

Educational mailing fails to improve medication use in patients with atrial fibrillation

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An educational mailing for atrial fibrillation patients and their clinicians did not increase uptake of stroke prevention drugs, according to results of the IMPACT-AFib trial presented in a Hot Line session today at ESC Congress 2020.

Patients with [atrial fibrillation](#) are at increased risk of stroke. Studies have shown that most of these strokes can be prevented with [oral anticoagulation](#). However, oral anticoagulant medication is underused by [patients](#) with atrial [fibrillation](#).

The IMPACT-AFib trial investigated whether education on stroke prevention in atrial fibrillation for patients and their healthcare providers could increase the use of oral anticoagulants.

The primary endpoint was the proportion of patients started on oral anticoagulation over the course of the 12-month trial.

The trial enrolled atrial fibrillation patients aged 30 years and older with a guideline-based indication for oral anticoagulation (defined as a

CHA2DS2-VASc score of 2 or greater). Participants had not been prescribed an anticoagulant in the prior 12 months, and had not been admitted to hospital for bleeding in the prior six months.

Patients were randomly allocated to the educational intervention or usual care ([control group](#)). In the intervention group, patients and their [healthcare providers](#) received one mailing at the start of the trial.

A total of 47,333 patients were included in the analysis. The average age of participants was 78 years. At one year, the primary endpoint occurred in 2,328 patients (9.89%) in the intervention group and 2,330 patients (9.80%) in the control group. The adjusted odds ratio was 1.01 (95% confidence interval 0.95-1.07).

Study author Dr. Sean Pokorney of Duke University, Durham, US said, "Among a population with a guideline indication for oral anticoagulant[s] for stroke prevention with atrial fibrillation, there was no statistically significant difference in rates of oral anticoagulant initiation at one year with a single education intervention."

Dr. Pokorney said: "Numerically more patients initiated oral anticoagulants early after [the] mailing, raising the question of whether multiple mailings or further contact may have been beneficial."

Provided by European Society of Cardiology

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