

# Understanding General Practitioners' experience of heart failure medication up titration.

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## Abstract

**Background:** Heart Failure (HF) is a complex clinical syndrome affecting an estimated 64.3 million people worldwide. In Australia, 1-2% of the general population and 5.6% of First Nations people live with HF, experiencing debilitating symptoms that significantly impact their quality of life. Guideline-directed medical therapy (GDMT) combines four medication classes, that are gradually up titrated to maximum tolerated doses.

**Aim:** To determine General Practitioners' (GPs) confidence in implementing guideline-directed medical therapy (GDMT) and up titration for HF patients post-discharge, identify barriers, and preferred resources.

**Method:** A cross-sectional survey of GPs in metropolitan Perth was conducted. An investigator-developed survey assessed confidence, barriers, and supportive resources. The survey was distributed via the Western Australian Primary Health Alliance.

**Results:** Thirteen GPs participated, reporting an average of one up-titration per month. Less experienced GPs were most confident. Concerns about low blood pressure and unfamiliarity with HF medications were leading barriers. Hospital discharge summaries were deemed most useful.

**Conclusion:** Providing patient-specific GDMT guidelines and up-titration forms in discharge summaries could benefit GPs. Research is needed to better understand the issues, target more GPs, and improve HF management. Addressing GP-related barriers and providing ongoing education and support may enhance GDMT implementation. Effective strategies are essential to promote optimal HF management, reducing the burden on the healthcare system. Exploring innovative solutions i.e digital health tools, may improve HF outcomes. By understanding the complexities of HF management, healthcare providers can work towards improving patient care and reducing the impact of HF on individuals and communities, improving quality of life.