

Guideline implementation

A testimony from Serbia

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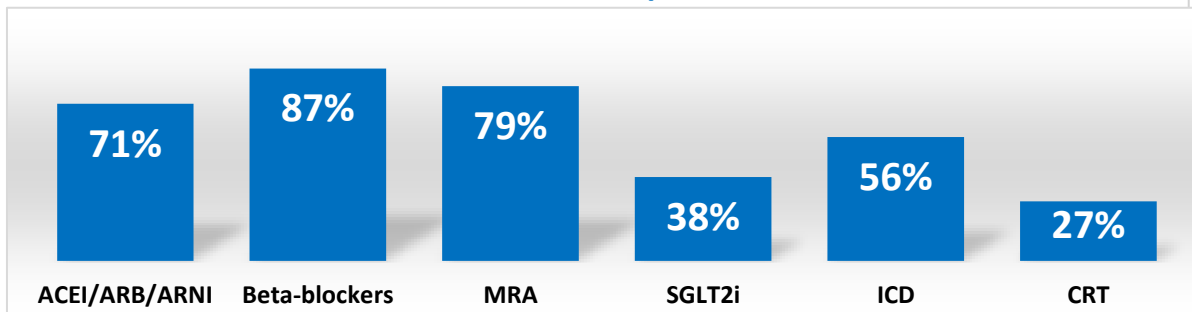
Guideline implementation in patients with heart failure:

(a proxy of) Serbian perspective

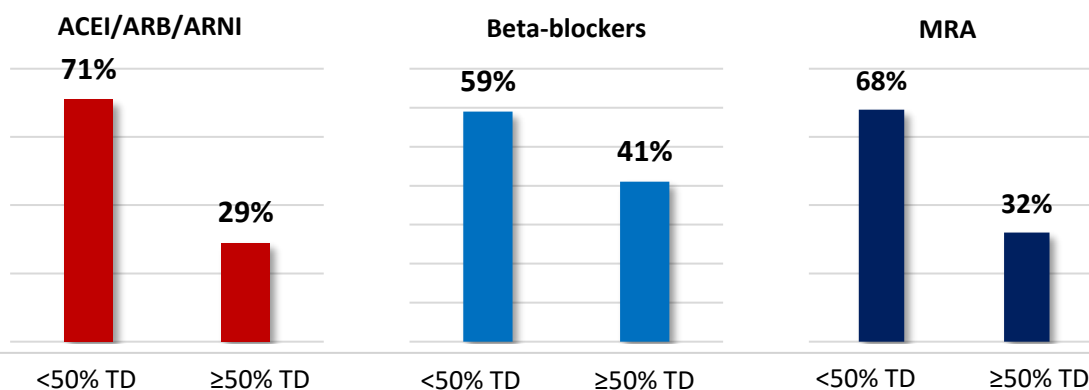


- Department of Cardiology, University Hospital Centre of Serbia.
- Period: Oct 2022 - Oct 2023.
- N= 971 pts with HFrEF discharged alive (excl. advanced HF, severe CKD etc.)
- Objective:** assessment of pre-discharge provision of GDMT and devices in eligible patients with HFrEF.

Predischarge GDMT prescription of GL recommended medications and devices in HF patients



Predischarge doses of GDMT



Barriers to guideline implementation

Patient-level factors

- Clinical and demographic characteristics (vulnerable categories).
- Income level.
- Educational level.
- Health literacy.
- Living conditions.

Clinical-level factors

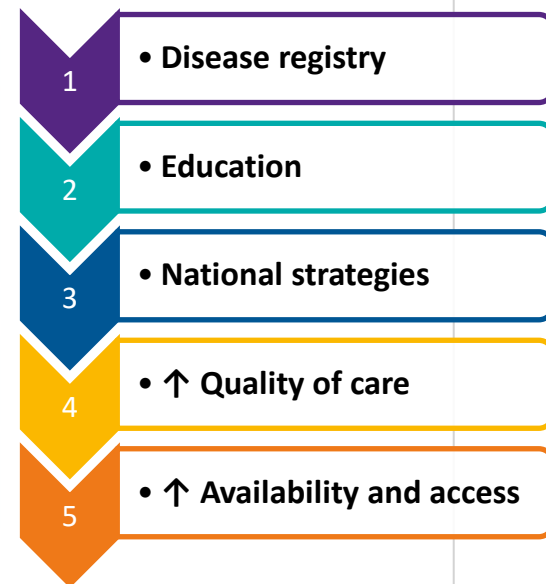
- Knowledge gaps.
- Tolerability and side-effect concerns.
- Stable patient myth.
- Clinical inertia.

Healthcare-level factors

- Availability and access to care.
- Access to novel therapeutic options.
- Reimbursement.
- Clinical bandwidth.

Evidence-based approaches to improve GL implementation in Central/Eastern Europe region

Key barriers identified in the CEEBA region patient pathway	Route to improvement
1. Lack of epidemiological data for the region	Establish systematic HF epidemiology data collection at the regional and national level by creating prospective disease registries.
2. Low awareness about HF	Establish education programmes for the public, patients, caregivers, and HCPs, including accredited HF nursing programmes.
3. Lack of national HF strategies	Establish formal HF plans, strategies, and guidelines to set clear and measurable goals at the policy level.
4. Infrastructure and system gaps	Improve access to QCCs, MDC teams, diagnostic tests, and telemedicine/telemonitoring, particularly for patients in rural areas.
5. Poor access to novel HF treatments	Establish national treatment monitoring programmes to support budget planning and develop policies that ensure adequate proportions of healthcare budgets are reserved for novel therapies.



Ongoing strategies to improve guideline implementation in Serbia



Gain insight into the barriers



- **Central/Eastern Europe Quality of Care Centres Project¹:**

a survey of quality of care and GDMT implementation in patients with heart failure

Provide education



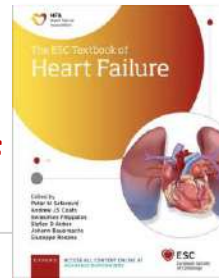
- **Serbian Heart Failure Society**

- Annual congress
- SHFS Illustrated Guides



- Newsletters, social media outreach
- Nurse and patient education

- **ESC Textbook of heart failure**



Improve standards of care



- HFA/ESC accreditation and certification:

ICARE-HF²

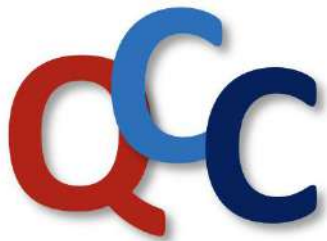
- Serbian Academy of Sciences and Arts Strategic Project:

SALVATION

- Participation in HFA/ESC led surveys and registries

¹Rationale and design paper submitted to ESC HF 2024

²Seferović P et al. Eur J Heart Fail 2020; 22: 763-774



Central/Eastern Europe Quality of Care Centres project



Prospective, observational, multinational, multicentre, investigator-initiated study.

Objectives:

- To evaluate **quality of care in patients hospitalized for HF in accordance with ESC/HFA Quality Indicators¹**.
- To assess **adherence to the 2021 ESC HF Guidelines and the 2023 Focused update of the HF Guidelines^{2,3}**.

Current status: patient recruitment since March 18 2024; total study population: ~2400 pts; expected database closer by end of December 2024.

Participants:

- **20 quality of care centres from 11 countries**



¹Acta S et al. European Journal of Heart Failure (2022) 24, 132–142

²McDonagh T et al, Eur Heart J. 2021;42: 3599-3726. ³McDonagh T et al, Eur Heart J. 2023;44:3627-39



Heart failure can be defeated: Improving treatment quality in the Republic of Serbia (SALVATION)



Prospective, interventional, multicentre study.

A strategic nation-wide project of the Serbian Academy of Sciences and Arts and Faculties of Medicine, Universities of Belgrade, Novi Sad, Kragujevac and Niš (7 teaching hospitals).

Objectives:

- Phase 1: **assessment of RF, demographic and clinical characteristics and quality of care of patients with HF.**
 - ↳ National registry of patients with HF.
- Phase 2: **implementation of an educational platform assisted by AI technology to facilitate treatment decision.**
- Phase 3: **reassessment of quality of care.**

Start date: October 2024.

