Efficacy of a Patient-Engagement Platform in Reducing Uncontrolled Hypertension in Community Health Clinics

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Presenter Financial Disclosures

Research support: CAREMINDr Employment: CAREMINDr, PHAR (Partnership for Health Analytic Research)

Background

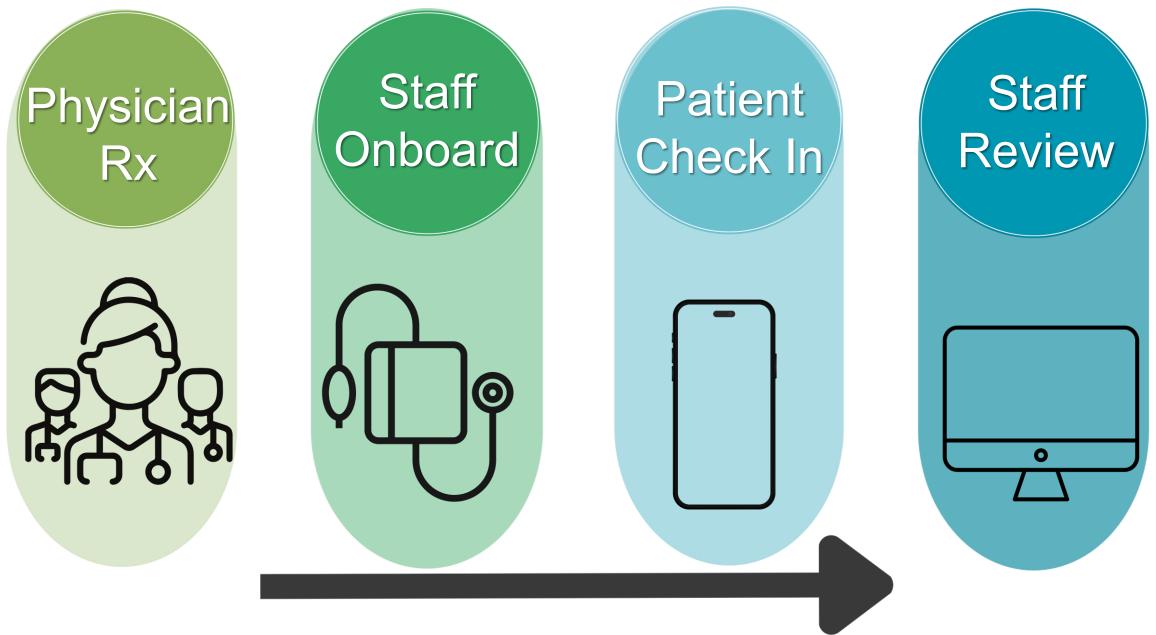
- Over 37 million US adults have blood pressure (BP) higher than 140/90 mmHg, which can lead to serious sequelae like myocardial infarction and stroke.
- Medication to treat hypertension is effective, yet, approximately 50% of patients do not take medication as prescribed.
- Non-adherence to cardioprotective medications increases a patient's risk of death from 50% to 80%.

Objective

• To measure rates of BP control before and after introduction of a novel digital hypertension management program at federally qualified health centers (FQHCs).

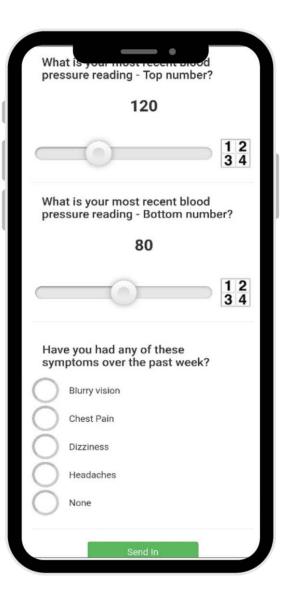
Method

Program overview



Patient interface



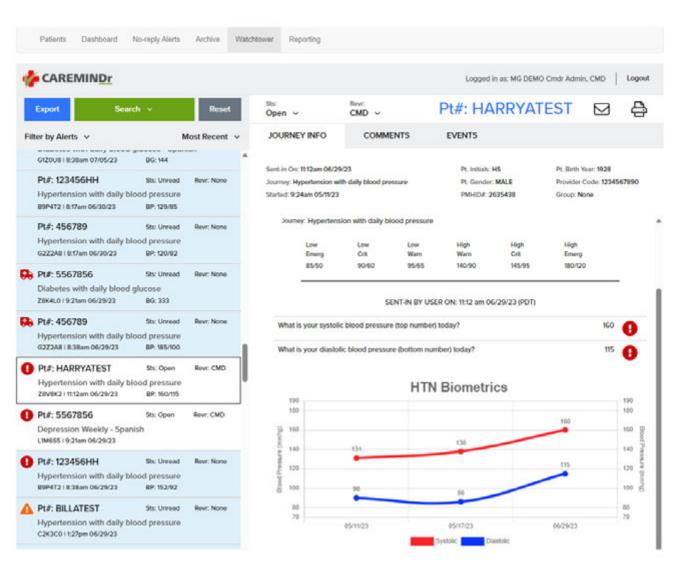


Clinic review of alerts

Emergency alert: patient received immediate guidance

High level alert

Low level alert

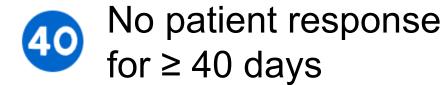


Clinic review of engagement

20



No patient response for \geq 20 days



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Pt#: 89963254 Sts: Unread Revr: None Depression weekly M5J4L918:40am 06/14/23 Filler				Sent-In On: 2:55pm 06/07/23 Journey: Hypertension with daily blood pressure Started: 1:47pm 05/11/23					Pt. Initials: JF Pt. Birth Year: 192 Pt. Gender: FEMALE Provider Code: 12 PMHID#: 2478677 Group: None			67890
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Analysis

- We retrospectively evaluated first and last systolic and diastolic BPs of patients who participated for ≥90 days (range 90-721 days).
- Study period: April 2021-April 2023.
- We considered BP <140/90 mmHg to be controlled.
- Stratified by language (i.e., English, Spanish).

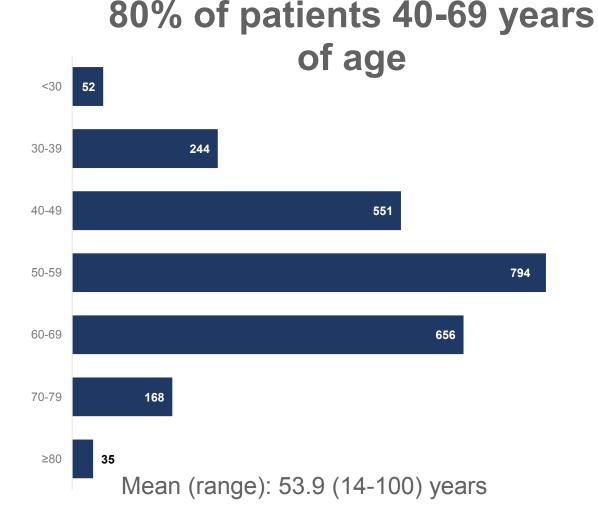
Results

2,500 patients participated for ≥90 days

39% male n=965

227 days mean study period 22%

used Spanish language version n=551

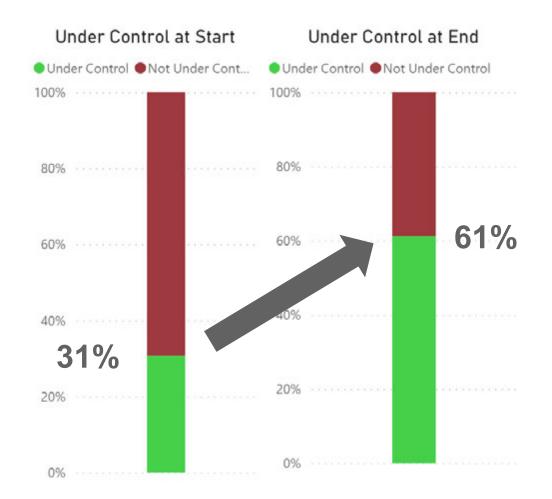


Patients were treated at 54 FQHCs



FQHC: Federally Qualified Health Center

55% of patients with uncontrolled BP achieved a controlled BP



Patients using the Spanish version achieved better BP control

English



53% of uncontrolled to controlled

Spanish



66% of uncontrolled to controlled

Limitations

- This study did not include a comparator cohort that received standard of care.
- This study includes a traditionally underserved FQHC population and results may not be generalizable.

Conclusions

- This novel hypertension control program, which used technology to gather and prioritize data, improved BP control rates by over 55% in a real-world, underserved population with uncontrolled hypertension.
- BP control was higher in the Spanish-speaking population.
- Remote digital monitoring with intervention can improve clinical outcomes without significantly increasing the overall cost of care, thereby promoting value-based care strategies for chronic diseases such as hypertension.

Next steps

- Test different versions of the program to identify drivers of positive outcomes.
- Use this program as part of treatment plan for other conditions.

Questions?