



***Impact of a Quality Improvement and  
Education Initiative on 'Appropriate'  
Use of Anticoagulant Therapy in  
Women with Atrial Fibrillation***

***Pfizer Final Report***

***Submitted by:***

***University of Cincinnati***

***Center for Continuous Professional Development***

***Mark H. Eckman, MD MS***

***Principal Investigator***

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# Project Aim and Objectives

- **AIM:** To reduce the risk of stroke in patients with atrial fibrillation by developing and implementing a computerized decision support tool for individual patient-level decision-making about oral anticoagulant therapy.
- **Objectives:**
  1. *To develop an algorithm for assessing optimal anticoagulant therapy for patients with atrial fibrillation based to minimize their risk of stroke.*
  2. *Create an automated **Atrial Fibrillation Decision Support Tool (AFDST)** to provide primary care providers with current and optimal anticoagulant therapy for patients at the point of care.*
  3. *To assess the impact of the AFDST and provider education on patient care decisions related to antithrombotic therapy.*

# Major Outcomes

- Of 1,876 adults with non-valvular AF the AFDST found discordant (less than optimal) therapy in 931 (49.6%)
- 240 of 931 discordant pts. were seen during the study period (25.8%).
  - Overall discordant treatment dropped from 63.33% to 58.53% during a one year period ( $p=.02$ )
  - Among 90 patients who were seen in follow-up visits, discordant treatment dropped from 96.7% to 80.0% ( $p=.0001$ )

# Provider Practice Change

- Almost 70% of the providers reviewed the AFDST report prior to seeing their AF patient.
- Two-thirds of those providers found it helpful in the care of patients
- Over half of the providers discussed anticoagulation treatment decisions with their patients regardless of whether they had received or reviewed the AFDST report.

# Conclusions and Dissemination

- Providers prefer to have support tools integrated into the EMR for ease of use.
- Many primary care providers defer anticoagulation therapy decisions to specialists
- Patient preferences weigh heavily on providers' decisions regarding therapy and therapy changes.
- *This project resulted (to-date) in 2 professional publications, 3 national presentations, and 9 invited presentations.*