

# New C-CHANGE guideline provides comprehensive recommendations to manage heart disease

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The updated comprehensive C-CHANGE (Canadian Cardiovascular Harmonized National Guidelines Endeavour) guideline to manage cardiovascular disease will help primary care physicians across Canada provide better care for patients with, or who are at risk of, heart disease. The guideline, published in *CMAJ (Canadian Medical Association Journal)*, updates the 2014 guideline, with 52 newly added or updated recommendations.

"Patients often have multiple comorbidities, complicated by conditions such as stroke or myocardial infarction," writes Dr. Sheldon Tobe, Division of Nephrology, Sunnybrook Health Sciences Centre, Toronto, Ontario, with coauthors. "A [disease](#)-silo approach to [care](#) leads to the risk of fragmentation, overlooking treatable risk factors. C-CHANGE helps to promote patient care by bringing guidelines from multiple groups together, formatted so that members of the interprofessional team can collaborate to formulate a comprehensive treatment plan directed to patient priorities."

The guideline, developed by nine Canadian guideline groups, is based on the best available evidence and provides a single nationally recognized set of best practices for physicians to use across the country.

New or updated recommendations include the following:

- A new, lower threshold for treatment and blood pressure in high-risk patients with hypertension
- Treatment of high-risk patients with dyslipidemia (high cholesterol) with statins to prevent [cardiovascular disease](#) (a risk-assessment should be performed in primary-care patients to avoid unnecessary pharmacologic treatment)
- Diabetes testing with a two-hour plasma glucose after a 75 g oral glucose tolerance test
- Use of direct oral anticoagulants instead of warfarin for nonvalvular atrial fibrillation
- Lifestyle changes, such as lower sodium intake, in people with hypertension and screening and advice on smoking cessation

The guideline is aimed at primary-care providers treating adult [patients](#) who have, or are at risk of developing, cardiovascular diseases, such as hypertension, diabetes, high cholesterol, heart failure and stroke, as well as the risk factors for these conditions, including obesity, smoking and inactivity.

"The goal of the C-CHANGE process is for all Canadian health care practitioners to have easy access to a comprehensive and usable set of harmonized guidelines," write the authors.

"Canadian Cardiovascular Harmonized National Guidelines Endeavour (C-Change): guideline for the prevention and management of cardiovascular disease in primary care: 2018 update" is published October 9, 2018

**More information:** *Canadian Medical Association Journal* (2018).  
[www.cmaj.ca/lookup/doi/10.1503/cmaj.180194](http://www.cmaj.ca/lookup/doi/10.1503/cmaj.180194)

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