

# 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

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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:

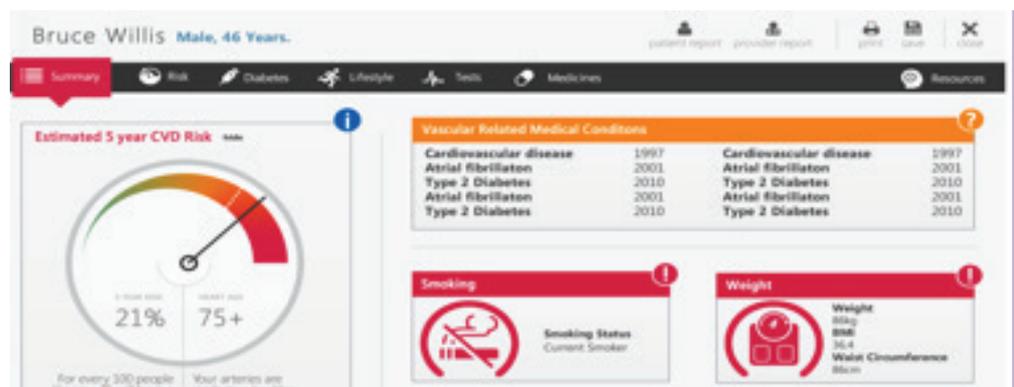
The overall goal of this 4 year study is to develop an integrated approach combining three evidence based approaches:

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  $\pm$  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

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