



EDUCATIONAL RESOURCES

# MANAGEMENT OF HEART FAILURE AFTER HOSPICE ELECTION

Ellen Fulp, PharmD, MSPC, BCGP

Director of Pharmacy Education, AvaCare, Inc.

November 12, 2020



# OBJECTIVES

---

- Review congestive heart failure disease progression
- Identify common issues facing heart failure patients
- Discuss non-pharmacologic and pharmacologic options for managing end-stage heart failure
- Consider medication appropriateness and regulatory issues associated with medication use after hospice election

# HEART DISEASE: EPIDEMIOLOGY

- Someone dies of cardiovascular disease (CVD) every 37 seconds in the United States
- Each day, 2,353 Americans die from CVD
- Someone in the United States has a stroke every 40 seconds
- Heart failure prevalence is increasing (symptomatic)
  - 2010: 5.8 million Americans
  - 2030: 8 million Americans (projected)



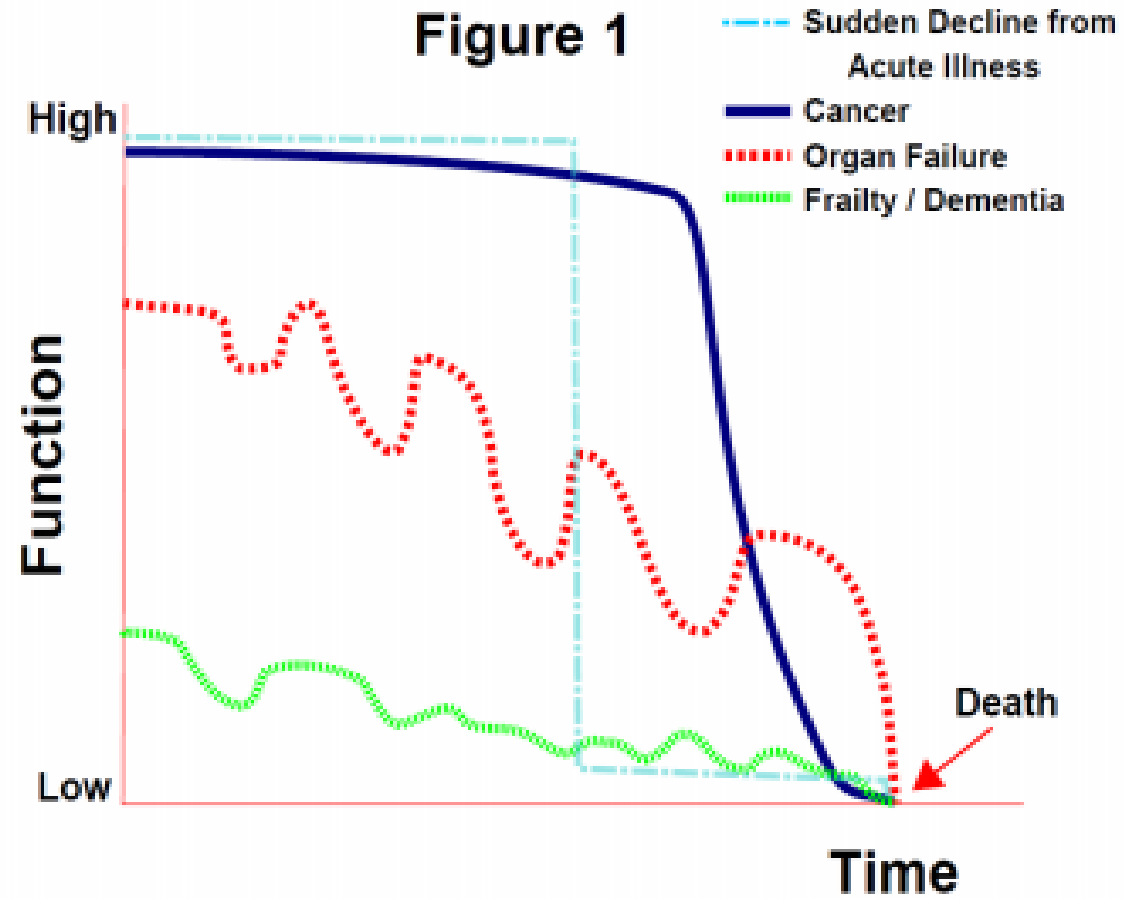
American Heart Association

# HEART FAILURE

ACC/AHA Heart Failure Stage		NYHA Functional Class	
A	No objective evidence of cardiovascular disease. No symptoms and no limitation in ordinary physical activity.	I	No limitation of physical activity. Ordinary physical activity does not cause undue fatigue, palpitation, dyspnea (shortness of breath).
B	Objective evidence of minimal cardiovascular disease. Mild symptoms and slight limitation during ordinary activity. Comfortable at rest	II	Slight limitation of physical activity. Comfortable at rest. Ordinary physical activity results in fatigue, palpitation, dyspnea (shortness of breath).
C	Objective evidence of moderately severe cardiovascular disease. Marked limitation in activity due to symptoms, even during less-than-ordinary activity. Comfortable only at rest.	III	Marked limitation of physical activity. Comfortable at rest. Less than ordinary activity causes fatigue, palpitation, or dyspnea.
D	Objective evidence of severe cardiovascular disease. Severe limitations. Experiences symptoms even while at rest.	IV	Unable to carry on any physical activity without discomfort. Symptoms of heart failure at rest. If any physical activity is undertaken, discomfort increases.

[www.heart.org](http://www.heart.org)

# HEART DISEASE



PCNOW, Fast Facts #326

# HOSPICE PATIENT POPULATION

- Cancer is still the most frequently reported principal diagnosis
- Diagnoses on the rise:
  - Stroke
  - Respiratory
  - Circulatory/Heart
  - "Other"
- Most costly diagnoses by percentage of Medicare spending
  - Dementia
  - Circulatory/Heart
  - Cancer
  - Other
  - Respiratory

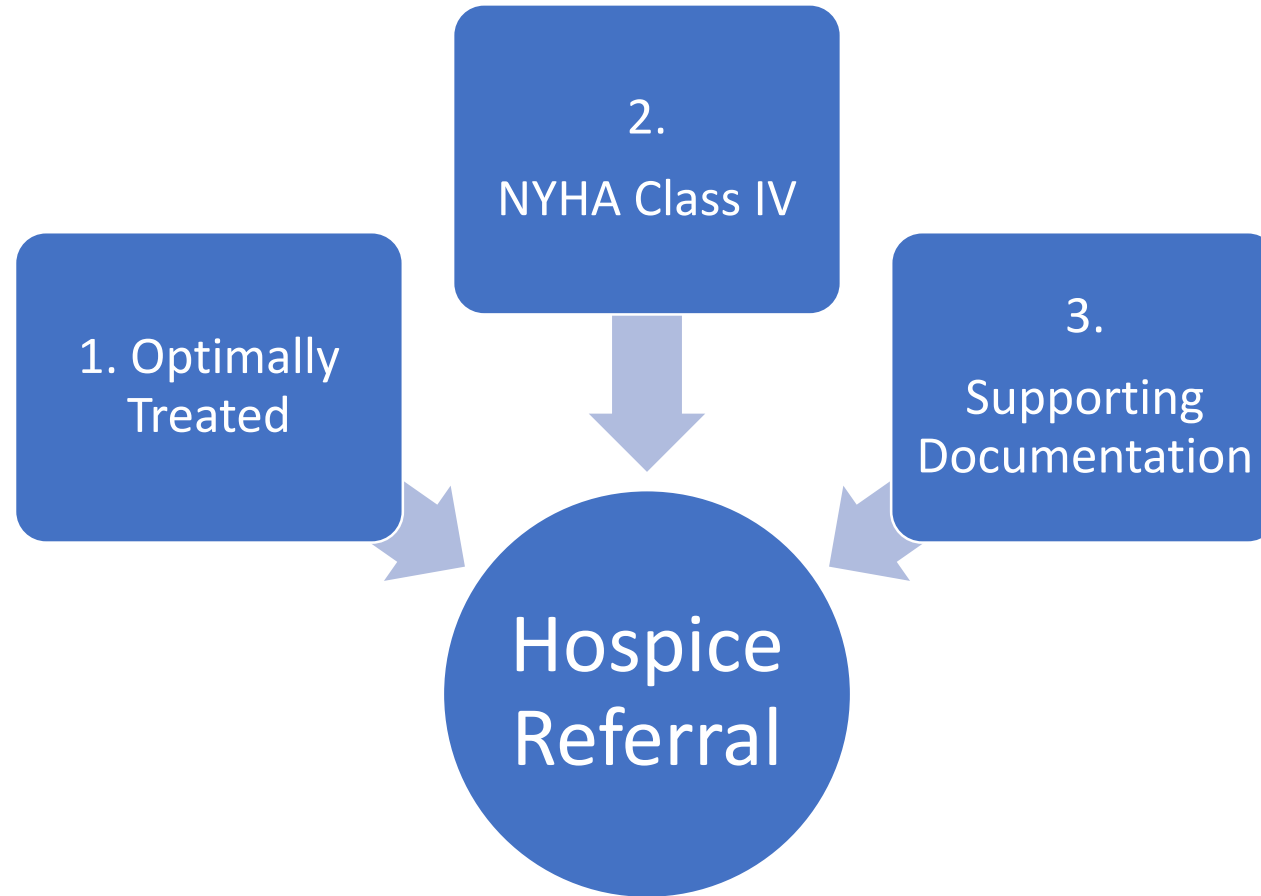


# COMMON ISSUES IN ADVANCED DISEASE

- Palliative Care Initiation
- Advance care planning
- Depression and anxiety
- Goals of care
- Caregiver burden
- System barriers



# HOSPICE POPULATION





# MEDICATIONS IN ADVANCED DISEASE

## Angiotensin-Converting Enzyme (ACE) Inhibitors

- Captopril
- Enalapril
- Fosinopril
- Lisinopril
- Quinapril
- Ramipril
- Trandolapril

## Angiotensin II Receptor Blockers (ARB)

- Candesartan
- Losartan
- Valsartan

# MEDICATIONS IN ADVANCED DISEASE

## Beta-Adrenergic Blocking Agents (Beta-Blockers)

- Bisoprolol
- Metoprolol (succinate)
- Carvedilol
- Carvedilol CR

## Aldosterone Antagonists

- Spironolactone
- Eplerenone

## Hydralazine and Isosorbide

- Hydralazine and isosorbide dinitrate

# MEDICATIONS IN ADVANCED DISEASE

## Loop Diuretics

- Furosemide
- Bumetanide
- Torsemide

## Thiazide Diuretics

- Chlorothiazide
- Hydrochlorothiazide
- Metolazone
- Indapamide

## Potassium-Sparing Diuretics

- Amiloride
- Triamterene

# MEDICATIONS IN ADVANCED DISEASE

## Anticoagulants and Antiplatelets\*

- Aspirin
- Clopidogrel
- Warfarin
- DOACs

## Digoxin\*

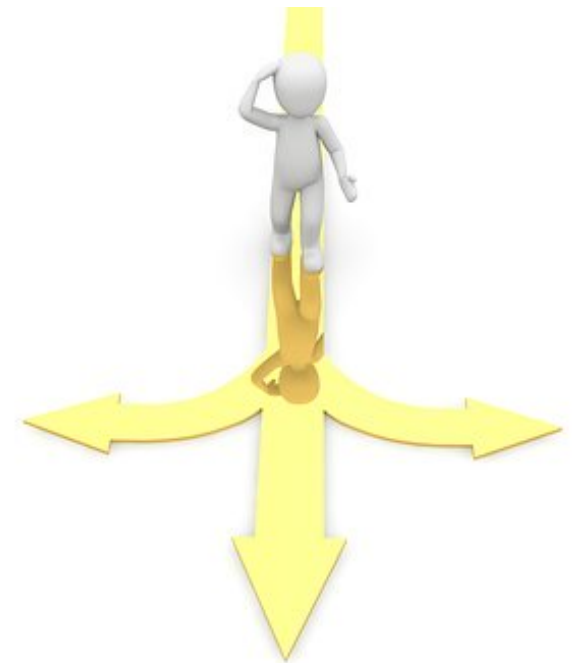
- Digoxin

## Angiotensin-Receptor Neprilysin Inhibitors (ARNIs)

- Sacubitril/valsartan

# HOSPICE POPULATION: SUPPORTING DOCUMENTATION

- Supporting documentation
  - EF < 20%
  - Symptomatic arrhythmias
  - Stroke
  - Cardiac related syncope
  - HIV disease
- Relatedness



# RELATEDNESS



# HOSPICE POPULATION: NYHA CLASS IV

- New York Heart Association (NYHA) Class IV
  - Unable to complete physical activity without discomfort
  - Symptoms at rest
    - Examples: cough, shortness of breath at rest, discomfort and swelling in lower body, sudden weight gain, worsening dizziness/confusion, loss of appetite, trouble sleeping/lying flat
  - Discomfort increases with any activity



# SYMPTOMS

## Pain

- Edema, comorbidities, nociceptive pain
- Agents of choice

## Dyspnea

- Edema
- Optimize HF medications
- Agents of choice

## Depression

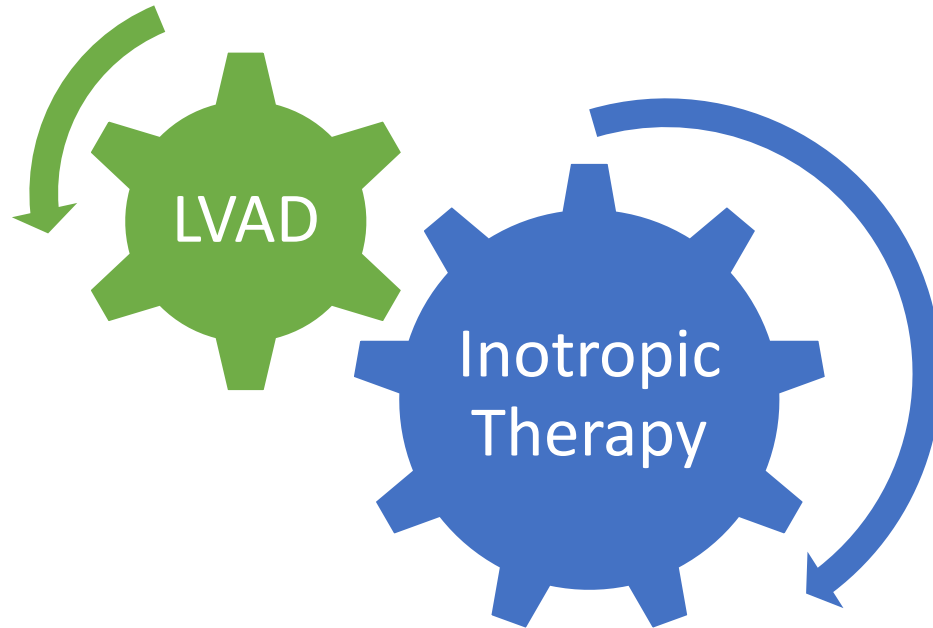
- Non-pharmacologic treatments
- Agents of choice



# REFRACTORY SYMPTOMS: ADVANCED INTERVENTIONS

- Inotropic Therapy

- Goals
- Central venous access
- Adverse effects
- Barriers
- Agents
  - Dobutamine
  - Milrinone



# MEDICATIONS TO RECONSIDER AT HOSPICE ELECTION

Anticoagulants

HMG-CoA Reductase  
Inhibitors

Antiplatelets

Diuretics

Oral  
Bisphosphonates

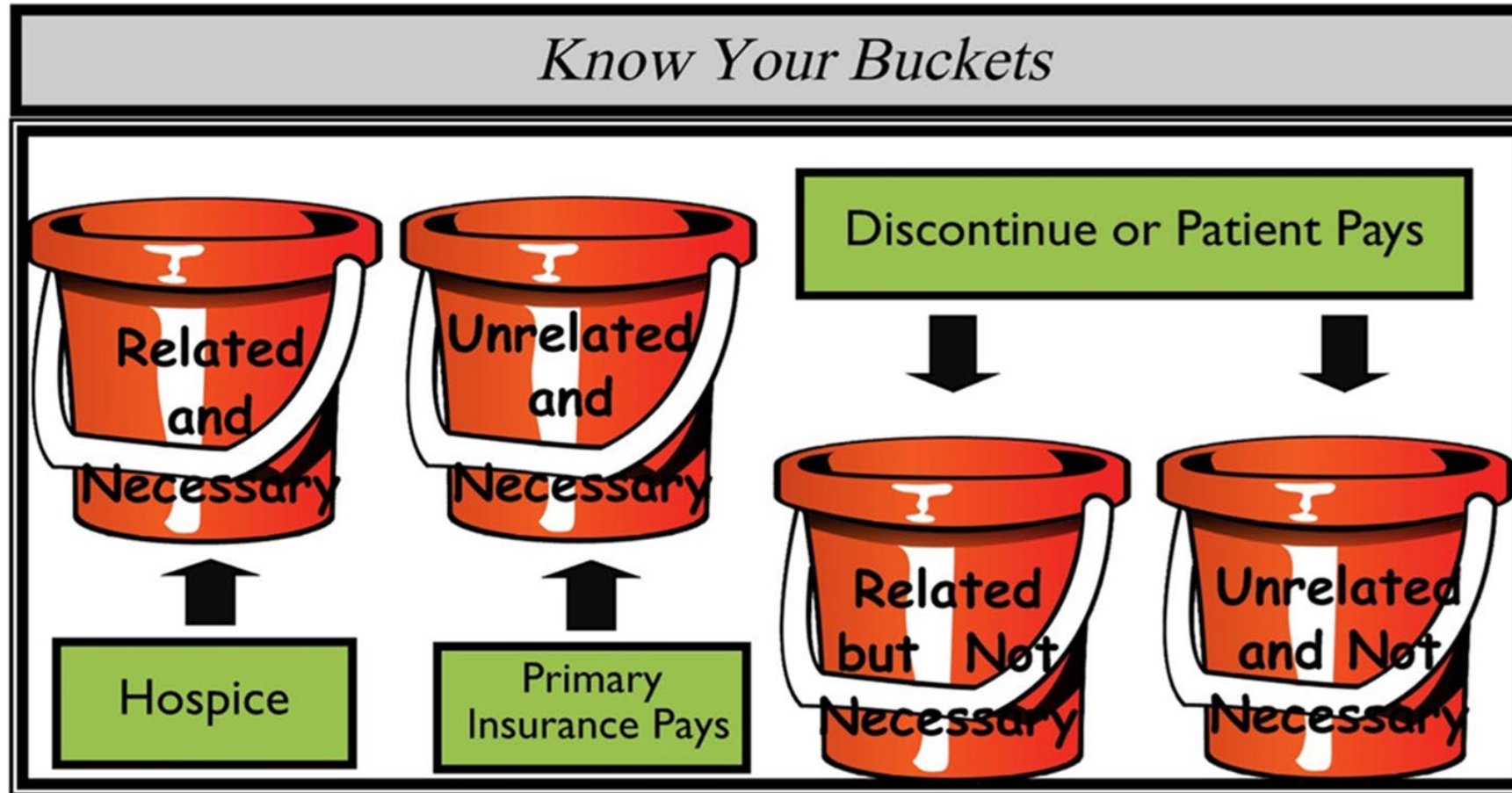
Acetylcholinesterase  
Inhibitors

Sulfonylureas

Anti-hypertensives

Psychogenic  
Medications

# RELATEDNESS



# REGULATORY CONCERNS

- Medicare Part D Spending
  - Concern: "Hospices are responsible for covering drugs and biologicals related to the palliation and management of the terminal illness and related conditions."
- Medicare Part D: treatments unrelated to the terminal prognosis
  - Increase in maintenance medications filled
  - High Blood Pressure, Heart Disease, Asthma & Diabetes
- Top Ten CMS Survey Deficiencies
  - §418.54(c)(6) – Drug profile





EDUCATIONAL RESOURCES

# QUESTIONS?

Ellen Fulp, PharmD, MSPC, BCGP

AvaCare, Inc.

[ellenf@avacare.biz](mailto:ellenf@avacare.biz)

1-866-794-1044



EDUCATIONAL RESOURCES

# THANK YOU!



# REFERENCES

- NHPCO. NHPCO's Facts & Figures on Hospice Care in America. August 2020. <https://www.nhpco.org/wp-content/uploads/NHPCO-Facts-Figures-2020-edition.pdf>. Accessed August 2020.
- Barker, PC, Scherer, JS. Fast facts and concepts #326: Illness trajectories: Description and clinical use. Palliative Care Network of Wisconsin. 2016. [www.mypcnow.org](http://www.mypcnow.org). Accessed October 2020.
- Reisfield, GM, Wilson, GR. Fast facts and concepts #144: Palliative care issues in heart failure. Palliative Care Network of Wisconsin. 2015. [www.mypcnow.org](http://www.mypcnow.org). Accessed October 2020.
- American Heart Association. Medications used to treat heart failure. [www.heart.org](http://www.heart.org). Accessed October 2020.
- American Heart Association. Warning signs of heart failure. [www.heart.org](http://www.heart.org). Accessed October 2020.
- Allen, R. 10 drugs to reconsider when a patient enrolls in hospice. NHPCO Newslines. 2014.
- Allen, L. Palliative care for patients with advanced heart failure: Indications and systems for care. In: Hunt, SA, Morrison, RS, eds. UpToDate, Waltham, Mass: UpToDate; 2020. [www.uptodate.com](http://www.uptodate.com). Accessed October 9, 2020.
- Panke, J, Tosca, R. Upstream palliative care in advanced heart failure. AAHPM Challenges on the frontlines: Effective approaches to complex cases. 2016 lecture.