MORBIDITY AND MORTALITY AMONG HEART FAILURE PATIENTS IN GALICIA, N.W. SPAIN: THE GALICAP STUDY

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INTRODUCTION

The cardiovascular disease that in recent years has increased most in incidence and prevalence is heart failure (HF). The associated significant increase in health expenditure is directly correlated with repeated admissions to hospital.

OBJECTIVE

The GALICAP study was designed to determine the characteristics and short-term prognosis of HF patients in Galicia (N.W. Spain) who have been admitted to hospital with a diagnosis of HF and have subsequently been attended by primary care physicians as well as specialists.

PATIENTS AND METHODS

Design. Prospective multicentre study involving 149 primary care physicians.

Setting. Primary care physicians selected randomly from among all (1,959) primary care physicians in Galicia.

Patients: Clinical and epidemiological information for 1,195 outpatients with HF were collected in 2006, with a mean follow-up of 6.5 ± 1.5 months. At end of follow-up, 26 patients (2%) had been lost from the study.

Main outcome measures: Survival rates were calculated by Cox´s proportional hazard model.

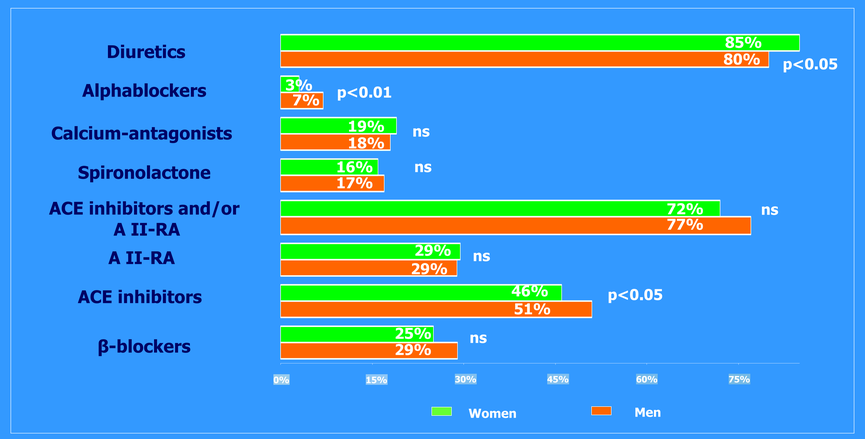
RESULTS

CHARACTERISTICS OF THE PATIENTS

	Total 1195	Men (48%)	Women (52%)	p
Age (years)	76±10	73±11	78±10	<0.001
BMI (kg/m²)	29.0±5.0	28.6±4.5	29.4±5.5	<0.01
Hyperthension	82.1%	78.1%	85.7%	<0.001
Controled AP	42.7%	42.7%	42.7%	ns
Diabetes	31.0%	30.3%	31.6%	ns
LL edemas	35.4%	32.8%	37.7%	<0.05
Anemia	24.3%	27.7%	21.2%	<0.01
Renal failure	62.8%	49.1%	75.3%	<0.001
LVEF>50%	61.4%	53.0%	69.9%	<0.001

BMI, body mass index; AP, arterial pressure; LL, lower limb; LVEF, left ventricular ejection fraction, in patientes who had undergone echocardiography; ns, not statistically significant.

DRUG TREATMENT

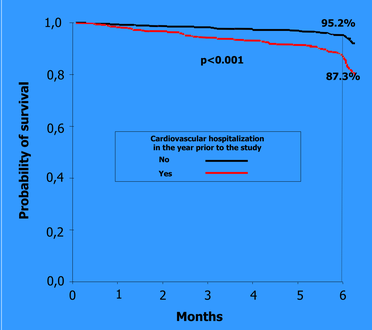


PATIENTS EVOLUTION

	Whole	PCVH	No PCVH	p
Gross mortality	7.9%	10.6%	4.5%	<0.001
By CV cause of death	6.3%	8.1%	4.2%	ns
RHF	2.4%	3.3%	1.3%	
SD	2.0%	2.8%	0.9%	
MI	0.8%	0.8%	0.8%	
Stroke	0.9%	0.8%	0.8%	
Hospitalization	29.3%	37.1%	19.9%	<0.001
CV cause	19.7%	25.4%	12,7%	<0.001

PCVH, patients for cardiovascular reasons hospitalized; CV, cardiovascular; RHF, refractory heart failure; SD, sudden death; MI, myocardial infarct; ns, not statistically significant

SURVIVAL FREE FROM REHOSPIALIZATION FOR CARDIOVASCULAR REASONS



INDEPENDENTS PREDICTORS OF DEATH AND/OR CARDIOVASCULAR HOSPITALIZATION

Factors	HR (95%CI)	p
Ischaemic	1.76 (1.29-2.40)	<0.001
Stroke	1.79(1.18-2.73)	<0.01
Oedema	1.49 (1.10-2.03)	<0.05
Anaemia	1.66 (1.21-2.27)	<0.01
LVEF<50%	1.62 (1.19-2.20)	<0.01
PCVH	2.33 (1.67-3.24)	<0.001

HR, hazard ratio; CI, confidence interval; LVEF, left ventricular ejection fraction; PCVH, hospitalization for cardiovascular reasons in the year prior.

CONCLUSION

The most prevalent form of HF in Galicia is HF with preserved systolic function. The incidence of morbidity is currently high among Galician HF patients, and their best single predictor is previous hospitalization for cardiovascular reasons. The dire consequences of HF for patients, and the cost of frequent re-hospitalizations for health services, point to a need to develop multidisciplinary HF care programmes that optimize the use of resources.

We wish to thank LABORATORIES ALMIRALL S.A. for heir unconditional collaboration in the development of this proyect

The GALICAP STUDY is available in WWW.CARDIOBARBANZA.COM