



SAINT LUKE'S HEALTH SYSTEM

Directed by Cardiovascular Consultants, P.A.

saintlukeshealthsystem.org

## NEWS

Sept. 29, 2009

For Immediate Release

Media Contact: Kerry O'Connor (816) 932-8646, pager (816) 440-0001

### **Innovative informed consent tool expands to national centers**

*Mayo Clinic, Yale-New Haven and others to adopt Saint Luke's patient consent tool;  
new NIH grant will support further expansion*

KANSAS CITY, Mo. – Each year more than a million interventional cardiac procedures, such as angioplasty, are performed to restore blood flow to the heart. Prior to the procedure, patients discuss with their doctors the risks, benefits and potential outcomes based on their individual situations and risks.

In 2006, a tool developed by outcomes researchers at Saint Luke's Mid America Heart Institute called PREDICT (Patient Refined Expectations for Deciding Invasive Cardiac Treatments) was introduced to give patients a much clearer picture of their projected outcomes based on their medical circumstances. To date, hundreds of patients at Saint Luke's undergoing planned procedures have reviewed and signed the easy-to-visualize, graphically formatted consent form prior to their procedures. This was the first known implementation of individualized consent forms as part of the routine process of care and was shown to improve comprehension, satisfaction and the quality of the informed consent process.

Until now, patients at Saint Luke's Mid America Heart Institute, Saint Luke's Northland Hospital, Saint Luke's East-Lee's Summit and Saint Luke's South were the only ones in the world benefiting from the technology. Starting in early 2010, the tool will be adopted at some of the nation's most prestigious medical centers, including Yale-New Haven Hospital in New Haven, Conn., the Mayo Clinic in Rochester, Minn., and Integris Baptist Medical Center in Oklahoma City, Okla.

Infrastructure and staff resources to oversee expansion of PREDICT at these three centers is funded, in part, by a \$2.5 million grant from the American Heart Association to fund outcomes research that was awarded to Saint Luke's in 2008.

#### **New \$4+ million NIH grant will support more expansion**

More hospitals are expected to follow suit. Up to six more hospitals across the U.S. will incorporate the PREDICT tool in their care, due to funding provided by a new two-year, \$4.17

million grant from the National Heart, Lung, and Blood Institute at the National Institutes of Health (NIH) through the American Recovery and Reinvestment Act of 2009.

“In the rapidly changing world of cardiovascular medicine, physicians face an increasingly complex array of information about possible survival rates, risk factors and future outcomes for certain heart patients,” said cardiologist John Spertus, M.D., M.P.H., director of Cardiovascular Outcomes Research at Saint Luke’s Mid America Heart Institute. “Although new data to individually estimate the risks and benefits of treatment are available, the usual informed consent process remains vague and anecdotal.

“PREDICT has changed that at Saint Luke’s because we’ve deployed a tool that helps patients better understand and participate in their health care decisions. Now some of the country’s most prestigious medical centers will benefit from Saint Luke’s approach by deploying and testing this tool on the care and outcomes of patients at their centers.”

PREDICT is a Web-based program that generates a risk analysis for potential in-hospital complications, including mortality and bleeding, and restenosis (reclosing) of arteries using bare metal stents and drug-coated stents. These analyses draw on the vast databases of Heart Institute patients and the American College of Cardiology’s national angioplasty registry, and take into account each patient’s clinical profile, including age, height, weight, current medications, lifestyle and other medical conditions. The technology generates an individualized consent form at the bedside for physicians to discuss with their patients.

“Given the ongoing challenge of reforming health care that is gripping the nation, developing new approaches to apply expensive technologies to the patients who most benefit could lead to more cost-effective health care that maximizes the value of the money spent on procedures such as angioplasty,” Dr. Spertus commented. “Both the AHA and NIH grants will formally examine the impact that PREDICT has upon the cost-effectiveness of angioplasty and offer the potential to maximize the benefits of this common procedure while minimizing the costs. If successful, this approach could then be extended to numerous other procedures in medicine.”

*Saint Luke’s Mid America Heart Institute is a member of Saint Luke’s Health System, which consists of 11 area hospitals and many primary care practices, and provides a range of primary, acute, tertiary and chronic care services. The health system is an organization in which the physicians and hospitals, functioning as an integrated unit, assume responsibility for the delivery of comprehensive, cost-effective, quality health care for people in the metropolitan Kansas City area and the surrounding region.*

###