SUMMARY OF WORK

The Relationship Between Daily Weight Monitoring and Early Symptom Recognition in Patients With Chronic Systolic And Diastolic Heart Failure (Weigh-in CHF)

Bowers, Margaret RN, MSN, APRN, BC
Assistant Clinical Professor
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Adherence to the treatment regimen has been shown to improve clinical outcomes for patients with chronic heart failure (CHF). One component of the standard treatment regimen, daily weight monitoring, is considered important for early symptom identification and prevention of symptom-related hospital admission. However, the validity of the relationship between daily weight monitoring and important clinical outcomes such as early symptom identification and prevention of hospital readmission is based largely on observational data. An independent relationship between daily weight monitoring and clinical outcome has not been demonstrated, in either community-based studies or clinical trials. Because patient adherence to the CHF treatment regimen continues to hover at 50%, nursing interventions have been developed to improve adherence to guideline-based recommendations, including weighing. Yet, daily weight monitoring has not been shown to effectively influence key patient outcomes, and the time spent teaching patients to weigh may be better spent elsewhere. In addition, weight monitoring is recommended equally for patients with systolic as well as diastolic dysfunction, two types of CHF with very different underlying physiology. Though the two are symptomatically similar, the effectiveness of daily weight monitoring for each has not been clearly demonstrated.

The purpose of this study is to evaluate the effectiveness of a standard nursing intervention, teaching patients to monitor daily weights. Specifically we propose to assess the actual rate of weight monitoring; the relationship between changes in heart failure symptoms and changes in daily weights among patients who weigh regularly; and the relationship between adherence to the heart failure guideline with regard to weighing and subsequent hospital readmission rates. Secondary objectives include evaluating differences in weight monitoring and clinical outcomes in patients with both systolic and diastolic heart failure. Outcome measures include patient adherence to the weight monitoring regimen, frequency of early symptom recognition, and symptom-related hospital readmissions, controlling for medication adherence as an important, symptom-related covariate.