INTEGRATE Study: INtegrated combination Therapy, Electronic General practice support tool, phaRmacy led intervention And combination Therapy Evaluation

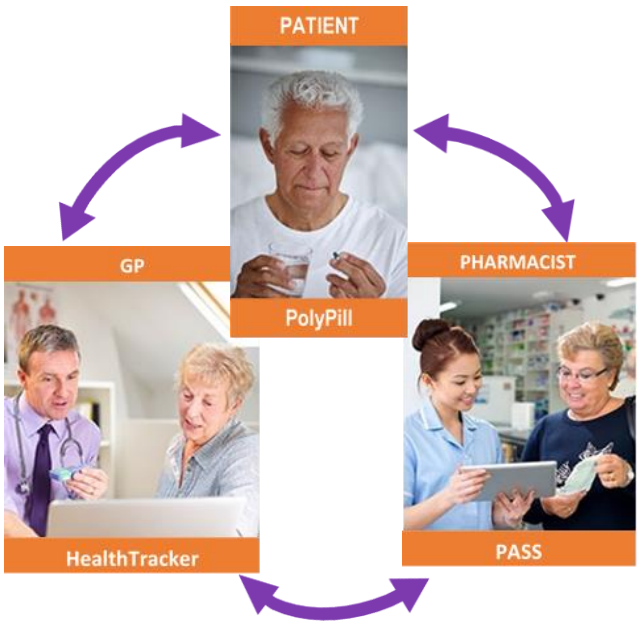
An integrated general practice and pharmacy-based intervention to promote the prescription and use of appropriate preventative medications among individuals at high cardiovascular risk

THE GEORGE INSTITUTE for Global Health AUSTRALIA

WHAT IS INTEGRATE?

INTEGRATE is an NHMRC-funded study that will evaluate a novel intervention aimed at improving overall cardiovascular health by increasing long term use of cardiovascular disease preventive medications in high risk individuals. This involves combining three evidence based components:

(1) A General Practitioner focused electronic decision support and audit tool (HealthTracker) that provides tailored advice on cardiovascular risk management
(2) Availability and use (if felt appropriate by the treating GP) of a range of CVD "Polypills" (fixed dose combinations including two blood pressure lowering drugs, a statin +/- aspirin), and
(3) A Pharmacy Adherence Support Service (PASS) – a pharmacy-based support service for long-term adherence and lifestyle change support.



The intervention will be evaluated by a pragmatic, open label, cluster randomised control trial involving 70 general practices (35 intervention & 35 control) as well as 35 paired pharmacies for the intervention group in NSW and VIC. The effects of CVD risk will be monitored by changes in blood pressure and LDL cholesterol levels over a median 18 month period. No individual patient recruitment is required, with the primary outcomes evaluated on a de-identified extract of the electronic health record.

WHO IS RUNNING THIS STUDY?

This study is being conducted by The George Institute for Global Health in collaboration with a range of organisations in New South Wales and Victoria. The clinical leadership team includes Professor Anushka Patel (Chief Scientist at The George Institute, is the Principal Investigator), Professor Tim Usherwood (Head and Sub-Dean, Department of General Practice, Sydney Medical School - Westmead), A/Prof. David Peiris (Program Head, Primary Health Care Research, The George Institute for Global Health), Dr Charlotte Hespe (Head, General Practice Research, School of Medicine, The University of Notre Dame Australia) and Professor Chris Reid (Associate Director, CCRE Therapeutics, Monash University).

IS MY PRACTICE ELIGIBLE?

The eligibility criteria for the study are:

☑ Not currently or previously involved in other studies using HealthTracker (e.g. TORPEDO, Q-Pulse).

☑ Use of either Medical Director or Best Practice for electronic health record management.

☑ Exclusive use of these systems to record risk factors and prescribe drugs.

☑ Agreement that all GPs and other designated staff are willing to use the integrated intervention.

☑ Agreement to encourage patients to fill prescriptions at a designated partner pharmacy and consider enrolment in the pharmacy adherence support program

WHAT ARE THE ADVANTAGES OF PARTICIPATING?

All general practices will have the opportunity to assess their current clinical practice and application will be made for participating general practitioners to obtain 40 Category 1 QI&CPD points in the 2017-2019 triennium as GP research participants. Financial remuneration ($500 per practice) will be provided for general practices for their time commitment to this study. Furthermore, HealthTracker software is a time saving computer-based interface (on TopBar) that calculates absolute cardiovascular risk from clinical data in Best Practice/Medical Director software, provides evidence-based recommendations based on these risks and also includes a patient communication tool to visually explain this risk to patients.

WHAT ARE THE TIMELINES?

INTEGRATE will commence recruiting mid-September 2016 until all GP sites are recruited. The interventions will be implemented in practices for a median of 18 months followed by a process evaluation.

For more information visit
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Integrate

SUMMARY

Aims:

- Improve management of patients' CVD risk factors via patient prescriptions for and use of long term CVD preventive medications

Involves:

- Use of HealthTracker software
- Willingness to prescribe CVD Polypills
- Pharmacy adherence support program for patients on CVD preventive medication

Advantages of participating:

- Opportunity to obtain 40 Category 1 QI&CPD points for 2017-2019 triennium
- Ability to monitor and audit own clinical practice relating to CVD risk management
- Use of HealthTracker, a time saving diagnostic tool for CVD management
- Financial remuneration to general practices

COLLABORATORS:

THE UNIVERSITY OF SYDNEY
WOOLCOCK LEADERS IN BREATHING & SLEEP RESEARCH
MONASH University
THE UNIVERSITY OF NOTRE DAME AUSTRALIA

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