DIGITAL ENGAGEMENT TO CAPTURE INSIGHTS INTO PATIENT PERSPECTIVES ON CARE AND **QUALITY OF LIFE: UTILIZING AN ONLINE SURVEY TO UNDERSTAND THE BURDEN ON PATIENTS POST-ACUTE MYOCARDIAL INFARCTION**

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Background and objectives

- Patients who have had an acute myocardial infarction a very high risk of having recu at are cardiovascular (CV) events in the following year¹
- Given the need for long-term lifestyle changes post-AMI care, patients often experience red health-related quality of life^{2,3}, which rarely return pre-infarction levels
- The importance of tailored care to address pa has been increasingly recognized preferences recent years⁴
- Here, we designed an online survey designed to g patient perspectives post-AMI in order to assess how engagement can identify treatment preferences/goals

Methods

- This survey was designed by an advisory board of m experts and patients, and hosted on an online platform, collecting GDPR-compliant data
- Adults in the USA who had an AMI in the pre-12 months were recruited via the patient platform associated online partners
- Patients who were members of the online community invited to participate in the survey via email and rec weekly digital reminders to complete it
- The survey approved by an institutional review board it was unincentivized and self-administered, without influence of a clinician or interviewer
- Survey questions were defined under five topics, as shown in Figure 1
- Target enrollment was 150 patients

Results

- Recruitment was completed within a two-month time period, between October and December 2022
- In total, 151 patients completed the survey
- Basic demographic characteristics are shown in **Figure 2**
- Of the respondents, 58 (38%) patients had their latest AMI in the past 90 days (Figure 3), indicating that patient engagement is feasible in the early period post-AMI
- Although survey studies can be subject to different types of bias (e.g., recall bias) several strategies were employed to reduce the impact of bias on the results (**Figure 4**)

		Figure 1. Survey qu	ue
(AMI)		1. Screening	
urrent and duced ns to		 Age/gender Residence Experience of an AMI Number of AMIs experienced Date of first AMI Date of last AMI 	
		3. Patient pathway	
oatient d in gather digital		 Surgery required for the AMI Hospitalization/length of stay for AMI Treatments received after discharge Duration of treatment Perceptions of/involvement in cardiac 	•
C		renabilitation program	
nedical patient		 4. Burden of AMI and unmet needs Most prominent feelings immediately after AMI and at time of survey completion Impact of AMI on patients' life/diet/physical activities 	
evious		 Current employment status 	
n and		5. Treatment burden/expectations of n	ev
/ were ceived (IRB),		 Perceived benefits and drawbacks of current treatments Perceived treatment burdens Perceived changes in adherence between hospitalization and the 	•
direct	AMI, acute	e myocardial infarction; HCP, healthcare professional	•

Conclusions

- Online surveys addressing post-AMI patient perspectives are feasible and can be a viable tool to better understand patient needs
- Future bigger and broader surveys in this area are needed to ensure patient preferences are addressed in their care







AMI, acute myocardial infarction; HCP, healthcare professional

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Presenter disclosures:

References:

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