

INTEGRATE: A study on preventative medications and CVD.

August 2015



THE GEORGE INSTITUTE
for Global Health
AUSTRALIA

Facts

- About 3.5 million Australians had long-term CVD in 2007-08.
- CVD remains the leading cause of mortality, responsible for 30% of all deaths in 2012.
- CVD also remains the most expensive disease group in Australia, costing about \$7.6 billion in 2008-09.
- For patients identified at high CVD risk, only 40% are prescribed all necessary preventive medicines.

Partners:

Woolcock Institute

Faculty of Pharmacy,
University of Sydney

Monash University

University of Notre Dame

The George Institute
for Global Health

Supporters:

National Health and Medical
Research Council, (NHMRC)
Australia

The George Institute
for Global Health

National Heart Foundation

HCF Research Foundation

Background:

- Extensive evidence demonstrates the benefits of a combination of drugs for the prevention of cardiovascular disease (CVD) events in people at high risk.
- Under-treatment is common in Australia.
- Previous research by The George Institute has shown improvements with use of polypills and electronic decision support for doctors, but combining these approaches and adding a long-term adherence program could bring about very large and long-lasting benefits.

Aims:

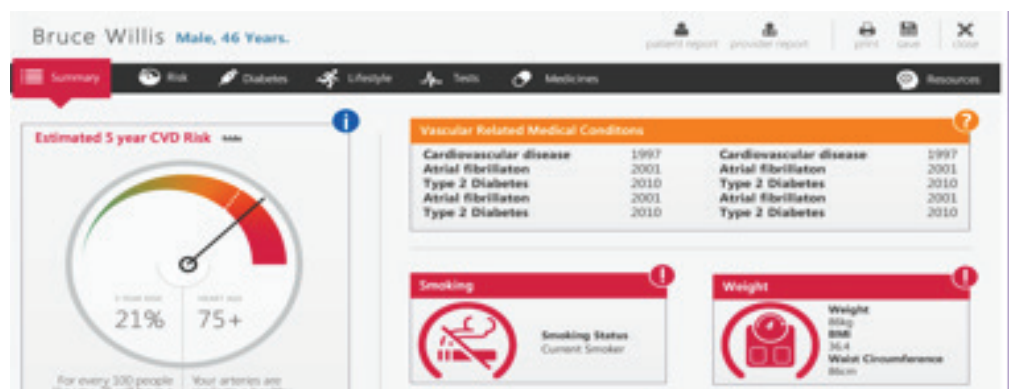
The overall goal of this 4 year study is to develop an integrated approach combining three evidence based approaches:

1. point-of-care electronic decision support in general practice (HealthTracker);
2. availability of a range of CVD polypills (fixed dose-combination of generic blood pressure lowering drugs, cholesterol lowering drugs ± aspirin); and
3. a highly tailored pharmacy-led medication adherence program

And to conduct a large trial to determine whether this improves blood pressure and cholesterol control in people at high risk of CVD.

Methods:

- The study includes an intervention development phase, followed by a “real life” cluster randomised trial in 70 Australian general practices (with 35 ‘paired’ pharmacies in the intervention arm) over 18 months.
- The effects on control of systolic blood pressure and LDL cholesterol levels will be measured in high-risk, undertreated patients.



Impact:

Most Australians at high risk of CVD do not achieve long-term adherence to evidence based medications. If successful, this integrated approach could improve the lives of hundreds of thousands of Australians at high-risk of CVD.

Contact

To find out more about Integrate and its principal investigators Prof. Anushka Patel & Dr Rohina Joshi, or The George Institute for Global Health, please contact:

Aaron Wakeley +61 417 249 295
awakeley@georgeinstitute.org.au

The George Institute For Global Health

We're improving the lives of millions of people worldwide through innovative health research. Working across a broad health landscape, the Institute conducts clinical, population and health system research aimed at changing health practice and policy worldwide. Ranked among the top 10 research institutions in the world for scientific impact by the *SCImago Institutions Rankings (SIR) World Reports* in 2011, 2012, 2013 & 2014.