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REACH: Research Evidence-to-Action for Community Health

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Does a Program that Focuses on Lifestyle Changes Reduce Heart Disease Risk Factors in a Rural Community?

REACH Dissemination Committee, Maine, USA

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Does a Program that Focuses on Lifestyle Changes Reduce Heart Disease Risk Factors in a Rural Community?

Nearly half of all people in the United States have some type of **cardiovascular (heart) disease**. It is the **leading cause of death for men, women, and people of most racial and ethnic groups** in the US. This study focuses on a population with a greater chance of developing heart disease, in part because many people don't know much about the risks. They also have limited access to health care.

LOCATION & POPULATION

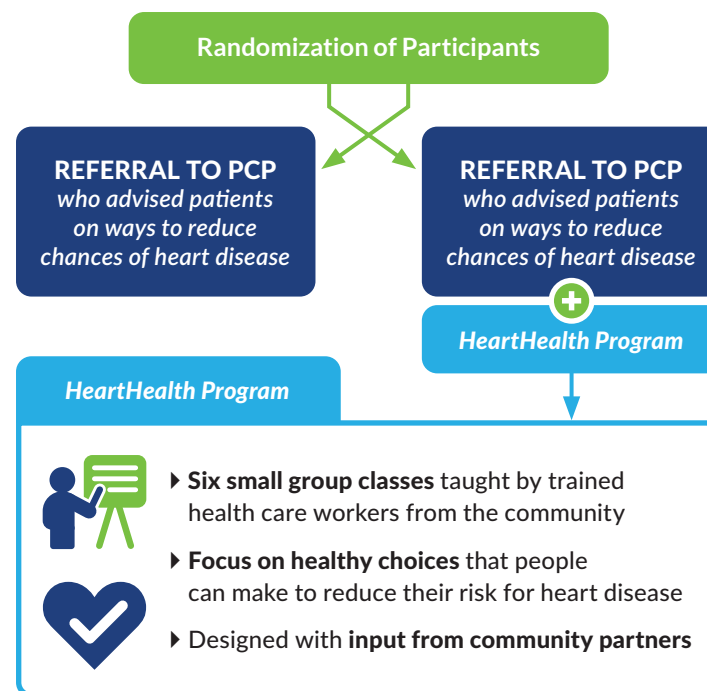
- ▶ Rural Appalachian Kentucky
- ▶ 352 men & women
- ▶ 21+ years old
- ▶ did not see a doctor regularly before the study
- ▶ two or more of the following risk factors for heart disease:

- high blood pressure
- high cholesterol
- type 2 diabetes
- overweight/obesity
- depression
- not enough exercise



STUDY DESIGN

The research team wanted to learn whether providing these classes was better at helping people reduce their risk for heart disease than only referring people to a Primary Care Provider (PCP).



FINDINGS at 4 and 12 months

Based on patient surveys and research team review of patient health records

- ▶ When compared to the people who only got a referral to a Primary Care Provider, those who participated in HeartHealth had a **greater reduction in a number of risk factors for heart disease** (blood pressure, cholesterol, weight, smoking, feelings of depression, and overall risk of heart disease).
- ▶ **Effectiveness of the classes did not differ** by gender, presence or absence of depression, or adequate or inadequate health literacy.
- ▶ **Patient satisfaction with healthcare improved significantly** in both groups from baseline to 12 months.



USED ACRONYMS

PCP – Primary Care Provider

Key Take-Away

Interventions like HeartHealth—that focus on healthy choices that people can make to reduce risk for heart disease and are driven by collaboration with the community of interest—are effective in medically underserved, socioeconomically distressed areas.

REFERENCES

1. Moser D, Feltner F, Biddle M, et al. *Does a Program That Focuses on Lifestyle Changes Reduce Heart Disease Risk Factors in a Rural Community in Appalachian Kentucky?* Patient-Centered Outcomes Research Institute (PCORI).; 2019.

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