

SAND abstract No. 31 from the BEACH program 2001–02

Subject: Prevalence and severity of chronic heart failure

Organisation supporting this study: Roche Products Pty Ltd.

Issues: The prevalence of mild, moderate or severe chronic heart failure (CHF) in general practice patients; the medications used for management; whether current treatment provided adequate control of CHF; clinical investigations used to diagnose CHF and the proportion of CHF patients referred to a specialist.

Sample: 2,618 encounters from 89 GPs; data collection period: 25/09/2001–29/10/2001.

Method: Detailed in the paper entitled 'SAND Method' on this website (<http://www.fmrc.org.au/beach.htm>).

Summary of results

The prevalence of diagnosed chronic heart failure (CHF) in the general practice patient population was estimated to be 3.5% (95% CI: 2.0–5.1). Mild CHF had been diagnosed in 2.0% of general practice patients, while 1.0% and 0.5% had been diagnosed with moderate and severe CHF respectively. In male patients, 4.0% (95% CI: 0.0–8.7) were diagnosed with CHF compared with 3.1% (95% CI: 0.9–5.3) of female patients. Patients aged 75 + had the highest age-specific rates, with 20.6% diagnosed with CHF.

The medications most commonly used for the control of CHF were frusemide, followed by digoxin and perindopril, used by 58.7%, 22.8% and 16.3% of patients respectively.

GPs were satisfied that the current treatment provided satisfactory control of CHF in all patients with mild and moderate CHF. GPs felt that four out of 13 (30.8%) patients with severe CHF were not having their CHF adequately controlled by their medications.

The majority (80.0%) of patients diagnosed with CHF had, at some point, been referred to a cardiac specialist. Of these, 51.4% were referred more than 3 years ago, 19.4% were referred between one and three years ago and 29.2% were referred less than a year ago. All 13 patients with severe CHF had been referred to a cardiac specialist.

The most common clinical investigations used to diagnose CHF were “diagnostic imaging/radiology – general” (which includes chest x-ray), “diagnostic imaging/radiology cardiovascular” (which includes echocardiography) and “cardiovascular electrical tracings” (which includes ECG). The three groups respectively accounted for 39.1%, 34.9% and 17.2% of all clinical investigations undertaken. GPs ordered 47.0% of clinical investigations used to diagnose CHF, while cardiac specialists ordered the remaining 53.0%.

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