Outpatient Management Of Patients With Chronic Heart Failure: Results Of 58 Months Of Follow-Up

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Incidence of chronic heart failure (HF) still to be increased, approaching 10 per 1000 population after 65 years of age. In the last decades, despite pharmacological, interventional and supportive innovations, HF prognosis remained poor, with about 30% of death in one year from the diagnosis. Current guidelines recommend for these patients management programs providing follow-up through dedicated outpatient clinic. Limits of these programs are represented by great difficulties in getting patients adherence, being still too elevated percentage of abandonments.

We analyzed impact of 58 months of work in our dedicated to heart failure outpatient clinic on mortality, hospitalization percentage, and abandonment. 477 HF patients (346 M, 72.5%; mean age 69.6 years) were enrolled in 58 months of clinical activity. Mean follow-up was 18.2 months and mean visit was 2.6 months.

Total mortality rate was 11.5%, 4% of patients per year. Total hospitalization for acute HF were 212. Among all patients left in follow-up the number of hospitalizations for acute de-compensation significantly decreased from 0.49/patient/year before enrollment to 0.29/patient/year during follow-up (p=0.0015). Patients which abandoned outpatient clinic were 94 (19%), about one abandonment every 23 days, mostly observed in the first months of activity.

Our patients experienced sensitive decrease in frequency of acute de-compensation and need of in-hospital admissions. Thus the results of 58 months of work in our dedicated outpatient clinic confirm value of management programs for patients with HF, but suggest that need still efforts for improving adherence to these programs.