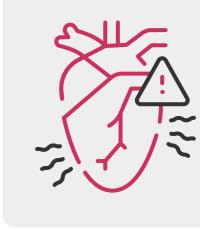


How well is HF* managed in Asia-Pacific? - A Gap report study

PRIMARY OUTCOME

Significant gaps were identified in managing patients with HF in the Asian Pacific region, including inadequate awareness, limited diagnostics, poor long-term follow-up, and insufficient access to GDMT*



Burden of HF in Asia

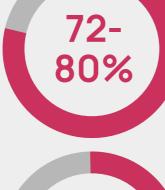
1-3% Prevalence in Asia with high mortality

Results

Clinical Perspective

Several clinicians treating HF patients in the Asia-Pasific region identified significant gaps in HF management:

Gaps in Diagnosis



awareness of physician and patients

Lack of



programs

screening

Lack of

Educational Interventions

Recommendation

Use digital and printed media to enhance patient and physician education.

Recommendation

Collaborative Efforts Partner with the Ministry of

Health, insurers, healthcare

institutions, payers and the community to drive access and optimisation of treatment.[†]

Low NP* testing rates despite high biomarker availability

Availability & Utilisation

Diagnostics Test

84% NP availability NP levels

Majority reported

checked in 25% or less emergency NP levels Majority reported checked during 50% or less hospital stay

Length 3-5 days : 46%

Hospital Stay



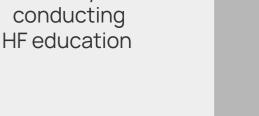
Long length of stay due to:

6-8 days : **37%**



are the only ones







Recommendation

Holistic Care

scheduling in patient care plans at discharge.

the Diagnosis and Management of Heart Failure

Include diet counselling, weight monitoring, and follow-up

Manage patients signs and symptoms with adequate and timely medication to prevent

Recommendation

complications Manage patients "social" environment. Ensure compliance with HF medication. Improve

healthcare services and patient education with a MDT approach.

Poor follow-up and limited access to cardiac rehabilitation

Post-Discharge

55% 46%

do not have an established discharge protocol

outpatient HF centre/clinic

lack a dedicated

For more information on the study, please refer to J.W.C.Tan et al. Journal of Asian Pacific Society of Cardiology 2023;2:e37.

[†]as recommended by the Asian Pacific Society of Cardiology Consensus Statements on



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