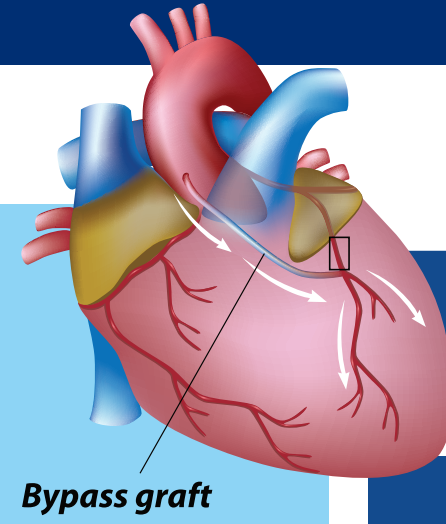


First experience on value-based healthcare of coronary artery disease patients using ICHOM coronary artery disease person standard set reporting in Bangkok Hospital Pattaya

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.



Bypass graft

Boontiang Surajit¹, Thapanee Chaikulab², Chonnanan Suttipun³, Sumalee Samakkanonthakarn⁴

PREOPERATIVE

- Prehabilitation
- Training and physical exercise
- Cessation of toxic habits
- Correct nutritional deficiency
- Risk stratification Hb1Ac and albumin
- Avoid prolonged preoperative fasting
- Hydrocarbon overload 2 hours at the pre-OP
- Avoid long half-life sedatives
- Correct preoperative anemia
- Proper antibiotic prophylaxis
- Incentive spirometry

INTRAOPERATIVE

- Short half-life anesthetics
- Protective pulmonary ventilation
- Target-guided fluid therapy
- Avoid hyperthermia during reheating
- Bleeding prophylaxis with lysine analogues
- Rigid external prophylaxis (plaque)
- Proper antibiotic prophylaxis
- Administration < 60 min prior to incision
- Eradicate nasal colonization by Staphylococcus aureus

POSTOPERATIVE

- Early extubation
- Early mobilization
- Multimodal analgesia
- Incentive spirometry
- Strict glycemic control
- Avoid nephrotoxic drugs within the first 48 h at the PO
- Target-guided hemodynamic management
- Prophylaxis against nausea and vomiting
- Early drain withdrawal
- Early enteral nutrition
- Early screening for delirium

Study Design

- Descriptive study in 125 CAD patients

Time Period

- August 2022 - April 2023

Measurements

- Seattle Angina Questionnaire (SAQ-7)
- Patient Health Questionnaire (PHQ-2)
- Rose Dyspnea Scale (RDS)

Interventions

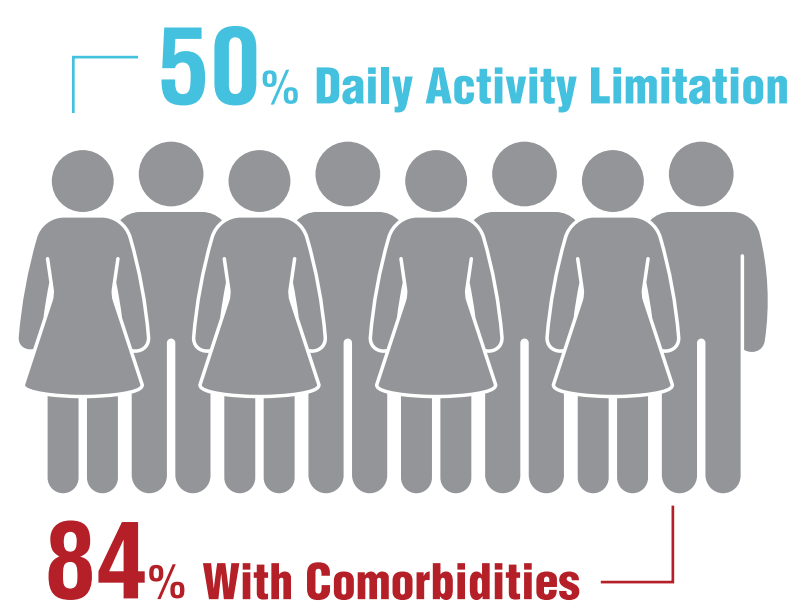
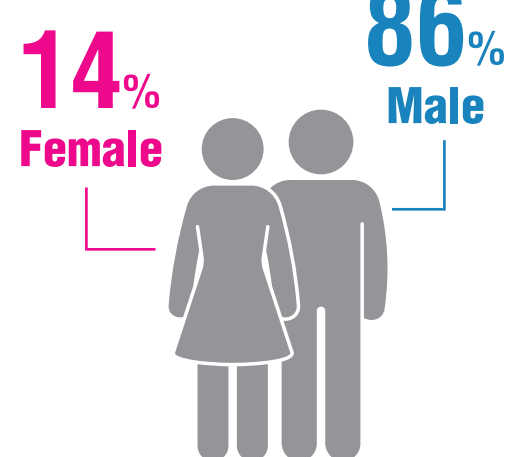
- Clinical practice guidelines for CAD care
- "Enhanced Recovery After Cardiac Surgery" for coronary bypass graft surgery patients
- Protocol for ACS patient care: medication, nutrition, rehabilitation, exercise
- Follow-up protocols to monitor complications

Results

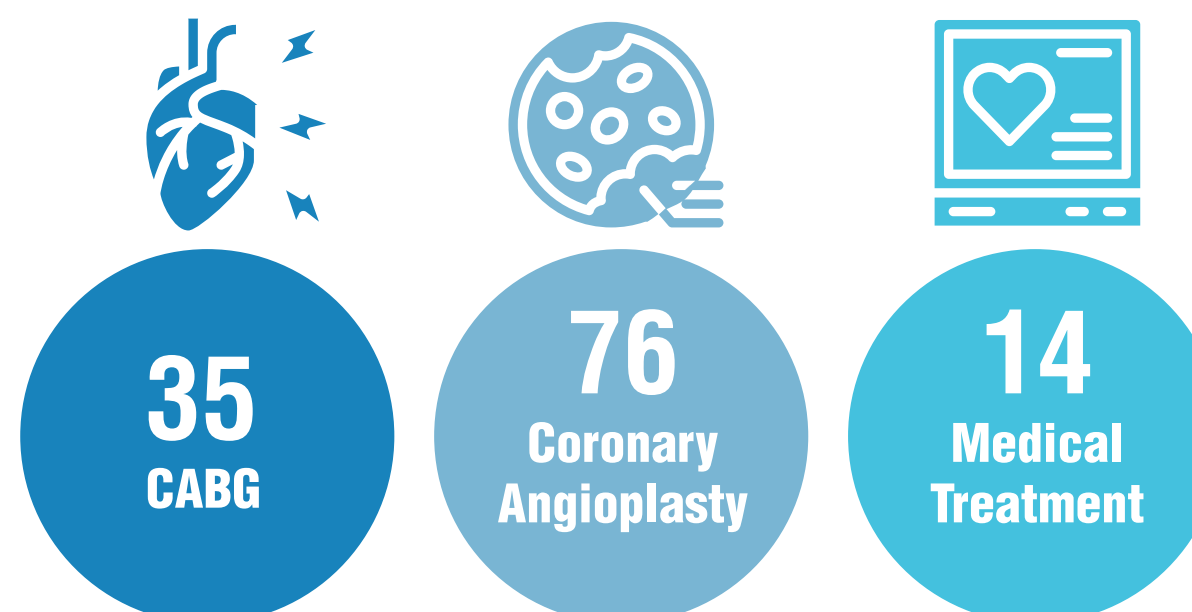
Participants

Total: 125

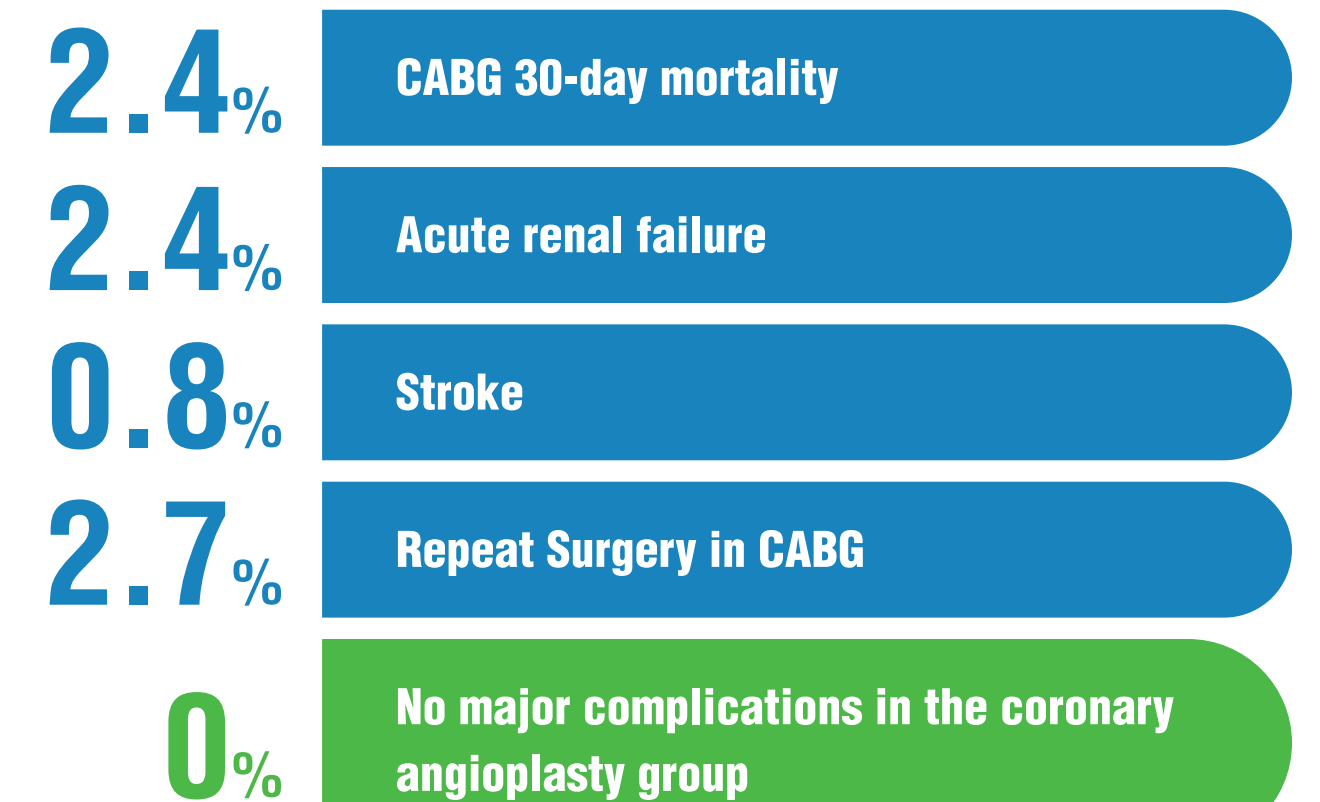
Thai: 67%



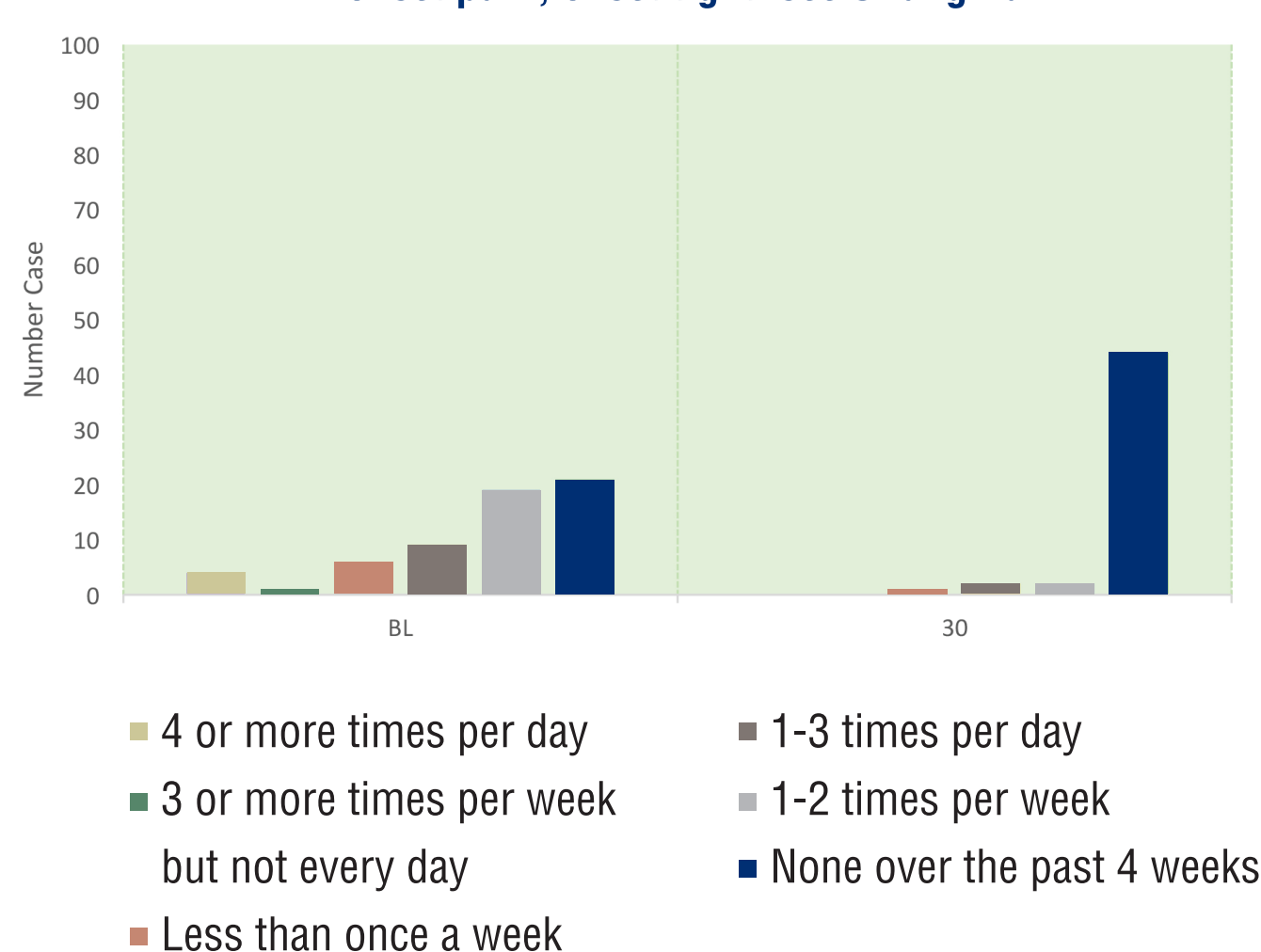
Treatment Types



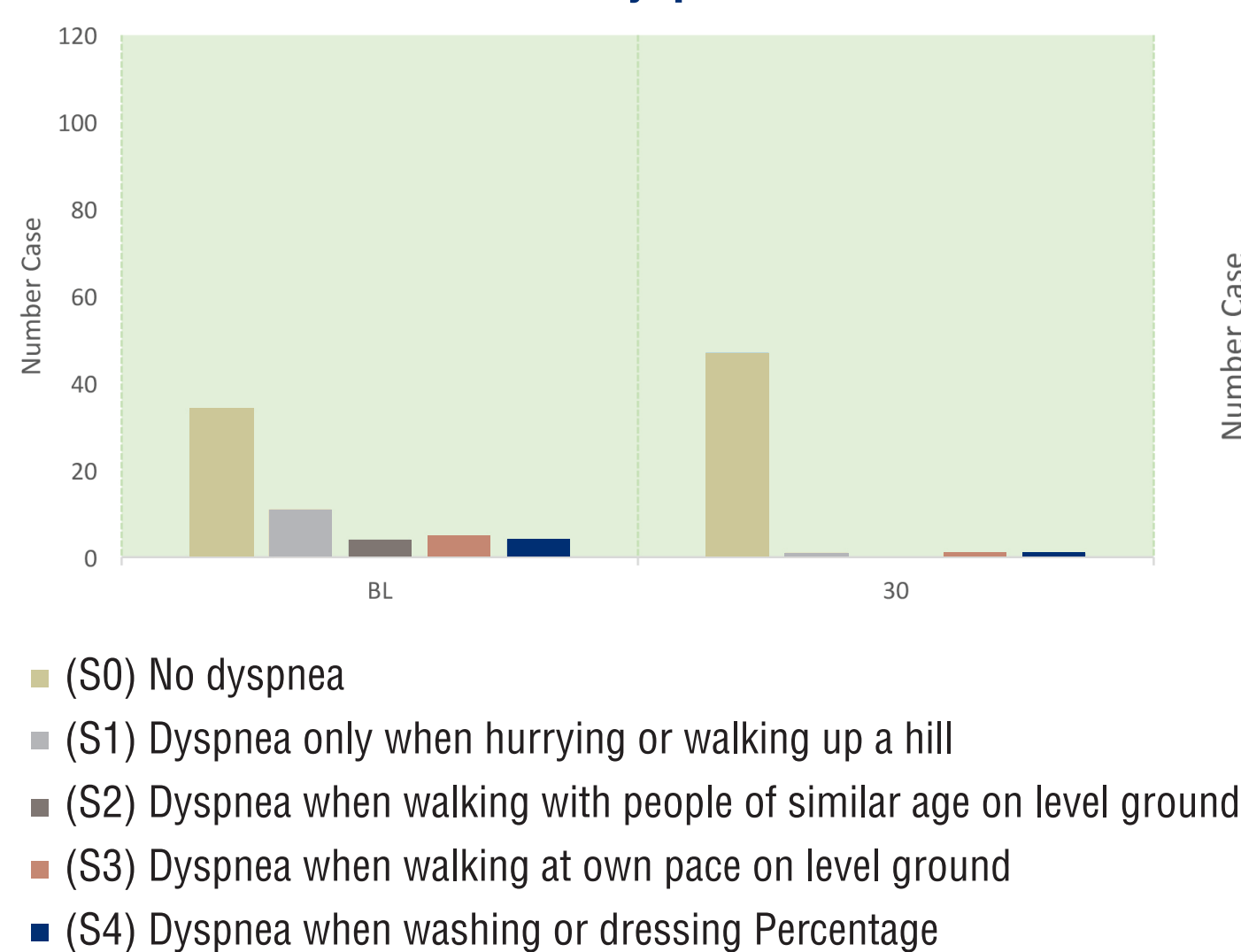
Clinical Outcomes



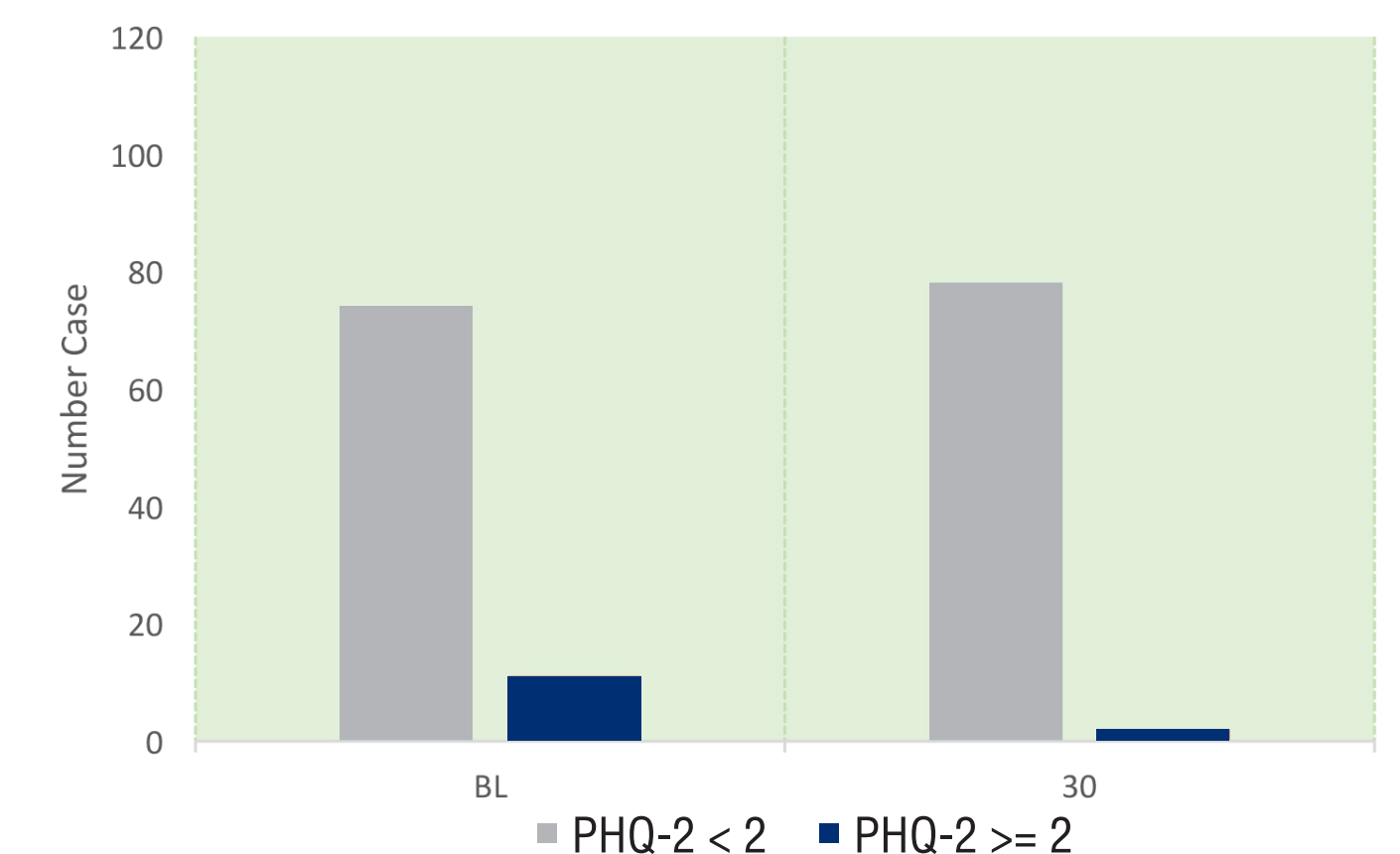
Over the past 4 weeks, on average, how many times have you had chest pain, chest tightness or angina?



ROSE Dyspnea



PHQ-2 Score



Conclusions

- ICHOM provides a shift to a whole person-focused approach from a disease-centric medical paradigm
- ERAS program in heart surgery patients and CCPC 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

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