 3,082 encounters from 106 GPs; data collection period: 2/4/2002 – 6/5/2002.

Method: Detailed in the paper entitled 'SAND Method: 2002-03' on the FMRC website (http://www.fmrc.org.au/publications/SAND_abstracts.htm).

Summary of results:

The age-sex distribution of respondents was similar to total BEACH sample of general practice encounters, with the majority (60.4%) of encounters with female patient and 18.7% of encounters with patient aged 65 years or over.

Of the 3,082 respondents, 3.2% (95% CI: 2.2–4.1) were diagnosed with CHF. Among these respondents, 51 (1.7%) were diagnosed with mild CHF, while 33 (1.1%) and 13 (0.4%) were diagnosed with moderate and severe CHF respectively. Patients aged 75 years or more had the highest age-specific-rate, 21.6% being diagnosed with CHF.

Diuretics were the most commonly used medication group in treating CHF, being taken by 64.9% of CHF patients. These were followed by ACE inhibitors (single or combination) (32.0%) and cardiac glycosides (10.5%). At generic level, frusemide was most commonly used in 52.6% of CHF patients, and was followed by digoxin and potassium chloride, being used in 20.6% and 11.3% of CHF patients respectively. Of the 182 medications being used to treat CHF, 51.6% was initiated by a GP and 48.4% by a specialist.

GPs indicated that on average increasing survival, relieving symptoms, and improving quality of life were equally important in managing CHF.

Of the 92 CHF patients who responded to the referral question, 81.5% were referred to a cardiac specialist at some point of time. Among these CHF patients, 24 (26.1%) were referred in the previous 12 months, 15 (16.3%) between one and three years ago, and 36 (39.1%) more than three years ago.

In order to diagnose CHF, chest x-ray had been used in 71.1% of CHF patients, echocardiogram (ECHO) had been used in 69.1%, and electrocardiogram (ECG) in 60.8%. GPs ordered 60.3% of chest x-rays, 19.0% of ECHO tests and 52.0% of ECGs, while specialists ordered the remaining tests.

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