

Increased risk of death for heart failure patients with each NHS hospital admission

28 August 2016

Heart failure patients have a 2% increased risk of dying with each admission to NHS hospitals, according to research presented at ESC Congress 2016 today. The 15 year study in more than 450 000 patients from the ACALM Study Unit, Birmingham, UK included 13 416 patients with heart failure.

"Heart failure accounts for over one million inpatient bed days, 2% of National Health Service (NHS) in-hospital work load and 5% of all emergency medical admissions to hospital in the UK," said lead author Dr Rahul Potluri, founder of the ACALM (Algorithm for Comorbidities, Associations, Length of stay and Mortality) Study Unit.

Worryingly, hospital admissions for [patients with heart failure](#) are projected to rise by 50% over the next 25 years. In Europe, previous studies have indicated that more than a quarter of patients with heart failure have been readmitted to hospital as soon as three months after previous discharge and more than 10% of them died.

The current study included 457 233 patients above the age of 18 years who had been admitted to hospitals in the West Midlands, UK, from 2000 to 2014. Of these, 13 416 patients had been diagnosed with heart failure. For each patient, the investigators calculated the number of readmissions to hospital within five years and recorded if they had died during that period.

The research showed that each hospital admission was associated with a 2% increased risk of death. Heart failure patients who had 4 to 7 admissions to hospital over the study period had an almost 20% [increased risk](#) of dying compared to those with 1 to 3 admissions to hospital.

"We have a triple whammy because heart failure is increasing, hospitalisation is increasing and this study shows that the risk of heart failure patients

dying with each admission is higher by 2%," said Dr Potluri. "The findings reflect the fact that heart failure is a progressive disease and should be a challenge to physicians to improve care even more."

He continued: "Every effort should be made to start and/or optimise heart failure medications before patients leave hospital and ensure other interventions such as multidisciplinary community support are available for heart failure patients to reduce the risk of admission to hospital."

Dr Paul Carter, co-author, said: "We need to diagnose heart failure patients efficiently and ensure that they are taking appropriate heart failure medications prior to discharge from [hospital](#) so that we minimise the chances of readmission as much as possible. At the moment, there is significant variation in how well this is done across hospitals in spite of numerous clinical guidelines."

More information: "Increasing readmissions to hospital worsen mortality and decrease survival in Heart Failure patients - 15 year study from the United Kingdom from 2000-2014" ESC Congress 2016.

Provided by European Society of Cardiology

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