First experience on value-based healthcare of coronary artery disease patients using ICHOM coronary artery disease person standard set reporting in Bangkok Hospital Pattaya

**Background**
- Bangkok Pattaya Hospital (BPH) serves a significant tourist and expatriate/retiree population.
- Heart disease is common among these communities.
- Hospital aims for improved care for coronary artery disease (CAD) patients.

**Study Design**
- Descriptive study in 125 CAD patients

**Time Period**
- August 2022 - April 2023

**Measurements**
- Seattle Angina Questionnaire (SAQ-7)
- Rate Dyspnea Scale (RDS)
- Patient Health Questionnaire (PHQ-2)

**Interventions**
- Clinical practice guidelines for CAD care
- Protocol for ACS patient care: medication, nutrition, rehabilitation, exercise
- "Enhanced Recovery After Cardiac Surgery" for coronary bypass graft surgery patients
- Follow-up protocol to monitor complications

**Participants**
- Total: 125
- Thai: 67%
- Female: 14%
- Male: 86%
- 50% Daily Activity Limitation
- 84% With Comorbidities

**Results**

**Clinical Outcomes**
- CABG 30-day mortality: 2.4%
- Acute renal failure: 2.4%
- Stroke: 0.8%
- Repeat Surgery in CABG: 2.7%
- No major complications in the coronary angioplasty group

**ROSE Dyspnea**
- 4 or more times per day
- 3 or more times per week but not every day
- 1-2 times per week
- Less than once a week
- 1-3 times per day
- None over the past 4 weeks

**PHQ-2 Score**
- PHQ-2 < 2
- PHQ-2 ≥ 2

**Conclusions**
- ICHOM provides a shift to a whole-person-focused approach from a disease-centric medical paradigm
- ERAS program in heart surgery patients and CGPC ACS program in ACS patients led to:
  - Positive clinical outcomes
  - Reasonable medical expenses
  - High patient satisfaction
  - Restoration of daily life activities, achieving a value-based healthcare status