

e-Counseling for Self-Care Adherence Adds Therapeutic Benefit for Hypertension: the REACH Trial



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66th Annual Scientific Session & Expo

Robert P Nolan, PhD, CPsych; Ross Feldman, MD, FACP, FAHA, FRCPC; Martin Dawes, MD, PhD, DRCOG, FRCGP; Susan I. Barr, PhD; Hazel Lynn, MD, FCFP, MHSc; Carolyn MacPhail, MHSc; Janusz Kaczorowski, PhD; Scott Thomas, PhD; Jack Goodman, PhD; Sam Liu, PhD; Rika Tanaka, PhD; and Jelena Surikova, BA (Hons)

with collaboration of Heart and Stroke Foundation of Ontario.

Peter Munk Cardiac Centre, University Health Network
and University of Toronto; Toronto, Ontario, Canada

<https://www.cardiacehealth.uhnresearch.ca>

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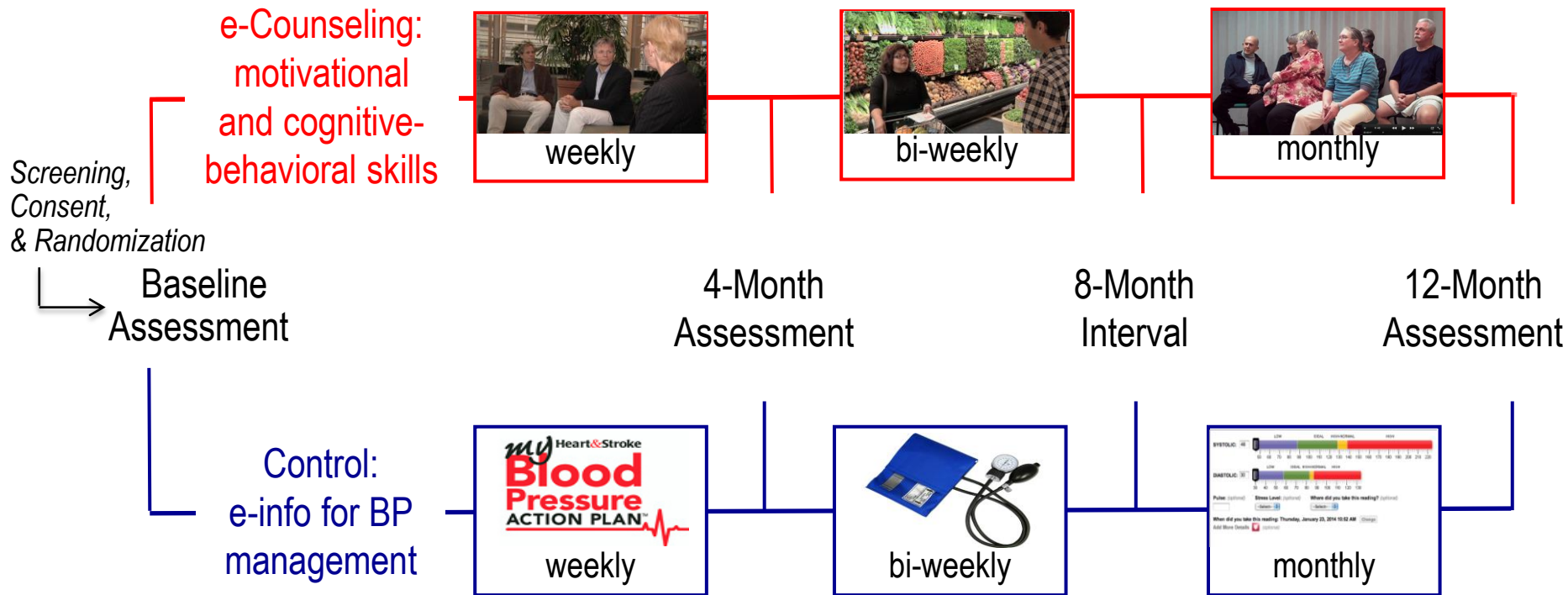
MARCH 17 – 19, 2017



Methods: Trial Design and Protocol



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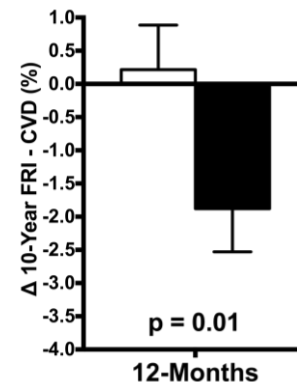
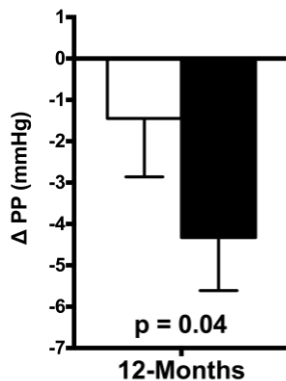
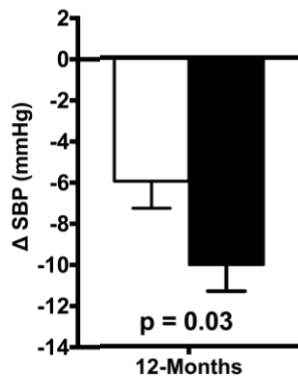


- Double-blind, randomized controlled trial with assessments at baseline, 4 and 12 months

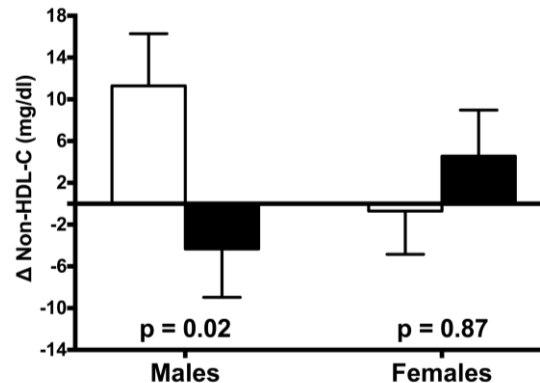
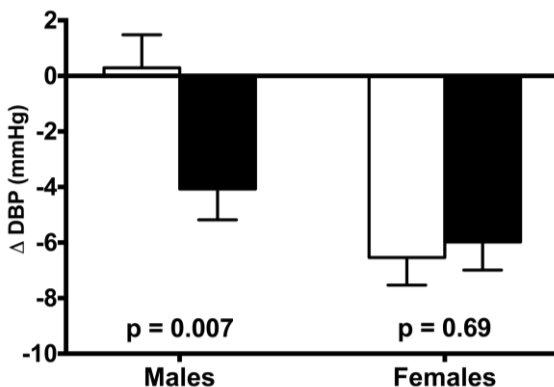
Therapeutic Change at 12 Months



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Treatment by Sex Outcomes



□ Control

■ eCounseling

Conclusions – REACH Trial

- e-Counseling improved the benefit of usual care for hypertension at 12 months
- Clinically meaningful outcome: 10mmHg SBP decrease is associated with risk reduction of 20% CVD events, 17% CHD, 27% stroke, 13% all-cause mortality
Ettehad et al. Lancet. 2016;387(10022):957-67
- Findings provide support for a population-based e-counseling trial for hypertension

