



# Hypertension Seoul 2016

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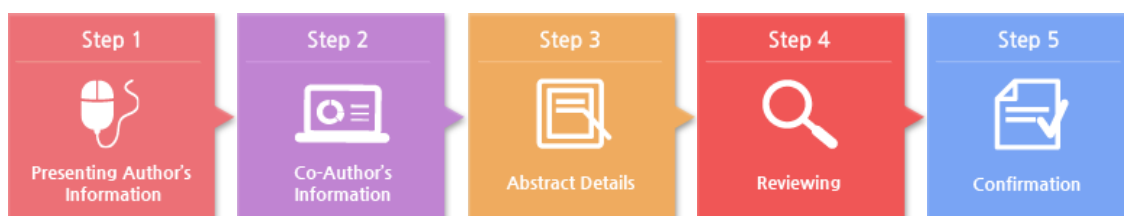
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### 4. Reviewing (Printed version)

#### Motivia®, a cardiovascular disease prevention program, decreases hospitalization length in patients with high risk for developing cardiovascular event. Restrospective analysis from 2010-2015

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**Objective:** Cardiovascular events (CE) due to atherosclerosis are preventable but the identification of adults at high risk (HR) is required. Burden of atherosclerosis is not considered for categorization of HR patients (HRPts), even though only fractions of CE are predicted by Framingham risk factors (FRS). Our objective was to investigate the effectiveness of a program (Motivia®) designed for detection and monitoring of HRPts in a health insurance program.

**Design and Method:** Motivia® is a program where patients are categorized based on the cardiovascular risk score using our previously reported algorithm, FRS combined with the Total Plaque Area (TPA) determination, and treatment is based on the post-test score. In this retrospective analysis (2010-2015) only HRPts (based on TPA+FRS) were included. After categorization, Pts were referred to Motivia® high-risk medical attention physician (MHP) or primary attention physician (PP) to perform evaluation and monitoring. Each Pt was seen at least each 3 months to achieve control of risk factors. The outcome measured were, time to first hospitalization for acute ischemic syndrome, coronary revascularization procedure, stroke, diabetes complication, and heart failure. We used models of survival (Log Rank test and Cox proportional hazards model) for the analysis. Outcome of these 2 groups were

compared. Pts signed informed consent and the study was approved by the BlossomDMO Argentina ethics committee.

**Results:** The analysis showed a significant reduction in the overall rate of CVE from 1.37% to 1.03% in both groups while in >64 years old the reduction was greater (from 4.51% to 2.45%). However, after age, sex and pre-treatment risk correction, we did not observe difference in the likelihood to have a cardiovascular. Nevertheless, in terms of hospital length, patients under MHP had shorter stay than PP (2.3 vs. 3.5 days/bed).

**Conclusions:** Motivia® program, based on intensive treatment using TPA determination may benefit patients and health insurance by decreasing hospital length

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