

Physician continuity is key after ER visit for heart failure

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(HealthDay)—Heart failure patients who follow up with a familiar physician after release from the emergency department have better outcomes, according to research published online July 9 in the *Journal of the American College of Cardiology: Heart Failure*.

Robinder S. Sidhu, M.D., of the University of Alberta in Edmonton, Canada, and colleagues assessed the effect of physician continuity on [clinical outcomes](#) for a retrospective cohort of 12,285 patients (mean age, 74.9 years) who were treated and released from the [emergency department](#) with a first-time diagnosis of [heart failure](#).

The researchers found that [heart failure patients](#) receiving follow-up from a familiar versus unfamiliar physician after discharge from the emergency department were less likely to experience hospitalization or death at three months (adjusted hazard ratio [aHR], 0.79; 95 percent

confidence interval [CI], 0.71 to 0.89), at six months (aHR, 0.86; 95 percent CI, 0.77 to 0.95), and at 12 months (aHR, 0.87; 95 percent CI, 0.80 to 0.96). Follow-up care with any physician within 30 days of discharge from the emergency department was associated with reduced risk of repeat emergency department visit or death at six months.

"The crux of the matter is the following: are patients who see a familiar physician better off simply because of the familiarity, or is there something different about patients who see a familiar physician compared with patients who do not?" writes the author of an accompanying editorial.

More information: [Full Text \(subscription or payment may be required\)](#)

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