

Facts:

- Cardiovascular disease (CVD) is the leading cause of death and disease burden globally.
- Approximately half of all CVD events occur in those who have had a prior hospital episode for coronary heart disease (CHD) and 20-40% of these patients are readmitted with a subsequent coronary event within 12 months.
- About 50% of people who have survived a heart attack or stroke take optimal preventive treatment long term.

Partners:

All India Institute of Medical Sciences Westmead Hospital University of Sydney

<u>Supporters:</u>

National Health and Medical Research Council of Australia (NHMRC)

Contact:

To find out more about TEXTMEDS study and its principal investigators (Assoc Prof. Clara Chow) or The George Institute for Global Health, please contact:

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Background:

• The largest number of cardiovascular events occur in the first year after a heart attack or stroke. Improving adherence to effective prevention medications in this period is key. Getting patients to take these treatments continues to be a major barrier to improving clinical outcomes. We need innovative and cost-effective strategies that can reach large numbers of people.

Aims:

• TEXTMEDS will evaluate a highly innovative strategy to improve cardiovascular disease secondary prevention using cheap and widely available mobile phone technology.

Methods:

- TEXTMEDS is a randomised controlled trial of 1,400 CVD patients from 15+ sites with acute coronary syndrome. It will examine the effect of a semi-personalised secondary prevention support program sent via mobile phone text message on the proportion taking medication.
- The study has finished recruiting and is in follow-up.

Impact:

- TEXTMEDS will investigate whether mobile phone text message and access to expert advice over the phone to patients who have a high risk of cardiovascular events will improve their risk factors after 12 months.
- TEXTMEDS is expected to show that a simple and affordable method of education and support can lead to better treatment and lower risk of future heart attacks or stroke in people with existing vascular disease.

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