



DISCUSSING ABSOLUTE RISK WITH CHEST PAIN PATIENTS IMPROVES CARDIOVASCULAR HEALTH

EMBARGOED UNTIL 12:01am Monday 8 March 2021

DISCUSSING absolute risk scores with patients can promote engagement with preventive measures for improving cardiovascular health, according to a study published by the *Medical Journal of Australia*.

"Patients without coronary ischaemia attending chest pain clinics have a substantial burden of modifiable cardiovascular risk factors that is rarely explicitly discussed during the consultation," wrote the researchers, led by Dr Andrew Black, a cardiologist and Staff Specialist at Royal Hobart Hospital, in collaboration with the Menzies Institute for Medical Research and the Baker Heart and Diabetes Institute.

"Absolute risk scores may be useful for educating patients and encouraging engagement with strategies for improving cardiovascular health.

"The absolute risk-based approach recognises the synergism of risk factors and the greater overall benefit of directing preventive measures to patients at greater risk.

"Risk score calculation is designed to assist clinical decision making, but providing risk scores to patients may also help improve risk perception and promote engagement with strategies for reducing risk."

Black and colleagues randomised patients at the rapid access chest pain clinic at Royal Hobart Hospital into two groups. The control group received best practice chest pain clinical assessment (usual care) and the intervention group received usual care together with an absolute risk-guided cardiovascular risk factor management strategy. Participants were followed for a mean of 37.4 months.

The mean change in risk was +0.4 percentage points for the control group and -2.4 percentage points for the intervention group; the between-group difference in change was 2.7 percentage points.

Statistically significant improvements in smoking status, total cholesterol, LDL cholesterol, and systolic blood pressure were measured in both groups. The changes in the control and intervention groups did not differ statistically significantly.

"Our principal finding was that an absolute cardiovascular risk-based discussion with patients attending a chest pain clinic and implementation of an individualised risk factor management strategy significantly improved 5-year cardiovascular risk scores over a period of at least 12 months," wrote Black and colleagues.



MJA

The Medical Journal of Australia

Media Release

“Our study provides further evidence that informing patients of their risk scores, and educating them about preventive measures, can significantly improve their cardiovascular risk profiles.”

All MJA media releases are open access and can be found at:

<https://www.mja.com.au/journal/media>

Please remember to credit *The MJA*.

The *Medical Journal of Australia* is a publication of the Australian Medical Association.

The statements or opinions that are expressed in the MJA reflect the views of the authors and do not represent the official policy of the AMA or the MJA unless that is so stated.

CONTACTS:

Dr J Andrew Black
Cardiologist
Royal Hobart Hospital
Ph: 0407 533 654
Email: andrew.black@ths.tas.gov.au