

Developing a protocol for home diuresis of patients with advanced heart failure

Dr. Leah Steinberg¹; Dr. Susanna Mak²; Meghan White¹; Dr. Russell Goldman¹; Dr. Jennifer Arvanitis¹; Dr. Amna Husain¹



1 Temmy Latner Centre for Palliative Care, Mount Sinai Hospital, Toronto, ON; 2 Anna Prosserman Heart Function Clinic, Mount Sinai Hospital, Toronto, ON

Background

Patients with advanced heart failure represent a population that is significant in number, health system utilization and symptom burden. In 2000, patients with advanced heart failure accounted for the second highest number of hospital days in Canada.

The condition is responsible for:

- High symptom burden
- Caregiver burden
- Challenges in collaborative care

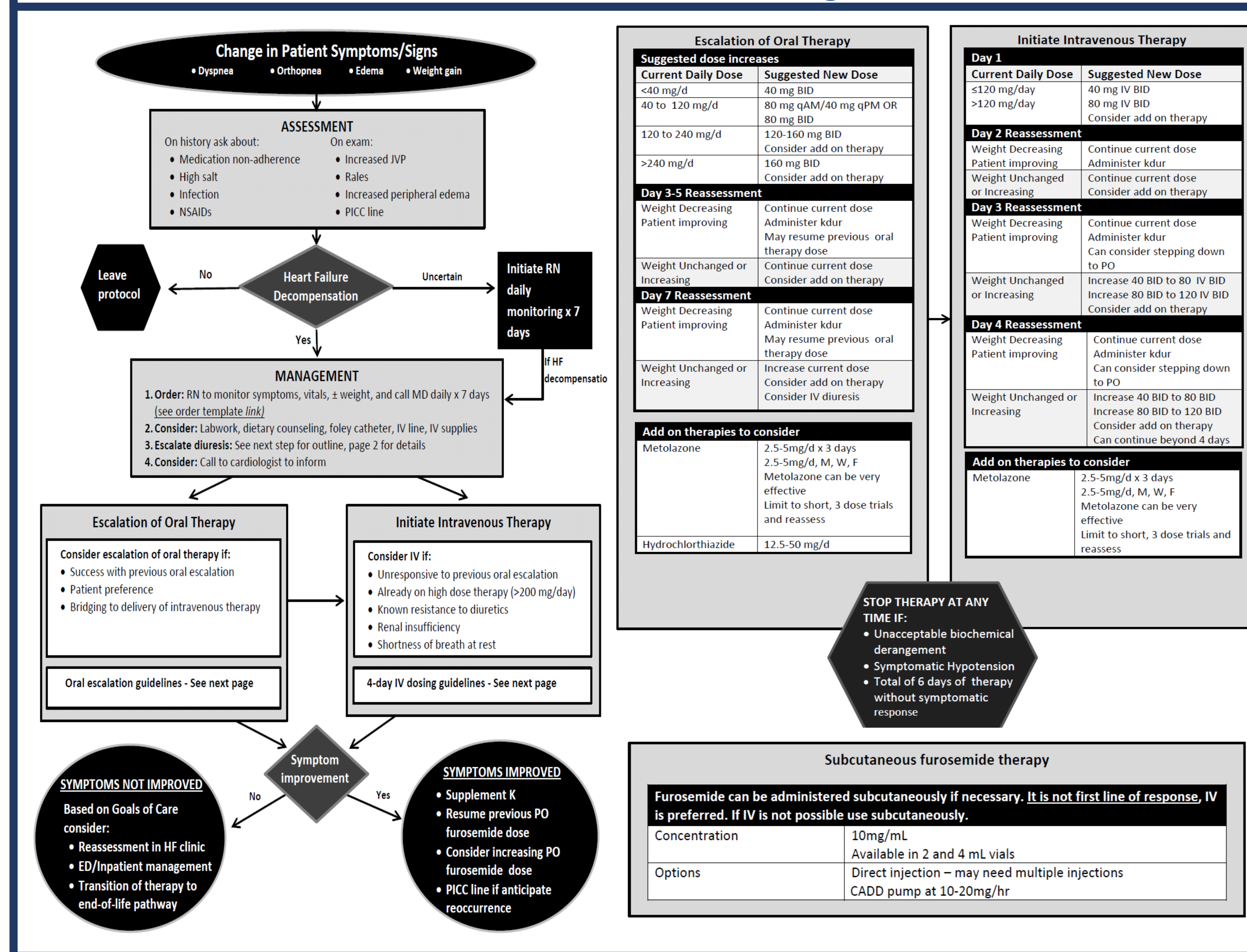
Objective

- To develop a collaborative model of symptom management and home-based care for patients with end-stage heart failure.
- The model of care will address symptoms, quality of life, caregiver burden and improve collaboration.
- Once in place, our plan is to evaluate the program in terms of patient, caregiver, and system outcomes.

Table 1. Outcomes to be measured during program evaluation.

	OUTCOMES	
PATIENT	Quality of Life	Symptoms
CAREGIVER	Caregiver burden	Program satisfaction
SYSTEM	Health care utilization and cost	

The Toronto Diuretic Protocol in End Stage Heart Failure ©



Activity/methods

In collaboration with cardiology and primary care, our palliative care team is developing a program to facilitate home-based, multi-disciplinary care for patients with end-stage heart failure. The program is designed for patients who have goals consistent with a palliative program.

The program of home-based care will include the following Education and Process tools:

- Home diuresis protocol with guidelines for oral and intravenous diuretic therapy
- An overview of how to assess and manage common symptoms in patients with end-stage heart failure
- Guidelines for rational withdrawal of cardiac medications

Relevance

Home-based care of patients with advanced heart failure that includes optimizing diuresis, can lead to:

- Improved symptom management
- Decreased number of hospitalizations

In turn, we hope it can:

- Reduce caregiver burden
- Result in greater health-related quality of life for patients with advanced heart failure