Project generated by: Contribution 1mission-1million

an Initiative of Boehringer Ingelheim

published in https://www.heartofstroke.com/all-applications

Country: France

Titel of the project: The Atrial Fibrillation Programme

### Project details

## patrick DARY

Award amount: €50,000

Atrial fibrillation is the commonest heart arrhythmia. It is associated to complications: the most serious being the stroke. This fully computerised programme, accessible on USB flash will guide you through a better sensitization, control and will provide helpful advice for a better management of patients.

Proof: The occurrence of a heart arrhythmia raises a good number of questions and worries from the patient on his/her life threatening injuries. The understanding of his/her schedule disorder generally remains a mystery with an obvious problem for the follow up and the access of the patient to treatment and further examination. Objectives: The Atrial Fibrillation Programme should enable the patient to better understand the arrhythmia, contribute to his/her treatment, evaluate his own risk and follow s/her disease by becoming taking part fors/her management. Population: Inclusion of 500 patients followed up for a current poxystic, permanent or persistent fibrillation whatever its duration. Project: Creating a file made up of various modules and available for consultation either in a file given to the patient or on a USB flash which may be consulted on PC and presented as a WEB page. At each consultation or further examinations, the file will be updated and completed by many chapters enabling the patient to better understand s/her disease. 8 Modules on folders or USB flash1- Administrative information module including: identity, a picture, the address, medical history, risk factors, contact details of concerned medical officers. The objective is to customize the file so that the patient has information and consult them regularly 2-Consultation and follow up of the arrhythmia Module: with the disease history, report of hospitalizations, the summary report of consultations, the formalised conclusions in a diagram of care taking3- Module further examinations involving various files for: ECG, HOLTER, echographies, stress tests, scanners, scintiscanners... this helps in avoiding the multiplication of useless further examinations and to ensure a follow up for each category of examination 4- Module treatments: to follow the ageing and the to establish the therapeutic to treatment modifications or posology. The objective is to follow the prescription strategy and to detect possible interactions.5- Module food: to understand feeding habits of the patient by computerising meals on many days therefore explaining high biologic parameters such as glycemia, cholesterol or looking for reasons of INR variations6- Module biology: follow on variations of anticoagulation correlated to treatment modifications7- Module adverse events or intolerance towards the treatment: better understand intolerance problems of therapeutic accidents by a direct signal from the patient8- Module information and sensitization 1-What does arrhythmia mean?2-What are risks of arrhythmia?3-How to undergo the treatment?4-Understand anticoagulation5- Reduce heartbeat6-Understand examinations made7-Respect and interaction with other treatments Conclusion: The reduction of complications of stroke depends on a better acceptance from the patient to his/her treatment and a better understanding of the disease. The Atrial Fibrillation Programme should have a quality objective of management by reducing the risk of the treatment and disease.

# **Audience**

### **Type**

AF Patients

#### Location

France, Europe