Table H-4. Strength of evidence for key outcomes in case management for patients with congestive heart failure

| **Outcome, Number of Studies** | **Quality****(Good, Fair or Poor)** | **Consistency****(Consistent or Inconsistent)** | **Directness****(Direct or Indirect)** | **Precision****(Precise or Imprecise)** | **Number of Subjects** | **Summary of Findings** | **Strength of Evidence** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Mortality** 6 trialsDebusk 200423; Jaarsma 200843Kasper 200246Pugh 200185Rich 199589Riegel 2002155 | Good | Consistent | Direct | Imprecise | 2,383 | Case management programs that serve adults with CHF do not reduce mortality.   | Low |
| **Quality of** **life** 6 trialsKasper 200246Peters-Klimm 201084Pugh 200185Rich 199589Riegel 200691Sisk 2006105 | Good | Inconsistent | Direct | Imprecise | 1,280 | Case management programs that serve patients with CHF improve CHF-related quality of life. | Low |
| **Patient satisfaction** 3 trialsLaramee 200350Peters-Klimm 201084Riegel 2002155 | Fair | Consistent | Direct | Imprecise | 844 | Case management programs that serve patients with CHF increase patient satisfaction. | Moderate |
| **Patient adherence to self-management behaviors** 3 trialsKasper 200246Laramee 200350Peters-Klimm 201084 | Good | Consistent | Direct | Imprecise | 686 | Case management increases patients’ adherence to self-management behaviors recommended for patients with CHF. | Moderate |
| **Guideline adherence**3 trialsDebusk 200423 Kasper 200246Laramee 200350 | Good | Inconsistent | Direct | Imprecise | 949 | CM does not increase the use of recommended medications for CHF | Insufficient |
| **All-cause hospitalizations** 10 trialsDebusk 200423Jaarsma 200843Kasper 200246Laramee 200350Pugh 200185Rich 199388 Rich 199589Riegel 2002155 Riegel 200691Sisk 20061051 observational studyCreason 2001119 | Good | Inconsistent | Direct | Imprecise | 3,540 | Case management reduces hospitalization rates among CHF patients. | Low |