



# Engaging Patients and Caregivers in CHF Self-management: The SUCCEED Program

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# Background

- Self-management improves CHF-related mortality and morbidity
- Existing interventions are patient focused
  - Increase contact with medical personnel
- Self-management remains suboptimal
  - Patients experience barriers e.g., depression, disability
- Engaging informal caregivers has the potential of overcoming patient barriers of self-management

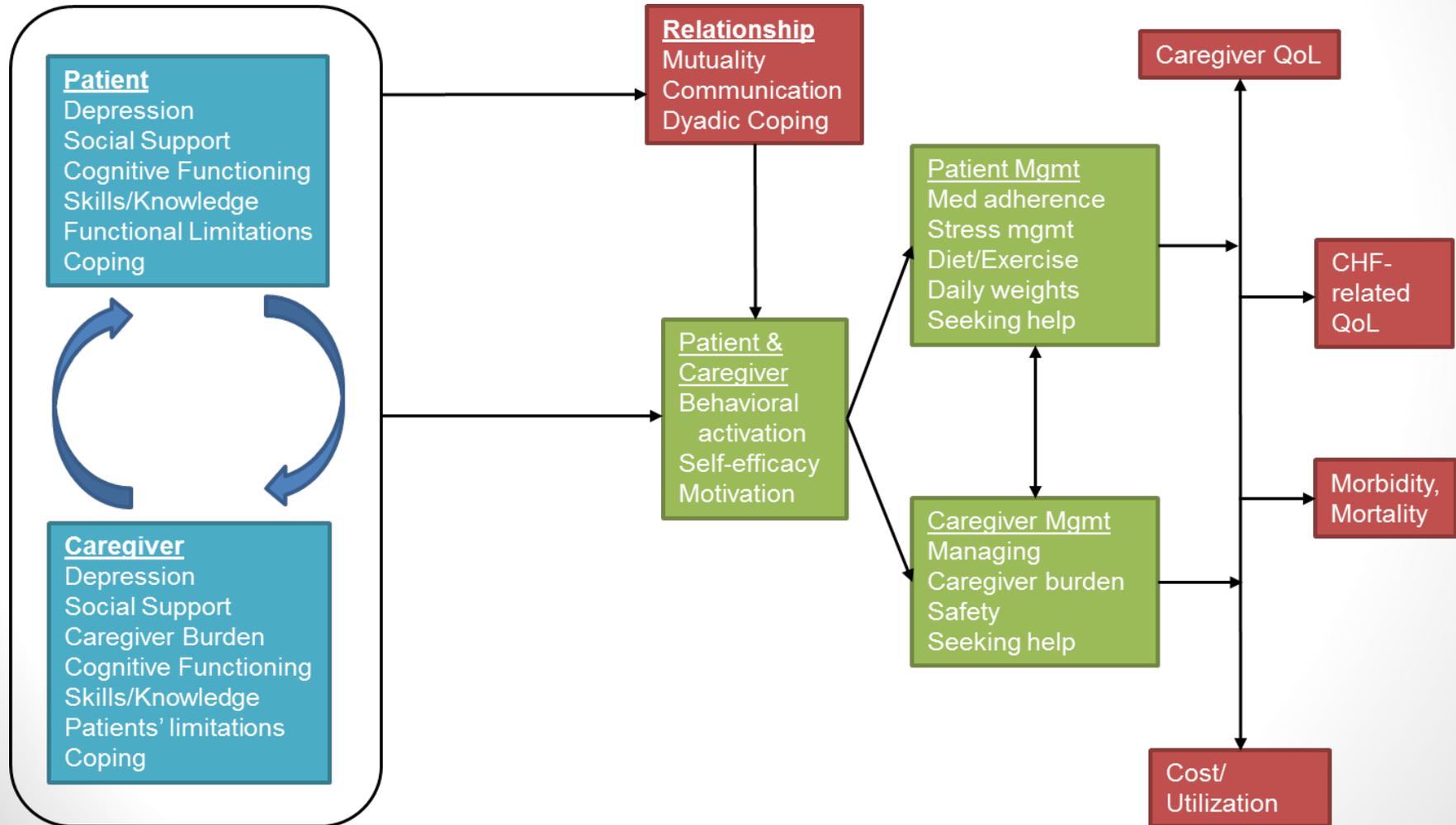
# Background

- Who are caregivers?
  - ~50M Americans are caregivers
  - \$350 billion worth of unpaid services annually
  - 2/3 women; ~40% significant others
- CHF patients with caregivers have better prognosis
  - Role of caregivers emphasized by CHF QUERI Strategic Plan (Goal 3)
- Can optimize self-management because of:
  - Existing relationships
  - Cohabitation
  - Shared activities e.g., meals

# Background

- Like patients, caregivers experience barriers
  - Caregiver burden is common
  - Juggling multiple priorities
  - Patient disability, mood, social isolation
- Reciprocity within the patient –caregiver dyad matters
  - In non-CHF, positive interactions lead to better outcomes; negative interactions detrimental
  - In CHF, our pilot study of 23 CHF couples found significant positive correlations between patient depression and spousal depression ( $r=.53$ ) and caregiver burden ( $r=.63$ )

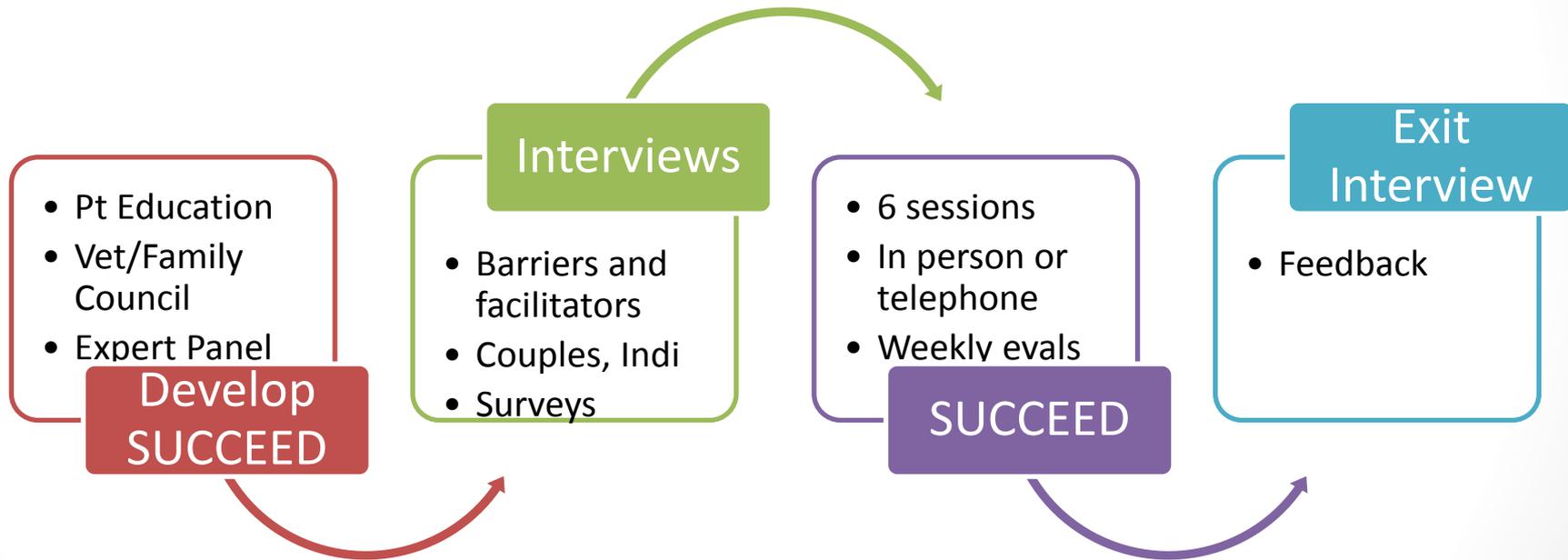
# Conceptual Model



# SUCCEED: Self-management Using Couples' Care EnhancEment in Disease

- SUCCEED is a couples' based self-management intervention that addresses:
  - Patient skills: self-management
  - Caregiver skills: caregiver burden, skills in managing CHF
  - Relationship skills: quality, communication, collaboration

# Methods



# Outline of Sessions

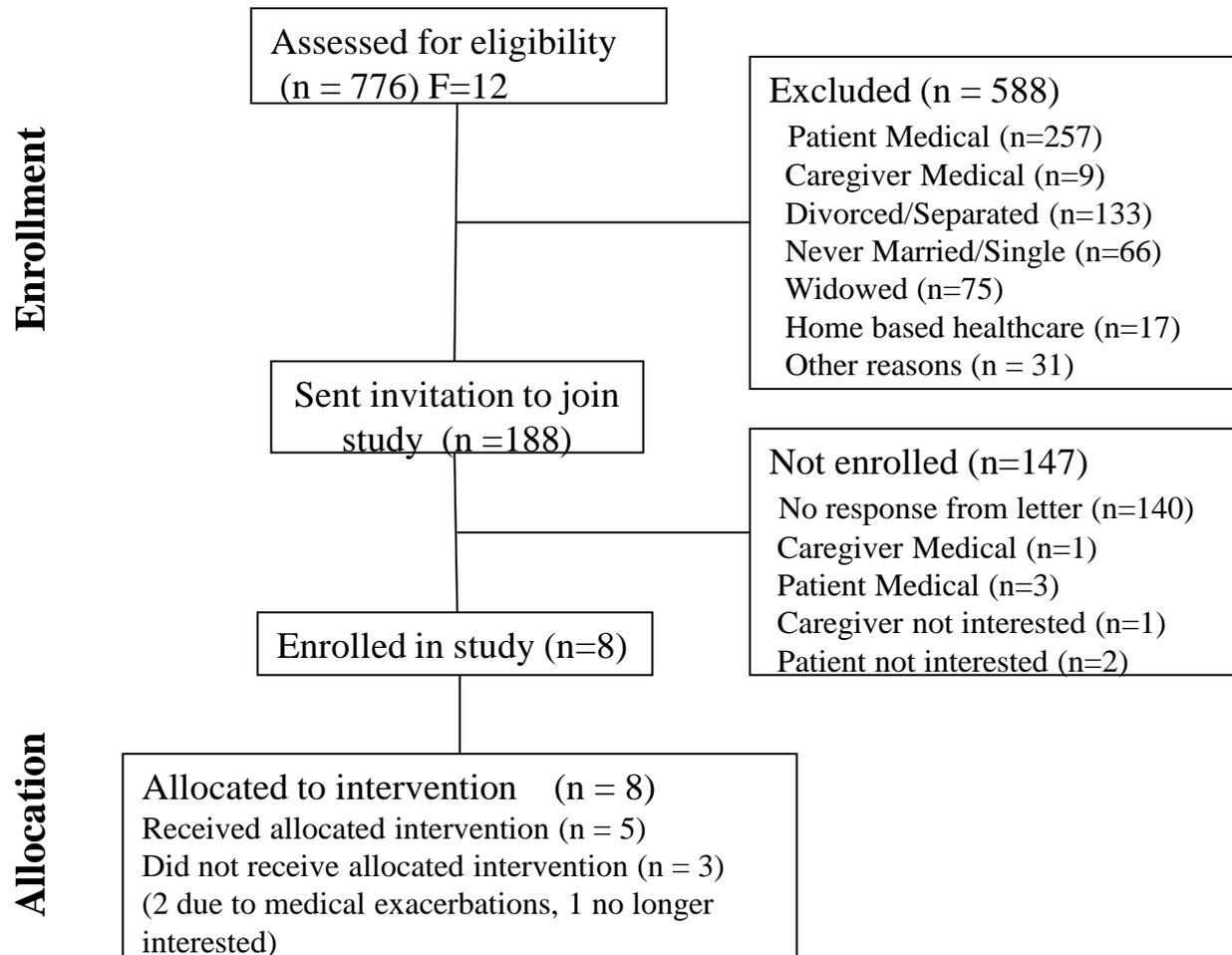
- Session 1: Skills to Manage CHF and Making Action Plans
- Session 2 & 3: Skills to Manage Negative Emotions
- Session 4 & 5: Skills to Manage Interpersonal Relationships and Relationship Stress
- Session 6: Building a Fulfilling Life and Maintaining Behavior Change

# Methods

- Eligibility criteria
  - $\geq 1$  CHF contact in previous year based on chart review
  - Have a caregiver who is a cohabitating significant other
  - Cognitively able to participate
  - Not actively on hemodialysis or receiving cancer treatment
- Analyses
  - Descriptive; Deductive approach to qualitative analyses
  - Barriers and Facilitators to self-management
  - Feedback on SUCCEED
  - Focus on CHF vs. other chronic conditions

# Very Preliminary Results

# Recruitment



# Results

- CHF patient registry obtained from CHF QUERI
  - 725 screened
  - 159 letters sent
- Enrolled 8 couples:
  - Patients are men
  - Caregivers are women
  - 1 withdrew citing deteriorating patient health
- 7/8 opted for telephone-based intervention

## Patient Demographics

Age, m(sd)	73.7(9.3)
Race	
White	5
African American	1
Native American	1
Employment status	
Full time	1
Part Time	1
Retired	4
Not Employed	1
Education	
HS	2
Some college	4
College degree	0
Graduate school	1
Years since diagnosis (M)	4.3
# of conditions (M)	8.5

## Spousal Caregiver Demographics

Age, m(sd)	71.0 (7.8)
Race	
White	6
African American	1
Employment status	
Full time	1
Part Time	1
Retired	3
Not Employed	1
Homemaker	1
Education	
Some HS	1
HS	3
Some college	2
College degree	1
Graduate school	
# conditions (self report), M	3

# Results

- Stress:
  - Patient: “When I get stressed I just kind of zone out, I guess. Yeah, I get kind of lax in everything when I get stressed out.”
  - Caregiver: “[Stress] probably makes me less sympathetic to him and his problems. If I feel like he has pushed at me and pushed at me and pushed at me and I finally say enough and I strike back, I really just kind of want to walk away. I don’t want to deal, you’ve got your problems, you deal with your problems....So there’s a lot of having to suck it in.”

# Results

- Relationship, collaboration:
  - Patient: “Well, I think whoever you're going to try to help, I was going to say, they need the cooperation of both parties to be the most effective.”
  - Caregiver: “We’ve always worked together, always, and always helped each other in everything. So just talking it through and being there for each other I think is what helps.”

# Results

- Caregiver Role:
  - Caregiver: “I try to control his salt intake and remind him if he asks and if he has taken his pills because obviously he kind of forgets.”
- Relationship:
  - Caregiver: “Every time he opens his eyes in the morning, and he gets up and says, “I love you,” that’s a challenge; and that’s the silver lining.”

# Results

- Other things we are learning:
  - CHF is often not the most salient health concern
  - Most couples cannot recap all the CHF recommendations
  - Most couples are not newly diagnosed

# Next Steps

- Descriptive analyses of surveys and baseline characteristics
- Ongoing qualitative analyses
- June IIR Resubmission
- Rec'd LIP funding to develop a web-based version based on feedback for pilot testing

# Summary

- Actively engaging caregivers in self-management may help improve patient outcomes
- Programs that do so should focus on caregiver needs and the relationship between patient-caregiver
- Results of pilot study has implications for improving self-management among CHF patients who have a spouse/significant other

# Acknowledgements

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# Associations between patient and caregiver well-being n=23 couples (Trivedi et al. 2012)

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	
<b>Patient</b>	1. CES-D	1														
	2. IADL		1													
	3. Health Complaints: Gen	.50*		1												
	4. Health Complaints: Spec	.63**		.70*†	1											
	5. Perceived Social Support					1										
	6. Dyadic Adjustment Scale					.74*†	1									
	7. Self Care of HF: Conf.							1								
	8. Self Care of HF: Maint.								1							
	9. Self Care of HF: Mgmt.									1						
	10. Morisky										1					
<b>Spouse</b>	11. CES-D	.53*														
	12. Social Support															
	13. Dyadic Adjustment Scale															1
	14. Caregiver Burden	.64**			.49*	-.72*†	-.73*†				.48*				1	
	15. IADL		.91*†												-.50*	1

PT Depression \* SP Depression = .53

PT Confidence \* SP Depression = -.48

PT Depression \* SP Burden = .64

PT Relationship Satisfaction \* SP Burden = -.73