

Variation in Practice Patterns at CF Clinical Care Centers in Northern New England

AM Cairns, E Caldwell, H Quinton, J Dziodzio, J Zuckerman, HW Parker, J Leiter, R Harder, T Kneeland, G Wager
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The Northern New England Cystic Fibrosis Consortium



The NNECFC is a regional, voluntary consortium of more than 80 clinicians and researchers from the CF care centers in Maine, New Hampshire and Vermont. The mission of the group is to improve CF care and patient outcomes.

Goal

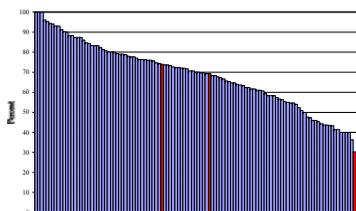
To examine variability in Northern New England in the use of TOBI, Pulmozyme, and enteral/parenteral feeding in patients most likely to benefit from these therapies as defined by the CFF Clinical Practice Guidelines and compare to national rates.

Methods

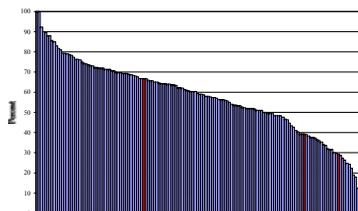
We selected all 299 patients aged 6 to 30 years in the CFF Registry in 1999 from the CF care sites in Northern New England. We then examined rates of TOBI use in patients positive for *P. aeruginosa* with FEV₁ from 25 to 75 percent predicted; Pulmozyme use; Enteral/parenteral feeding among children at ≤5th NCHS weight percentile and adults with ideal body weight (IBW) at less than 85%.

Each bar represents one CF care center.
Green bar is national rate.
Red bars are NNE center rates.

Use of TOBI*



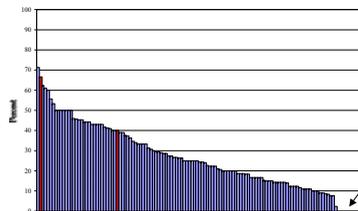
Use of Pulmozyme*



* Center must have at least 10 eligible patients to be included.

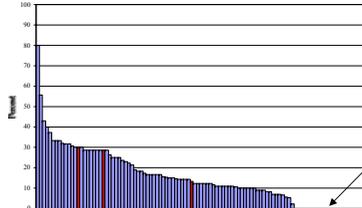
Use of enteral/parenteral feeding**

In Children at ≤5th NCHS Weight Percentile



10 centers did not report any e/p feeding with their ≤5th NCHS weight percentile children

In Adults at <85% of Ideal Body Weight



23 centers did not report any e/p feeding with their <85% IBW adults

** Center must have at least 5 eligible patients to be included.

Demographics

	NNE %	National %
≥18 yrs	45.2	37.9
Female	49.5	47.0
Adults < HS educ	15.8	9.5
<u>Insurance</u>		
State	58.7	41.4
Federal	4.9	5.0
HMO	31.5	32.6
<u>Δ508 Genotype</u>		
Heterozygous	38.2	36.4
Homozygous	52.2	52.4

Results

Among the three NNE care centers (sites are grouped by state), use of TOBI varied from 30.4% to 74.1% (p=0.003), national rate 67.9%; use of Pulmozyme 29.4% to 66.7% (p=0.001%), national rate 55.1%; enteral/parenteral feeding in children ≤5th NCHS weight percentile 0% to 66.7%, national rate 26.5% (p=0.004); enteral/parenteral feeding in adults at <85% ideal body weight (IBW) 13.3% to 30.0%, national rate 14.6% (not significant).

Conclusions

- These findings suggest widely variable practice patterns in the use of TOBI, Pulmozyme, and enteral/parenteral feeding.
- The next step is to re-examine our practice patterns in light of the evidence base underlying the use of these therapies.