

Management of Congestive Heart Failure in Older Women

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Congestive heart failure (CHF), principally a cardio-geriatric syndrome, has become a major chronic illness for older adults. Women constitute a larger proportion of older individuals, however, women have been historically under-represented in cardiovascular research. Women have a unique risk-factor profile and different clinical manifestations of heart failure symptoms in comparison to men. The mean length of hospital stay for women is greater than for men. In addition, women present with a wider range of symptoms, are more likely to delay seeking medical care, and are less likely to be investigated and treated with evidence-based medications and therapies in comparison to men. The objective of this study was to determine whether a multidisciplinary clinical pathway, a blueprint of the patient care processes for female patients over age 65, will improve patients' quality of life and functional capacities in comparison to usual care for CHF. Ninety-one community dwelling women aged 63 to 89 with the diagnosis of CHF were enrolled in this randomized study. It is feasible to conduct a randomized study in a frail community-based older female population and to test a complex multidisciplinary pathway. Negative trials are as important as positive trials in sorting out the factors that determine intervention effectiveness. These factors have been reported generally to fall into 3 categories: target population, quality of usual care, and program design. Future studies should provide further insight into the optimal intensity and duration of heart failure management programs, and which patients derive the greatest benefit. Funded by Ontario Women's Health Council