

Designing a Multi-level Strategy to Enhance Secondary Prevention of Heart Disease based on Coronary Artery Calcium Identification

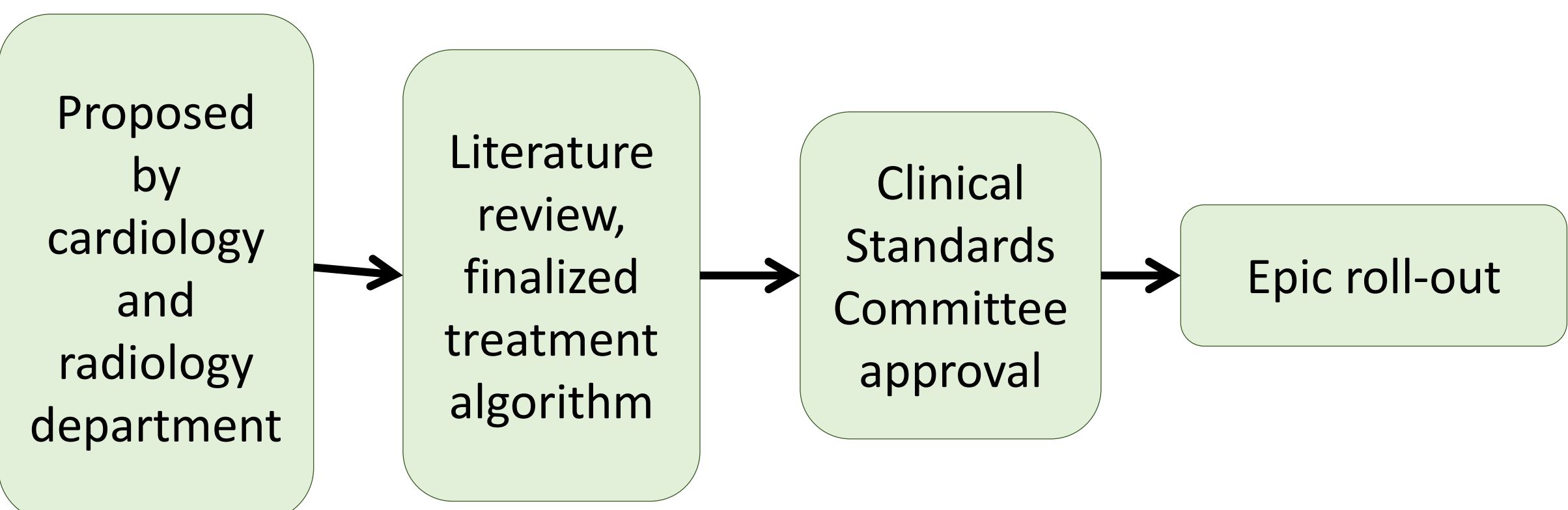
Karen Tenner, Anita Rao, Tom Isaac, Eric Cortell, Rebecca Schwartz, Andre Dejam, Dahlia Banerji, Yoni Dvorkis, Alan Brush, John Zambrano

IMPORTANCE

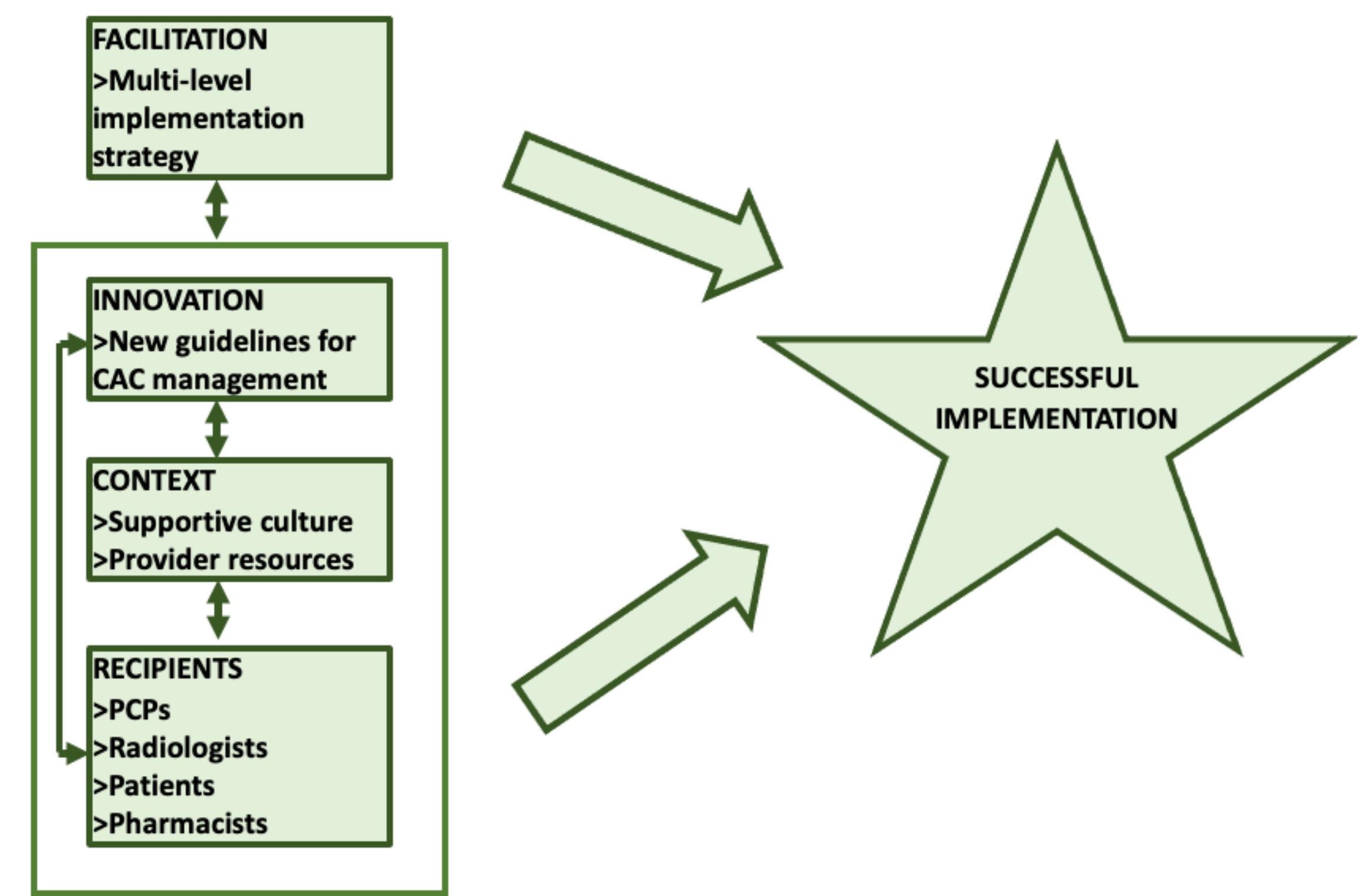
- Coronary artery calcium (CAC) can be seen on chest imaging studies and provide an opportunity for secondary prevention.
- High levels of CAC are associated with cardiovascular disease (CVD) independent of cholesterol levels.
- High levels of CAC are an indication for statin for secondary prevention of CVD.
- At Atrius Health (AH), ~34% of patients receiving chest imaging had moderate to severe CAC
- ***Increasing statin prescribing across AH based on CAC is a challenge in implementation.***

METHODS

Intervention Development



i-PARIHS Framework



CAC is an important and underutilized radiologic marker for CVD

Acting on CAC can enhance secondary prevention of CVD

i-PARIHS and RE-AIM are Implementation Science frameworks

IS frameworks have practical value for building multi-stakeholder, multi-level implementation strategies



RESULTS & POST-ANALYSIS USING RE-AIM FRAMEWORK

Characteristic	Measure(s)
R each	Number of patients with CAC identified on CT
E ffectiveness	Proportion of patients with mod-severe CAC who are on a statin
A doption & I mplementation	Proportion of PCPs who are implementing guidelines
M aintenance	Proportion of PCPs who are implementing guidelines after one year

MULTI-LEVEL IMPLEMENTATION STRATEGY



- Organizational – inform local opinion leaders
- Practice – build a coalition with PCPs, pharmacists, and population health managers
- Provider – conduct educational meetings, distribute educational materials, audit and provide feedback
- Technology Infrastructure – integration into radiology reports



Take a picture to download the full paper