

New harmonized cardiovascular treatment guidelines make heart disease treatment easier

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A new set of harmonized guidelines for the management of risk factors for cardiovascular disease will make it much easier for physicians to care for their patients, according to the authors of the C-CHANGE guidelines published in *CMAJ* (*Canadian Medical Association Journal*).

The Canadian Cardiovascular Harmonized National Guideline Endeavour (C-CHANGE) Initiative harmonized and integrated more than 400 separate recommendations from 8 sets of guidelines into one comprehensive but simplified resource. Differing guidelines can lead to conflicting recommendations and become barriers to good treatment, and the guidelines group simplified and distilled practice and evidence down to 89 recommendations to help clinicians diagnose and manage risk factors for cardiovascular disease in their patients.

"With an aging patient population burdened with multiple <u>chronic</u> <u>diseases</u>, practitioners are challenged to provide the most effective guidelines-based medical management for their patients with multiple comorbidities," writes Dr. Peter Liu, cardiologist at the Peter Munk Cardiac Centre, University Health Network and University of Toronto, with coauthors. The complexity and discrepancy of the recommendations paradoxically became a barrier to good health care.

Harmonization and integration of guidelines is becoming increasingly important because of the growing emphasis on multidisciplinary care.



Other regions and countries such as Europe, the United States and New Zealand are moving to harmonize guidelines.

"The [C-CHANGE] harmonized set of recommendations is intended to be consistent, scientifically rigorous and nonredundant, and to positively influence health outcomes," state the authors. This should lead to a more evidence-based approach and effective health care for our patients.

The <u>guidelines</u> provide recommendations on screening, diagnostic strategies and treatment, including changes to health behaviours and pharmaceutical treatments for all the major <u>cardiovascular risk factors</u> that can lead to complications such as stroke, heart attack and sudden cardiac death.

Provided by Canadian Medical Association Journal

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