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Barriers and Solutions for Deploying, Expanding and Sustaining Remote Patient Monitoring for Managing Patients with Heart Failure: Qualitative questionnaire-based study in France

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Background: Despite therapeutic advances in the management of Heart Failure (HF), the clinical and economic burdens of the disease remain significant. Remote Patient Monitoring (RPM) has shown to reduce mortality and hospitalization rates and improve patient Quality of Life (QoL). Its use has also been recommended by the European Society of Cardiology (ESC). However, RPM deployment into routine clinical activities is still limited, particularly in France.

Aims: The objective of this study was to identify and describe the perceived barriers and solutions of deploying, expanding, and sustaining RPM for managing patients with HF.

Methods: A qualitative online questionnaire-based study was conducted throughout cardiology centers in France between June 15 to September 15, 2022. Cardiologists both in private practice and public hospitals were included to participate.

Results: In total, participants from 71 French cardiology centers were included (70.5% practicing in public hospitals and 29.5% in private practice). Our study identified organizational, technical and regulatory barriers. Lack of dedicated staff to manage alerts, lack of training and the additional workload were barriers reported by participants. Integrating nurses in the management of alerts and designating a telemedicine referent were stated as two solutions/recommendations.

Conclusion: RPM to manage HF patients in France is still not used to its potential. In this study, cardiologists stated that RPM should be easy to use for both patients and HCPs while being effective (generating a low number of false alerts) to improve the deployment and expansion of its use.

Biography

Manel EL BLIDI is a HF specialist who has expertise in the management of chronic heart failure patients. She contributed to the development of ambulatory units designed for the management of heart failure patients based on a new fast patients pathways after discharge with fast titrations, enhancing collaboration with general practitioners and innovative therapeutic education tools involving nurses. She also works on the development of innovative remote patient monitoring tools for the follow-up of these patients and thus reducing the rates of rehospitalizations.

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