



American Heart Association | American Stroke Association®

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Acute Myocardial Infarction Toolkit

Leveraging
**Patient-Centered
Communication**
to Engage Patients
after a Heart Attack





Talking With Your Patients

After a Heart Attack

When discussing acute myocardial infarction (AMI) with a patient, a clinician typically seeks to improve patient outcomes through adherence with medical directions. This can prove frustrating, if you are using the traditional model of giving instructions and expecting the patient to follow them. As you know, patients often do not do so.

In fact, non-adherence rates for chronic illness treatment programs and lifestyle changes approach 50 percent, according to some estimates. The cost of non-adherence can be staggering, as well. One analysis put the cost of poor medication adherence alone at \$100 to \$300 billion annually in direct and indirect costs, which is avoidable. And the toll on patients is harrowing: Medication non-adherence is implicated in more than 125,000 deaths in the U.S. every year.

So what to do? A model for getting patients to change their behaviors for better health is emerging. This process of collaborative communication encourages clinicians and patients to work together to achieve specific health goals. Key to this approach is a patient-centered focus for all communications with your patients.

The Patient-Centered Focus: A Closer Look

Following a life-changing event such as a heart attack, the fast pace of healthcare delivery and the number of patients vying for your time can run afoul of strong communications regarding the treatment plan and other important information. Time available for a conversation with each patient is limited. One study found that the mean duration of a primary care visit was 17.4 minutes.

The behavioral sciences have advanced a model for patient communication that is improving patient outcomes. By getting patients involved in their self-care following a major medical event, outcomes can be improved and hospital readmissions reduced. The new model suggests a variety of effective approaches.

The importance of timing

In the immediate aftermath of a heart event, patients are typically too confused by the perceived chaos surrounding them to take in even basic information, much less a detailed conversation about the post-hospital treatment plan. Introducing the topic later in their stay, and following up with reinforcing conversations, produces the most optimal results in terms of patient adherence.

Compliance vs. Adherence

It's helpful to distinguish between two often-confused terms. By "compliance," we are referring to the patient's behavior reflecting medical advice. Compliance thus has a passive aspect to it.

By contrast, "adherence" is a more active concept. Adherence generally refers to the patient's voluntary collaboration in a treatment plan with the goal of producing a specific result.



Gaining the patient's cooperation and engagement

An overall approach to enlist the patient as an active participant in his or her care is recommended.

Patients respond to clinicians in a variety of ways. Therefore, it's helpful to understand diverse personality profiles before discussing a health condition and a treatment plan, so that confrontation can be avoided and support gained.

Personality Types and Their Reaction to Medical Illness

| Personality Type | Reaction to Medical Illness |
|--|---|
| Dependent, overdemanding | Needs special attention |
| Orderly, controlled | Needs as much information as possible |
| Dramatizing, emotionally involved, captivating | Acts with and expects warmth and personal connection to caregiver |
| Long-suffering, self-sacrificing | Attributes illness to “bad luck” |
| Guarded, querulous | Paranoid, expects the worst |
| Self-aggrandizing | Often insecure when speaking with anyone other than their own physician |
| Uninvolved, aloof | Often denies their illness |

A prominent feature of effective communication in the clinical setting is the patient’s personality profile with reference to the AMI diagnosis. This personality profile influences how a patient copes with the diagnosis and the changes needed for adherence to a treatment plan.

Each patient is different, and all may face a combination of social, psychological, and demographic issues complicating their desire to comply with their treatment plans. Gaining insight into each patient’s personal challenges can help guide a more personalized treatment plan.

Starting the conversation

The period of hospitalization following a heart attack is fraught with worry for most patients. Confusion and even depression can be factors interfering with a patient’s ability to understand what happened and what to do to keep it from happening again.

The conversation should begin with an explanation of what a heart attack is in the simplest terms possible. Many patients are desperate for information about what just happened and rely on you for explanations they can understand. In addition to being informed about their heart event, patients need to know what you did or are doing to treat the problem and what they need to do next in order to get back to living their lives.

Active listening

Focusing on the patient while he or she talks is paramount to understanding the individual's issues in adhering to the treatment plan. Such cues as asking relevant questions, appropriate eye contact (too much can be intimidating), reflecting what the patient says with careful paraphrasing, and summarizing what the patient says can all contribute to a mutual understanding and agreement on what's next in the treatment plan.

Motivational interviewing

This technique involves actively encouraging a patient to examine his or her own motivations for resistance to or frustration with the treatment plan. Motivational interviewing then helps the patient explore the reasons for adhering to the plan, as well as the obstacles to doing so and what can be done about them. It's important that the patient and the clinician grasp all this before the clinician offers medical advice.



Discussing difficult topics

It's not easy to cover some of the necessary issues that have to be dealt with. Many people have very strong emotions connected with their body weight, diet, level of physical activity, or even sex. Yet these must be discussed with the patient.

Taking a patient-centered approach to communicating difficult subjects is most likely to secure the patient's adherence to the treatment plan.

Steps for motivational interviewing

- Gain permission to discuss the condition and treatment plan with the patient.
- Begin the discussion with an open-ended question.
 - How are you feeling today?
 - How are you spending your days?
 - Is there anything troubling you about your condition or treatment plan?
- When the patient states an opinion, reflect it back to him or her to show understanding.
- Discuss the importance of the condition and the treatment plan, but from the patient's point of view.
- Ask what might affect that importance, either positively or negatively.
- Explore how confident the patient is that he or she can make changes if needed.
- Ask what might affect that confidence, either positively or negatively.
- Discuss the patient's ambivalence about the treatment program and its goals.
- Once the patient has indicated readiness, collaborate on a treatment plan.



Using mobile technology

It's a fact that more and more patients are relying on their smartphones and tablets for needed health information to a greater degree than ever before. According to the Pew Research Center, as of 2015 some 64% of Americans owned smartphones, up from 35% in 2011. Moreover, **62% reported that they have used a smartphone to look up health information.** Of course, the quality of that information can vary greatly ... which is where you come in. Be sure to help your patients identify websites where they can access evidence-based information about their condition.



Secondary Prevention

Of course, the idea behind the treatment plan following a patient's heart attack is to prevent a future recurrence. This entails changes to the patient's lifestyle, changes that are not easy to make—but vitally important. By leveraging a patient-centered focus, you can implement an agreed-upon plan to usher your patients toward adherence and recovery.

Identifying a support network

Helping a patient recognize and organize a group of people to help provide them with support for making lifestyle changes and sticking to a medication plan is critical. Church, community groups (formal or informal), friends, and family can all be important sources of support. The American Heart Association has an online support community at **[Heart.org/SupportNetwork](https://www.heart.org/SupportNetwork)**.

More resources for your patients

The American Heart Association offers a variety of educational tools and resources that can help you educate and engage your patients after a heart attack.

Heart Attack Education Website

Patient Discharge Worksheet

English

Spanish

Patient Information Sheets

Support Network

Cardiac Rehab Tools:

Cardiac Rehab Education Website

Cardiac Rehab Referral Card

English

Spanish

An Active Partnership Workbook

Healthy Living Tools



AstraZeneca is proud to support the American Heart Association's Guideline Transformation and Optimization Initiative.

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