

[P-394E] Clinical outcome and cost effectiveness of a multidisciplinary class in patients with congestive heart failure

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This retrospective case controlled study assessed the pharmacoeconomic impact of a multidisciplinary congestive heart failure (CHF) class. Readmission rates (RR) and overall health care costs (OHCC) were compared between patients with CHF who received usual care (control group (CG)) versus those who participated in a multidisciplinary education class (treatment group (TG)). Inclusion criteria for both groups were a hospital discharge ICD-9 code for CHF (index admission) between March 1996 and March 1998. Patients were followed for 12 months following completion of the class (TG) or index CHF admission (CG). Sixty eligible patients, mean age 68 years, 98% male, mean ejection fraction 35% were enrolled in each group. The study demonstrated a significant decrease in hospital readmissions in the class group (34%) compared to the control group (76%); a 42% difference, (p=0.001). The costs of hospital readmissions were significantly higher in the control group (\$5200 vs \$3130), as were OHCC (a \$1911.69 increase per patient). This study showed that a multidisciplinary education class can reduce hospital readmissions and overall cost of care in patients with CHF.