Nursing-2013
OMICS Group Conferences
Accelerating Scientific Discovery
International Conference on
Nursing & Emergency Medicine
December 2-4, 2013 Las Vegas, USA

Heart failure, guidelines and women: Applying the evidence in 2014

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Abstract

Heart failure affects over 23 million people worldwide, with 670,000 new cases diagnosed yearly in the USA alone. Heart failure accounts for over 6.5 million US hospital days per year, 1 million of which are readmissions. Readmissions cost over $17 billion dollars yearly and the burden in morbidity, diminished productivity, disability, and quality of life continues to rise. Pacific Islanders, African-Americans, and Hispanics are among those most at risk, with women affected more often than men. Each year, more women than men die from cardiovascular disease and from all cancers combined. However, treatment guidelines for women and heart disease were not published until 2004. Additionally, the lack of adherence to quality indicators and heart failure treatment guidelines by clinicians has been identified as a major contributor to heart failure readmission rates. As clinicians, it is critical to educate both ourselves and our patients regarding recognition and management of cardiovascular risk for women, heart failure in particular. Issues regarding treatment delays, symptom presentation, and treatment responses specific to women are presented using a case study approach. The latest ACC/AHA guidelines are reviewed and recommendations offered.

Biography

Leilani Siaki received her PhD in 2009 from University of Arizona. She is currently the Deputy Chief of the Center for Nursing Science and Clinical Inquiry at Madigan Army Medical Center, Tacoma WA. Her research interests include culturally congruent approaches to primary prevention of metabolic syndrome, CVD, diabetes type 2, and healthy weight management in vulnerable populations with emphasis on Pacific Islanders and military beneficiaries. She is a cardiology nurse practitioner, a peer reviewer for four professional journals, and is on the associate editor board for the Journal of Transcultural Nursing.

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