Effect of Angina Under-recognition on Treatment in Outpatients with Stable Ischemic Heart Disease

Mohammed Qintar, MD

John A. Spertus, MD MPH, Kensey L. Gosch, MS, John Beltrame MD, Faraz Kureshi, MD MSc, Ali Shafiq, MD, Tracie Breeding, RN, Karen P. Alexander MD, Suzanne V. Arnold, MD MHA





Disclosures

- Mohammed Qintar and Ali Shafiq– Supported by NIH T32 grant # T32HL110837
- John A. Spertus, MD MPH Funding from Gilead, Copyright to SAQ
- All others None



Importance of angina recognition



MID AMERICA HEART INSTITUTE

Fihn et al. JACC Vol. 60, No. 24, 2012

Assessing angina by cardiologists

- The Angina Prevalence and Provider Evaluation of Angina Relief (APPEAR) involving 25 US outpatient cardiology practices
- Compare patient-reported and MD-reported angina



Seattle Angina Questionnaire SAQ Angina Frequency domain





Prior insights - Under-recognition of angina

Overall agreement between patients and physicians...

-kappa = 0.48

- Physicians reported no angina in...
 - 45% of patients reporting monthly angina
 - 26% of patients reporting daily/weekly angina
- The implications are unknown

Baint Luke's MID AMERICA HEART INSTITUTE

Grodzinsky et al. Circ Cardiovasc Qual Outcomes. 2015;132: A18360 Shafiq et al. Circ Cardiovasc Qual Outcomes. 2015;8: A7



 Study the implications of angina underrecognition on treatment escalation



Definitions

- Treatment escalation:
 - Intensification/addition of antianginal medications
 - Diagnostic/invasive tests:
 - stress test
 - coronary computed tomography angiography
 - coronary angiography
 - revascularization (percutaneous coronary intervention or bypass graft surgery)



Statistical analysis

- Hierarchical multivariable logistic regression model
 - Physician and site as random effects
 - Variables included...
 - » Under-recognition on angina
 - » Age
 - » Gender
 - » Race
 - » Hx of CABG
 - » SAQ AS and SS
 - » On ≥ antianginal med on arrival
 - » Physician specialty



» Avoidance of care due to cost



MID AMERICA HEART INSTITUTE

	Treatment Escalation N=106	No Treatment Escalation N=305	P-value
Age (y) (mean)	68	69	0.46
History of HF	10%	18%	0.057
History of MI	29%	41%	0.02
History of PCI	63%	55%	0.14
History of CABG	37%	29%	0.11
On ≥2 antianginal meds	43%	38%	0.36
SAQ Angina Frequency	70	75	0.01
SAQ Angina Stability	47	56	0.001
SAQ Quality of Life	57	64	0.001
SAQ Treatment Satisfaction	85	88	0.03
SAQ Summary Score	62	66	0.02



Physicians Characteristics

	Treatment Escalation N=106	No Treatment Escalation N=305	P-value
Male	84%	86%	0.67
Practice years	20	20	0.99
Interventional cardiologist	31%	38%	0.20



Recognition of angina



 Correctly recognized and over-recognized angina had similar rates of treatment escalation (p=0.23)





Daily angina

Weekly angina

Monthly angina

Daily/Weekly angina on <2 antianginal medications Appropriate recognition of angina Under-recognition of angina



Predictors of treatment escalation

	OR (95% CI)	P value
Under-recognition of angina	0.10 (0.04-0.21)	<0.001
Age (per 5 years)	0.91 (0.79-1.04)	0.177
Male	1.04 (0.56-1.95)	0.889
White race	0.39 (0.14-1.07)	0.066
Self-reported avoidance of care due to cost	0.60 (0.20-1.83)	0.365
History of coronary bypass graft surgery	1.16 (0.59-2.27)	0.662
SAQ Angina Stability (per 25 point decrease)	1.32 (0.96-1.82)	0.087
SAQ Summary Score (per 10 point decrease)	0.96 (0.87-1.05)	0.358
On ≥2 antianginal medications on arrival	1.17 (0.61-2.22)	0.642
Physician specialty: interventional cardiology	1.09 (0.51-2.34)	0.827



Limitations

- Cross sectional study
- No follow up information on health status or clinical outcomes
- Physicians were aware of study



Conclusions

 Under-recognition of angina is common
 Under-recognition is strongly associated with a lack of treatment escalation

 Patients with under-recognized angina were 10-fold less odds to get treatment escalation



Future directions

- Develop novel strategies to improve angina recognition
 - Study implementation of patient-reported outcome measures (e.g. SAQ) in cardiology outpatient practice
- Test the impact of improved recognition on PRO and clinical outcomes



Acknowledgments

 Many thanks to my mentors at MAHI for their great support



Thank you!



SAQ AF with angina diary and SL NTG

Original Article

Development and Validation of a Short Version of the Seattle Angina Questionnaire

Paul S. Chan, MD, MSc; Philip G. Jones, MS; Suzanne A. Arnold, MD; John A. Spertus, MD, MPH

Original Article

Comparison of the Seattle Angina Questionnaire With Daily Angina Diary in the TERISA Clinical Trial

Suzanne V. Arnold, MD, MHA; Mikhail Kosiborod, MD; Yan Li, PhD; Philip G. Jones, MS; Patrick Yue, MD; Luiz Belardinelli, MD; John A. Spertus, MD, MPH



Physician form

In the past 4 weeks, has the patient had chest pain,	angina or angina-equivalent symptoms?	O Yes	O No
COMPLETE ONLY FOR SYMPTOMS OCCURR	RING IN THE PAST 4 WEEKS		
Category (check one only): O Typical angina O Atypical angina/angina equivalent O Non-cardiac chest pain			
Frequency of symptoms (check one only): O Daily O Monthly O Weekly O Less than monthly			



Variability among physicians

- After adjusting for clinical characteristics and physicians' under-recognition rates
- The median odds ratio for variability across physicians was 1.96 (p=0.010)
- The odds of treatment escalation varies, on average, 2-fold between two randomly selected physicians seeing statistically similar patients.



Reasons not to escalate treatment

	Treatment Escalation N=106	No Treatment Escalation N=305	P-value
Systolic BP	128.8 ± 19.7	125.8 ± 16.9	0.126
Systolic BP (Median (IQR))	127.0 (116.0, 142.0)	124.0 (114.0, 136.0)	0.088 W
Diastolic BP	72.2 ± 11.3	71.4 ± 10.7	0.518
Diastolic BP (Median (IQR))	70.0 (64.0, 80.0)	70.0 (64.0, 79.0)	0.432 W
Heart rate	70.3 ± 10.9	73.4 ± 54.7	0.566
Heart rate (Median (IQR))	68.5 (63.0, 79.0)	70.0 (62.0, 78.0)	0.958 W
Insurance for medications	102 (97.1%)	291 (96.0%)	0.768
Avoid care due to cost (Occasionally or more often)	8(7.5%)	30 (9.9%)	0.472



Treatment Escalation - Medications



Medication



Treatment Escalation – Diagnostic/Invasive tests





Treatment escalation for daily/weekly angina on <2 anti-angina medications



MID AMERICA HEART INSTITUTE