

Primary Care Outreach in Moderate and Severe Aortic Stenosis

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Background

As many as 14% of patients with severe aortic stenosis die after being referred for structural evaluation and waiting for valvular intervention to occur.¹ Early intervention has been shown to improve long-term mortality, with timely evaluation by the structural heart team being a crucial rate-limiting step in the process.² At UNMC, our catchment area includes patients across most of Nebraska as well as parts of Iowa, Missouri, and South Dakota. Our valve team receives ~250 referrals for aortic valve replacement per year with 100-120 TAVRs performed each year.

Objective

Develop strategies to reduce the time to intervention in severe aortic stenosis, primarily through early recognition of disease and expedite referral process from primary care physician to structural heart team. A retrospective analysis from 2023 data at our center demonstrates a large proportion of patients with moderate aortic stenosis (17%) (*Figure 1*) and even a small percentage of severe aortic stenosis patients (5%) (*Figure 2*) do not actively follow with any cardiology team. Within the population with severe aortic stenosis, 19% of patients following with cardiology had not yet received structural referral.

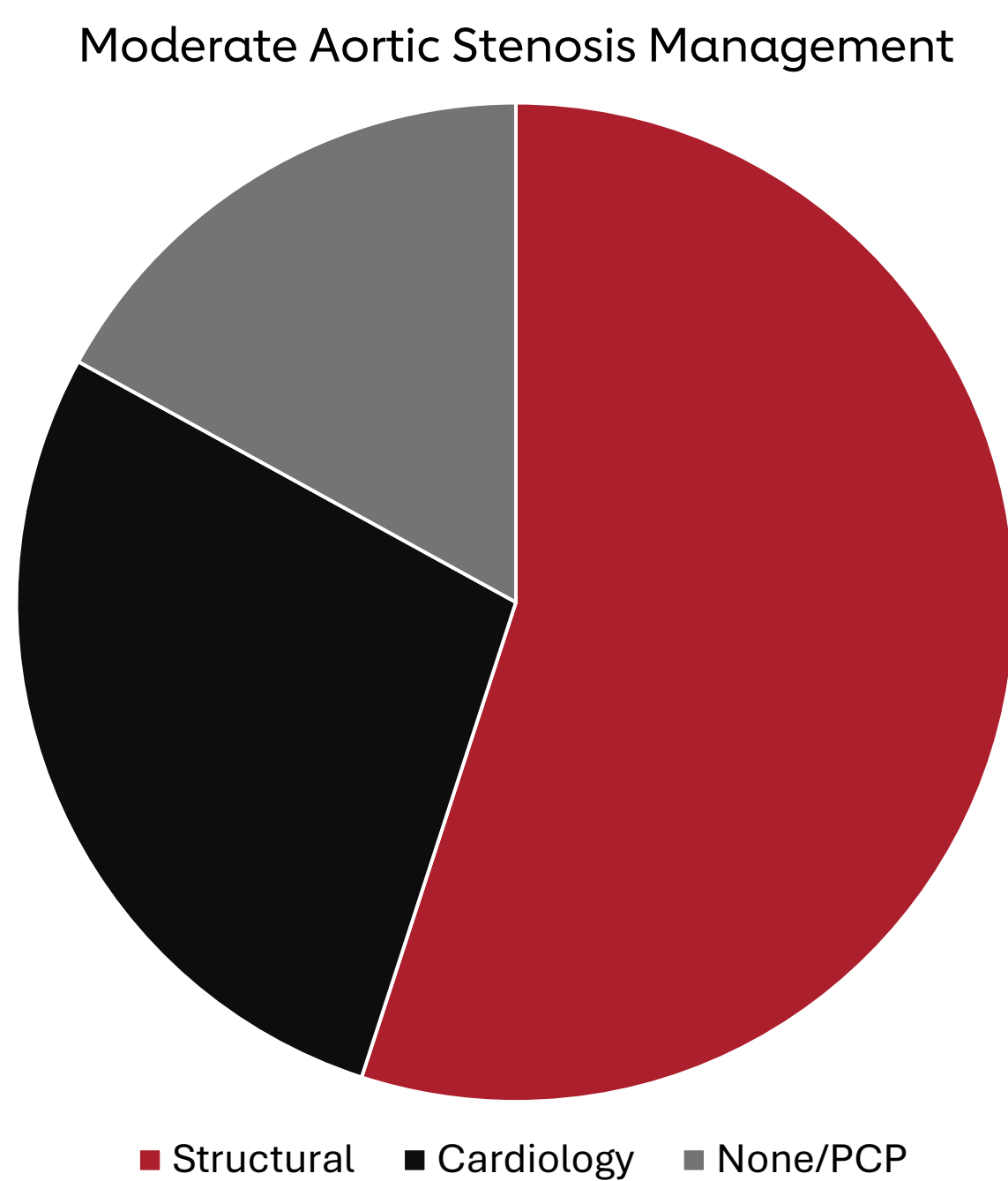


Figure 1

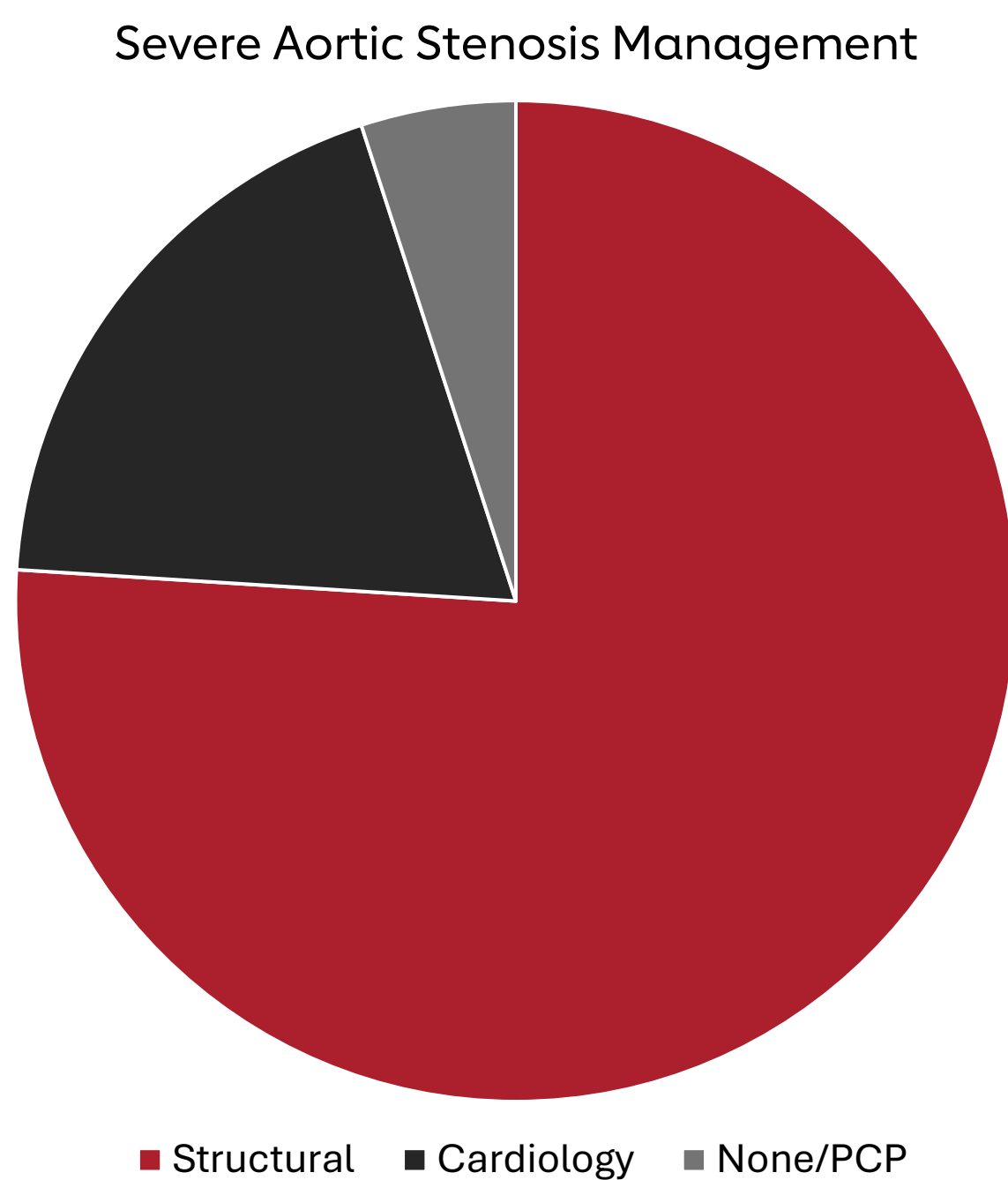


Figure 2

Methods

To address the potential care gap with patients needing more timely referral, the structural heart team was granted access to contact primary care providers for patients with echocardiographic diagnosis of either moderate or severe aortic stenosis for consideration of referral. This outreach is done via phone or EHR message.

Barriers

Identified barriers to appropriate timely referral include:

- Lack of recognition of disease severity
- Non-standardization of echocardiographic reporting
- Provider availability
- Time dedicated to analysis and reach out

Conclusions

While still in its infancy, the outreach program has the potential to narrow time to intervention by improving proper recognition of disease and appropriate referral. Within our observed population at our center, nearly 15% of patients overall with moderate and severe aortic stenosis are not actively managed by any cardiology team and therefore could benefit from outreach.

References

1. Sanjeev Bhattacharyya, Guy Lloyd, Mortality Whilst Waiting for Intervention in Symptomatic Severe Aortic Stenosis, *European Heart Journal - Quality of Care and Clinical Outcomes*, Volume 6, Issue 1, January 2020, Pages 89–90, <https://doi.org/10.1093/ehjqcco/qcz043>
2. Gahl B, Çelik M, Head SJ, et al. Natural History of Asymptomatic Severe Aortic Stenosis and the Association of Early Intervention With Outcomes: A Systematic Review and Meta-Analysis. *JAMA Cardiol.* 2020;5(10):1102-1112. doi:10.1001/jamacardio.2020.2497