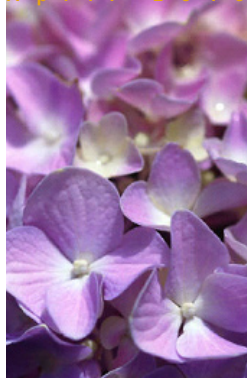


April 2010



Please add newsletters@npdinc.com to your address book to ensure future delivery of NorthPoint Domain newsletters to your inbox (not bulk or junk folders).

NorthPoint Domain Inc.
One Joy Street
Boston, MA
02108-1403 USA

(800) 603-1420

www.northpointdomain.com
memberservices@npdinc.com

Study: Self-Assessments Important In e-Health Interventions

Participants preferred expending more effort to obtain tailored feedback

E-health programs have great potential, as they reach many people who cannot access traditional treatment, but there are ways to increase and improve utilization, according to a study published recently in the *Journal of Medical Internet Research*.

Health communication research and prior study suggest that tailoring messages individually yields the best results in terms of behavior and attitude change. The Internet presents an opportunity to reach large groups of people, but most studies have involved highly structured programs that do not reflect its *ad libitum* (freely at will) use in the real world. The authors of the current study thus sought to investigate further. They tested the effects of an electronic weight

loss program focusing on self-assessments as a way to deliver more personally relevant content to each individual user.

Analysis revealed highest utilization in interactive assessments, while monitoring tools, educational materials, and support group message boards were not accessed by the majority of participants.

The authors tracked use of the Healthy Weight Center, a free access, evidence-based, direct-to-consumer weight loss program including a variety of components such as nutritional and fitness information, monitoring tools, moderated support group message boards, and self-assessments. The first 204 men and women 18 years

and older who signed up online and met the inclusion criteria of body mass index greater than or equal to 25, completion of the online registration process, and endorsement with the program disclosure agreement were included for analysis. Mean age was 42 years and nearly 82 per-

continued on page 2

... Study: Self-Assessments Important In e-Health Interventions
continued from page 1

cent were women. The most common reason cited for wanting to lose weight was for their health.

Utilization of each component of the Healthy Weight Center was defined as accessing that part at least once during the study period of May to September 2008. Analysis revealed highest utilization in interactive assessments, but monitoring tools (meal planner, nutrition lookup, activity log, and weight tracker), educational materials (nutrition, fitness, and behavioral), and support group message boards were not accessed by the majority of participants. The authors said the distinguishing feature of the interactive self-assessments was the promise of personally relevant feedback and they noted that the

users were not deterred by the effort required to complete the assessments. They concluded that “This finding highlights the need for architects of Internet-based programs to explore increasing the use of interactive exercises to tailor the user experience in ways that increase personal relevance.” More research is needed, but tailoring appears a worthwhile endeavor in e-health interventions.

Source: Binks M, van Mierlo T. 2010. Utilization patterns and user characteristics of an ad libitum internet weight loss program. *Journal of Medical Internet Research* 12(1):e9.

Clopidogrel Reduces Mortality in Heart Failure Patients Following AMI

The study authors recommend randomized trials to study the effect of clopidogrel on heart failure patients

The results of a study published in the *Journal of the American College of Cardiology* found that clopidogrel was associated with reduced mortality in patients with heart failure (HF) who do not undergo percutaneous coronary intervention (PCI) after their first acute myocardial infarction (AMI). This association was not apparent in patients without HF, however.

Heart failure patients who have an AMI have a poor prognosis. Guidelines recommend dual antiplatelet therapy including aspirin and clopidogrel for AMI patients; randomized trials have shown that clopidogrel is effective at decreasing the risk of death, reinfarction, and stroke. However, HF patients have made up a small part of overall study populations and the benefit of clopidogrel in AMI patients with HF remained unclear. The authors undertook the current study to determine if

clopidogrel provides additional survival benefit for AMI patients with HF.

The authors identified 31,251 Danish patients hospitalized with first-time AMI between January 1, 2000 and December 31, 2005 who did not undergo PCI

within 30 days of discharge. Patients with HF treated with clopidogrel were matched with patients not treated with clopidogrel (2,525 matched pairs). In addition, the authors identified two groups without HF (3,046 matched pairs). Patients with HF receiving clopidogrel

had a decreased relative mortality risk of 14 percent as compared to patients with HF who did not receive clopidogrel. During a mean follow-up period of 1.5 years in the HF cohort, death occurred in 709 patients treated with clopidogrel (28.1 percent) and 812 patients not treated with it (32.2 percent). The authors observed no

The data suggest that increased awareness of the benefit of clopidogrel in such high-risk patients can have considerable clinical impact.

continued on page 4

... Clopidogrel Reduces Mortality in Heart Failure Patients ...
continued from page 3

such difference among patients without HF. After a mean follow-up period of 2.05 years in the non-HF cohort, death occurred in 285 patients treated with clopidogrel (9.4 percent) and 294 patients not treated with clopidogrel (9.7 percent).

The authors say the results may be in part attributable to reduction of the increased risk of atherothrombotic events. Heart failure patients have low initiation of clopidogrel, and “the data suggest that increased awareness of the benefit of clopidogrel in such high-risk patients can have considerable clinical impact. A randomized study of the effect of

clopidogrel in patients with HF therefore is crucial to improve treatment of this growing patient population,” they conclude.

Source: Bonde L, Sorensen R, Fosbol EL, et al. 2010. Increased mortality associated with low use of clopidogrel in patients with heart failure and acute myocardial infarction not undergoing percutaneous coronary intervention. *Journal of the American College of Cardiology* 55(13):1300-1307.

Hot Topic Highlights

Cardiology Domain recently posted the following Hot Topics to your website:

Adding Heartburn Medications to Plavix Reduces Bleeding Ulcer Risk

Taking clopidogrel (Plavix) with acid-reducing medications called proton pump inhibitors (PPIs), such as pantoprazole (Protonix) and omeprazole (Prilosec, Losec), reduces the risk of gastrointestinal bleeding, according to the results of a study published in the *Annals of Internal Medicine*. In addition, combining the medications does not appear to increase the risk of cardiovascular events, such as heart attack and stroke, which contradicts earlier research that suggested mixing the drugs might increase this risk. The study of 20,596 participants found that patients who took both clopidogrel and a PPI had 50 percent fewer hospitalizations for bleeding than those who took clopidogrel alone.

Source:

Ray WA, Murray KT, Griffin MR, et al. 2010. Outcomes with concurrent use of clopidogrel and proton-pump inhibitors: a cohort study. *Annals of Internal Medicine* 152:337-345.

Study Finds Diet Helps Reverse Artery Hardening

The results of a study published in *Circulation* found that people following one of three types of diets were able to reverse the artery-hardening process that leads to heart attack and stroke. In the 2-year study, 140 overweight men and women followed low-calorie diets that were either low-fat, low-carbohydrate, or Mediterranean. Dieters experienced an average 4.9 percent decrease in carotid wall volume and a 1.1 percent decrease in carotid wall thickness. Patients who had the greatest decrease in carotid wall volume saw their blood pressure go down, as compared to patients whose carotid wall volume increased.

Source:

Shai I, Spence JD, Schwarzfuchs D, et al. 2010. Dietary intervention to reverse carotid atherosclerosis. *Circulation* 121:1200-1208.