

The care for chronic heart failure by general practitioners. Results from a clinical audit in Italy.

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Background: In Italian primary care, chronic heart failure (CHF) patients are mainly managed by general practitioners (GPs). However, there are few studies analysing CHF management challenges in primary care and identifying opportunities for improvement. **Objectives:** To describe CHF care as implemented by GPs in the Veneto Region and to identify opportunities for improvement. **Methods:** In 2008, using an audit process, 114 Venetian GPs analysed their electronic health records, identified CHF patients and collected clinical and care related information: prevalence, co-morbidity, caring conditions, diagnostic and therapeutic management, and hospitalization. After two training sessions, data on pharmacotherapy were analysed again in 2009. **Results:** The prevalence of CHF was 1.2% (95% CI: 1.1-1.3%). Diagnostic echocardiography was used in 57% of cases. At baseline, the proportions of patients that used specific medication were: diuretics 88%; angiotensin converting enzyme (ACE) inhibitors or angiotensin receptor blockers (ARB) 77%, beta-blockers 46% and anti-aldosterone agents 32%. After two training sessions, the use of ACE inhibitors/ARB and beta-blockers increased to 80% and 56%, respectively. Renal failure, chronic obstructive pulmonary disease (COPD), diabetes mellitus and dementia were the most prevalent concomitant diseases, posing specific management problems. Half of the patients were generally visited at home; they were dependent on some kind of care given. **Conclusion:** In Veneto a large number of CHF patients are mainly managed by GPs. Further improvements are necessary to meet standards of care with regard to diagnosis, medication, follow-up and home care. The care situation affected hospitalization and the quality of follow-up visits.

FULL TEXT PER GLI UTENTI REGISTRATI ALLA RIVISTA

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