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Feasibility and acceptability of using a patient reported outcome measure (OxFAB) to help patients with heart failure to recognise and communicate worsening symptoms to specialist nurses.

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**Background:**

The incidence of Heart Failure (HF) is increasing. Breathlessness and fatigue are symptoms that signal clinical deterioration. However, patients often do not recognise worsening symptoms. This can lead to avoidable hospital admission. We developed a validated tool to evaluate fatigue and breathlessness (OxFAB) but had not established its acceptability and feasibility in clinical practice.

**Purpose:**

To evaluate the feasibility and acceptability of OxFAB as a tool to optimise patient-specialist nurse communication of symptoms of fatigue and breathlessness.

**Methods:**

A multi-method feasibility study conducted in HF nurse specialist clinics at two sites in England. Acceptability was determined through qualitative interviews and adherence to OxFAB at 2 time points. Feasibility was determined through questionnaire completion rates and qualitative interviews.

**Results:**

Thirty-six patients and three HF nurse specialists completed the study. Over half the patient sample were male (58%), with HF (with reduced ejection fraction), 86% NYHA Class II-III, age ( $\mu$ 68.49 years-SD 12.55) years. Eighty-one percent completed OxFAB in  $\mu$ 7.21 minutes (time-point 1) and  $\mu$ 6.59-mins (time-point 2). Interview data suggested that OxFAB was easy to complete, relevant and optimised symptom communication.

**Conclusion:**

This feasibility study demonstrated OxFAB was acceptable and feasible in clinical practice to optimise patients-health professional communication of HF symptoms.