Uncovering Clinical Gaps in CAD: A Clinical Practice Assessment

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INTRODUCTION

Coronary arterial disease (CAD) is one of the most common cardiovascular diseases in the world.

Despite the major health risks associated with CAD, many patients are not optimally treated, resulting in increased risk for cardiac events and mortality.

A 23-question, online, continuing medical education (CME) survey was launched on December 19, 2017 and data were collected through February 8, 2018.

Logistic regression was employed to determine association between clinical data) and case-based questions (treatment) and knowledge, confidence and attitudes on treatment practices in CAD.

This study's objective was to assess the relationship between increased risk for cardiac events and mortality.

METHODS

PURPOSE

This study's objective was to assess the relationship between physicians' knowledge/attitudes and case-based decision making in the management of CAD in order to test the hypothesis that a positive relationship exists between knowledge and case-based application of appropriate care in CAD management.

A 23-question, online, continuing medical education (CME) survey was developed, including knowledge (CAD disease awareness, diagnosis, clinical data) and case-based questions treatment.

Logistic regression was employed to determine association between knowledge, confidence and attitudes on treatment practices in CAD.

The activity launched on December 19, 2017 and data were collected February 8, 2018.

RESULTS

Significant positive relationships were observed:

- Physicians who had higher knowledge of clinical trial data in CAD were more likely to have a significantly higher level of knowledge relating to emerging antiplatelet agents (NOACs) in the setting of CAD (*P* < 0.001) (Figure 2).
- Physicians who were able to recognize risk factors for CAD had a significantly higher level of knowledge relating to emerging antiplatelet agents (NOACs) data in the setting of CAD (*P* = 0.001) (Figure 1).
- Physicians who were aware of the latest clinical data in CAD were significantly more likely to have a positive attitude towards incorporating new antithrombotic therapies into clinical care for patients with CAD (*P* < 0.001) (Figure 4).

CONCLUSION

This educational research study demonstrated a significant positive relationship between physicians' knowledge/attitudes and their confidence in treating patients with CAD and uncovered significant knowledge and treatment gaps among physicians who treat patients with CAD.

These findings support the need to continue to educate cardiologists, PCPs, and other physicians in order to align physicians' knowledge and performance to improve outcomes in patients with CAD.

REFERENCES

3. This educational research study demonstrated a significant positive relationship between physicians' knowledge/attitudes and their confidence in treating patients with CAD and uncovered significant knowledge and treatment gaps among physicians who treat patients with CAD.
4. These findings support the need to continue to educate cardiologists, PCPs, and other physicians in order to align physicians' knowledge and performance to improve outcomes in patients with CAD.

NOTE: Correct answer is circled in the figure.