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Title

Data-driven Interventions to improve Hypertension Management in Primary Care Focusing on Priority Populations

Priority 1 (Research Category)

Hypertension

Presenters

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Abstract

Context: Health delivery systems are facing increasing calls to develop new ways to address cardiovascular health outcomes, especially in priority populations. Priority populations are those most affected by hypertension (HTN). African Americans, in particular, have the highest prevalence of HTN morbidity and mortality.¹

Researchers have proposed data-integrated interventions as a potentially more effective approach for managing HTN.² However, existent research does not adequately address the role of data in HTN management, particularly in primary care and priority populations. Additionally, research has yet to document the different approaches being implemented to improve the management of HTN, focusing on priority populations.

Objective: The purpose of this study is to determine how data-driven approaches improve HTN management in priority populations? Specifically,

- 1) What kinds of approaches exist?
- 2) How is data driving these approaches?

Study Design/Analysis: Systematic Review

Setting: Primary care and Family medicine

Population Studied: Priority Populations

Intervention: Data-driven Interventions

Outcome Measures: HTN management

Results: We retrieved 521 articles and included 26 articles. The majority of studies implemented a health coaching intervention (n=8). Other included studies implemented a disease management program, best

practice alert, clinical decision support, medication management, chronic care model, home BP monitoring, case management, targeted case finding, community health workers, and dashboard intervention.

Concerning data utilization, the EHR served three main functions. These were identification, intervention, and monitoring. Studies used EHR to either identify eligible patients, connect multiple components of the primary interventions, or to monitor changes in the target outcomes.

Conclusion: This review sheds light on current approaches to HTN management in priority populations. Findings from the review highlight the widespread adoption of a data-centered approach in the management of HTN. We suggest the following next steps for future research: 1) Examine whether differences exist in terms of data quality and effectiveness between data sources used in primary care research and 2) Further explore best practices for data-driven interventions in primary care.