**CVD prevention guidelines: A new interactive online tool to help GPs assess and communicate CVD risk to patients**

Author: **Carissa Bonner** Co-authors: Lyndal Trevena, Jenny Doust, Kirsten McCaffery

**Abstract Submission - 15 or 30 minute oral session**

**Background:** Doctor-patient communication is a significant barrier to using CVD risk assessment tools. GPs report difficulties communicating absolute risk to patients, particularly: 1) low risk patients who may progress to high risk unless they make lifestyle changes (e.g. smokers); and 2) patients treated for blood pressure or cholesterol who think they are high risk, but may actually be low risk when non-modifiable risk factors (age, gender) are taken into account through absolute risk calculation.

**Aims:** This presentation provides an update on a new online format for CVD prevention guidelines that links them with personalised decision aids to help GPs communicate guidelines to patients. A working prototype was presented at GP17, and was revised based on subsequent feedback. It aims to increase:

1. GP use of absolute risk assessment;

2. guidelines-based prescribing of preventive medication;

3. patient knowledge of risk and management options.

**Method:** GP interviews and piloting of a new version of the Australian CVD risk calculator.

**Results:** Early interviews and systematic reviews informed the prototype development presented at GP17. Subsequent user testing with GPs indicated general support (average rating 8.5/10), particularly for the interactive decision aid that shows a patient’s CVD risk and the effect of medication vs lifestyle interventions on risk reduction. The printable version follows international standards for patient decision aids for 9 intervention options, but was considered too long. GPs also wanted easier access, a reset function, and more detailed lifestyle assessment including risky drinking and BMI calculators. These features were incorporated in the final version, including a shorter 2 page summary of the patient’s risk result and a single selected intervention. Results from a pre-post trial with 100 GPs and national implementation plans will be presented.

**Conclusion:** Providing a more useful assessment tool to GPs will improve doctor-patient communication and the management of CVD risk.