



## LOW ACCULTURATION PREDICTS REHOSPITALIZATION AMONG UNDERSERVED PATIENTS WITH HEART FAILURE

ACC Poster Contributions

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**Background:** Understanding reasons for readmission among patients with heart failure (HF) is of increasing importance. Little is known about factors associated with rehospitalization among medically underserved patients with HF. Acculturation has been shown to predict successful interaction with the health care system, and thus may be an important factor related to rehospitalization among patients with HF.

**Methods:** We studied all patients hospitalized with a principal discharge diagnosis of HF between Jan 2000 and Dec 2007 at Denver Health, an integrated delivery system that cares for socio-economically disadvantaged patients. Individuals were defined as having low acculturation if their primary language was not English and their country of birth was outside of the U.S as recorded in patient registration files. Candidate co-variables included demographics, co-morbidities, laboratory data, LV function, and characteristics of the index admission (ICU, length of stay and discharge disposition). Multivariable logistic regression was used to determine factors associated with 30-day all-cause rehospitalization.

**Results:** Of 1,250 patients, 30% (n=375) were Black, 39% (n=489) Hispanic/Latino, and 28% (n= 344) White. Twenty-five percent (n=306) had poor acculturation. Within 30 days, 194 rehospitalizations occurred. After accounting for other patient characteristics, poor acculturation was associated with a significantly higher risk of readmission (OR 1.55 (95% CI 1.09-2.20)).

**Conclusions:** Independent of clinical factors, low acculturation is associated with rehospitalization in patients with HF. Future studies should evaluate whether culturally appropriate interventions targeting patients with low acculturation may reduce HF rehospitalizations.