

# Heart failure patients, clinicians have differing perceptions of risk level

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Physicians identified a majority of patients with advanced heart failure as at high risk for transplant, left ventricular assist device (LVAD) or death while few of those patients considered themselves to be at high risk, according to a study published today in *JACC: Heart Failure*.

Physicians rated 161 patients for perceived risk for transplant, LVAD or death in the upcoming year. The patients were also surveyed about their perceptions of their life expectancy and willingness to undergo different [treatment options](#).

Sixty-nine percent of the patients were considered at high risk for transplant, LVAD or death by their physicians. However, only 14 percent of patients considered themselves to be at high risk. Over 13 months of follow-up, 38 percent of patients experienced an endpoint: 21 percent deaths, 8 percent transplants and 9 percent LVAD implants.

"It was surprising that there were such drastic differences between patient perceptions and [physician](#) perceptions of [heart](#) failure disease severity," said Amrut V. Ambardekar, MD, an assistant professor in the division of cardiology at the University of Colorado and the study's lead author. "We hope better understanding these differences will facilitate improved patient-physician communication regarding advanced heart failure therapies."

Researchers also assessed patient willingness to consider other life sustaining therapies to treat advanced [heart failure](#), such as ventilation,

dialysis or a feeding tube. Among the patients identified as high risk by physicians, 77 percent were willing to consider LVAD, but 63 percent indicated they would decline other simpler life sustaining therapies.

"More than likely, these inconsistencies indicate a poor understanding of these treatment options," Ambardekar said. "Patients may not fully appreciate the invasive nature of some of these procedures, so we probably need to look for better ways to educate our patients both on the severity of their disease and their treatment options - well before they need these advanced therapies."

"This work highlights the importance of increasing the educational awareness of our patients and the need for more research in this area," said Christopher M. O'Connor, MD, FACC, editor-in-chief of *JACC: Heart Failure*.

Study limitations include that the categorization of physician and patient risk, as well as the patients' opinions on treatment options, were made at the time of enrollment. According to the researchers, it is likely that perceptions of risk and the patients' understanding of treatment options changed over the course of time.

Provided by American College of Cardiology

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