

# insiders

by Andrew Pipe, chairman of the Champlain CVD Prevention Network

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## Patient-level interventions, prevention key in chronic disease

CARDIOVASCULAR disease is the leading cause of disability, hospitalization and death in Ontario, costing the province \$5.5 billion each year. Only a comprehensive approach that emphasizes prevention and incorporates a range of health system and patient-level interventions will provide an effective response to the tsunami of cardiovascular and other chronic diseases that is upon us.

I have watched and participated in scores of task

forces, policy conferences and coalitions that have produced an array of recommendations, charters and declarations—all intended to guide us in transforming our health system—but there has been incredibly little sustained action to improve the health of Canadians. “We are a country of pilot projects,” lamented one former health minister.

Some provinces are beginning to take serious action against chronic disease, Alberta and British Columbia being

among the first. This work is also underway in Ontario's Champlain District, an area of 1.2 million residents around the City of Ottawa, where a coalition of health and community partners is working to identify, prevent and manage cardiovascular disease (CVD) and other chronic diseases.

Started in 2004 by the University of Ottawa Heart Institute (UOHI), the Champlain CVD Prevention Network recently launched a five-year CVD prevention and manage-

ment strategy with 14 organizations with specific expertise in chronic disease prevention and management. They have committed to implementing a five-year strategy with primary- and speciality-care providers, regional hospitals, schools, workplaces, the media and community agencies.

As Dr. Robert Cushman, CEO of the Champlain Local Health Integration Network, recently said, “We have two choices: We can continue to pump money into our hospital system, or we can work together to prevent heart disease, stroke and diabetes from happening in the first place.”

We developed six priority

initiatives—each a large-scale, system-level intervention specifically selected to mobilize a particular sector and address a gap in the current system.

### Family physicians

Recognizing the importance of family physicians, the Improved Delivery of Cardiovascular Care Initiative will pair FPs with practice facilitators who will help implement tools and processes to assist FPs in identifying and aggressively managing patients at high risk of developing CVD. We hope over the next five years to get 50% of FPs involved.

Smoking, the leading cause of preventable disease, death and disability in Canada—and still prominent in the Champlain District—is being addressed in all of our 18 hospitals. The Champlain Network of Hospital-Based Smoking Cessation Programs systematically offers treatment to every smoker admitted to hospital. This “Ottawa Model” of hospital-based smoking cessation treated more than 5,000 smokers last year and has the potential to reach 10,000 smokers annually.

The Champlain Get with the Guidelines Initiative will deliver a regionalized approach to the secondary prevention of CVD according to evidence-based, best-practice programs. Co-ordinated by the UOHI, this initiative will ensure a consistent protocol across all Champlain hospitals so every patient, at discharge, receives pharmacotherapy and lifestyle modification support, and is taught self-management—all linked to a patient's primary-care practitioner.

The Champlain Healthy School-aged Children Initiative is examining the rise in childhood obesity and addressing it as a shared responsibility of schools, parents, families and the community at large.

We have done our homework and we have planned carefully. We are now poised to implement a strategy with our partners that we expect will transform morbidity and mortality in our region and serve as a model for other communities in Ontario and Canada.

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