

Heart Failure + Stroke - A Lethal Combination



According to new research presented at EuroHeartCare 2017, heart failure and stroke is a lethal combination. Heart failure patients who have had a previous stroke have greater risk of depression, hospitalisation and death as compared to those without a history of stroke.

The purpose of this study was to identify differences in the psychosocial and behavioural characteristics and outcomes between heart failure patients with and without comorbid stroke. The study included 1023 patients, 18 years and over who were hospitalised for heart failure. 105 of these patients had a previous stroke and 918 did not.

Researchers collected data on cardiovascular risk factors, comorbidities and disease severity through interview, questionnaires and clinical assessment at six, 12 and 18 months. All study patients were followed up for a period of three years and the risks of hospitalisation and mortality among the two patient groups were compared.

In the beginning, both groups were similar except for the fact that patients with heart failure and stroke had more comorbiities as compared to those with heart failure alone. The patient group with both conditions fared much worse than those with heart failure alone across all outcomes and all time points. In addition, patients with both heart failure and stroke died an average of five months earlier as compared to those with heart failure alone.

At eight months, patients with both conditions had a 1.5 to 2 times greater odds of hospitalisation or death as compared to those with heart failure alone. Patients with heart failure and stroke were 59% more likely to be rehospitalised or die compared to the other patient group.

At three years, patients with heart failure and stroke had nearly 56% greater chance of all-cause death as compared to those with heart failure alone.

These results were observed after adjusting for age, sex and heart failure severity (New York Heart Association [NYHA] classification.

Findings also showed that patients with heart failure and stroke experienced rehospitalisation 84 days earlier, all-cause hospitalisation 78 days earlier and heart failure hospitalisation two months earlier as compared to those without a history of stroke. Even after a year after discharge, patients with both conditions were twice as likely to have depression as compared to those with heart failure alone.

Dr Chantal Ski, associate professor, Melbourne University, Australia said, "currently heart failure is managed by one team and stroke by another. Patients with both heart failure and stroke need an interdisciplinary and integrated approach to their care in hospital and at home. Heart failure and stroke teams should work together to rationalise medications, ramp up lifestyle and behavioural changes, and include carers and family in any interventions."

Source: European Society of Cardiology

Image Credit: Pixabay

Published on: Tue, 23 May 2017