



# Better in a Heartbeat? How Interdisciplinary Management of Disease Pays Off

Helping older women with cardiovascular disease

## SUMMARY

From 1996 to 1997, researchers at Rush Prudential HMO in Chicago examined an interdisciplinary approach to the management of chronic disease that involved diet, exercise, smoking cessation and social interactions.

The study examined women diagnosed with cardiovascular disease (CVD), with a mean age of 75 years, who had received angioplasty in the previous two years and who had positive stress tests.

The project was part of the Robert Wood Johnson Foundation (RWJF) *Chronic Care Initiatives in HMOs* national program.

## Key Findings

- The percentage of patients who met the screening criteria for anxiety on the Framingham Anxiety Score fell from 59 to 18 percent.
- The percentage of patients who had elevated cholesterol levels using cholesterol-lowering agents increased from 35 to 65 percent.
- There was a slight reduction in both mean total cholesterol and LDL cholesterol among participating patients.
- There were fewer ambulatory visits during the intervention period than during the pre-intervention period.

## Funding

RWJF supported this project through a grant of \$49,880.

## THE PROBLEM

Cardiovascular disease (CVD) in women is a complicated illness usually accompanied by other illnesses such as hypertension, gastrointestinal disorders, and arthritis. Because of its complexity, CVD in women offers a valuable model in which to study

interdisciplinary management of chronic disease that might involve diet, exercise, smoking cessation, and social interactions.

## THE PROJECT

The project included 32 women diagnosed with CVD, with a mean age of 75 years, who had received angioplasty in the previous two years and who had positive stress tests. Most had other, complicating illnesses.

Based on an initial assessment, the project team recommended appropriate interventions and encouraged patients to participate. Interventions included dietary (individual and group sessions focusing on cholesterol, weight, and sodium management); exercise; stress management; and pharmacy (individual counseling, feedback to the physician case manager, cost information, and group meetings).

Monthly, the program coordinator monitored each participant by telephone and program staff and project coordinators held interdisciplinary meetings to discuss individual or group concerns and then modified the program accordingly.

Rush Prudential conducted a baseline needs assessment of a sample of CVD patients; using an interdisciplinary team approach, integrated the delivery of services to meet the patients' needs; referred patients to specialized programs when the baseline indicated they were a high risk or had special needs; monitored all patients on an ongoing, monthly basis to identify those who became high risk; and tested how patients complied with the program.

Rush is modifying and adapting the tools and interventions and conducting pre- and post-evaluation studies of participants, providers, and referring physicians. An evaluation is measuring quality of life; health care utilization (physician visits, emergency room use, and hospitalizations); and health outcomes (functional status, anxiety levels, changes in blood pressure, and cholesterol counts).

## FINDINGS

Even though the intervention was brief, it was able to achieve the following results:

- **The percentage of patients who met the screening criteria for anxiety on the Framingham Anxiety Score fell from 59 to 18 percent.**
- **The percentage of patients who had elevated cholesterol levels using cholesterol-lowering agents increased from 35 to 65 percent.**
- **There was a slight reduction in both mean total cholesterol and LDL cholesterol among participating patients.**

- **There were fewer ambulatory visits during the intervention period than during the pre-intervention period.**

## **AFTERWARD**

Rush is preparing a larger, more rigorous experimental study in which the model of care could be applied to other populations or diseases.

---

**Prepared by: Robert P. Mahon**

Reviewed by: Marian Bass and Molly McKaughan

Program Officer: Rosemary Gibson

Grant ID# 28327

Program area: Vulnerable Populations

---