

Cardiovascular Disease

Biopsychosocial Assessment and Treatment

in Integrated Primary Care Settings

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Cardiovascular Disease

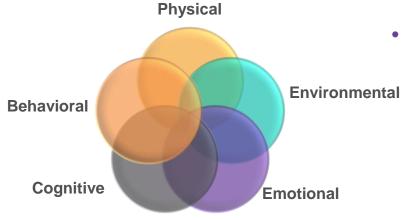
- CVD broadly refers to diseases of the heart and blood vessels
- A person dies every 40 seconds from CVD
- Over one-third of the U.S. population has some form of CVD
- Contributes to \$320.1 billion in direct and indirect costs

Biopsychosocial factors and treatments

related to cardiovascular disease

Behaviors

- Smoking
- Weight
- Diet
- Physical activity
- Alcohol
- Medication Adherence



Physical

- Increased age, Race, Genetics
- Atherosclerosis
- Hypertension
- Hypercholesterolemia
- Diabetes

Cognitive/Emotions/Environment

- Depression
- Social Support

Impact of Behavioral Changes

Mortality reduction potential of lifestyle and dietary changes

Recommendation	CAD patients	General population
Smoking Cessation	35%	50%
Physical activity	25%	20%-30%
Moderate alcohol	20%	15%
Combined dietary changes	45%	15%-40%

lestra, J.A., et al. (2005).

Using the 5 A's to Target Cardiovascular Disease in Integrated Primary Care Settings

Assess

- Knowledge
- Impact
- Weight
- Eating habits
- Physical Activity
- Alcohol

- Tobacco
- Medication Use
- Medical interventions
- Surgeries
- Emotional Response
 - Depressive symptoms
- Social Support

Advise/Agree

Importance of changing risk factors/behaviors

Educate about possible changes

Collaborate on what patient wants to change

Assist

- Tobacco cessation
- Weight loss
- Diet/Eating plan
 - Mediterranean Diet
- Alcohol
 - Limited use
 - Men <2 drink/day; Women <1 drinks/day
- Medication Adherence

Assist

Emotional factors

- Depression
- Anxiety
- Reduction may not reduce risk
- Promote Social Support

Arrange

- Follow-up
 - Frequency dependent on target behaviors
- Care manager involvement
- Consider vertical integration methods
 - Classes targeting health behaviors
 - Shared Medical Appointments
- Referrals
 - Dietician
 - Wellness Center/physical trainer

