

Trials Help Define CHF Populations at Heart Failure 2011 Congress



Two trials presented at the Heart Failure Congress 2011, organized by the Heart Failure Association of the European Society of Cardiology (HFA of the ESC), will help to define the precise populations of patients with chronic heart failure (CHF) in whom telemedical management delivers benefits. Both the TIM-HF and TEHAF studies - presented in Late Breaking Session 1 - revealed that telemonitoring showed significant benefits in defined subgroups of patients. The results, which will be used to help in the design of future trials, come after the overall results from both trials demonstrated no statistical benefit for telemonitoring.

Remote telemedical management is emerging as a medical technology that may help to optimise therapy for CHF patients. "Compared to 20 years ago patients are living longer with CHF due to improvements in the medical management of the disease. Finite health care resources are making it more important than ever before to keep patients well and out of hospital," said Friedrich Koehler, the principal investigator of the TIM-HF study. Remote telemedical management, he added, has the potential to improve patient compliance and allow early detection of the signs and symptoms of cardiac decompensation that if treated promptly can prevent both hospitalisation and death.

Two recent meta-analyses (including a Cochrane Review) showed that telemedical monitoring of CHF patients can improve overall survival by 17% to 47% during six to 12 months of follow-up^{1,2}. The results, however, are in direct contrast to the TIM-HF³ and TEHAF studies that revealed no such benefits.

"The fact that we showed no benefit when two meta-analyses had previously demonstrated benefit suggested there could be problems with our study design and indicated the importance of undertaking further post hoc analyses," said Koehler, from Charité Universitätsmedizin, Berlin. "There was a real danger that with the wrong trial design we could be writing off life saving therapies."

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