

# Bridging the gap from hospital discharge to cardiac rehabilitation using the intervention mapping approach (BRIDGE2CARE)

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**DOI**

[10.1093/eurjpc/zwab061.426](https://doi.org/10.1093/eurjpc/zwab061.426)

**Publication date**

2021

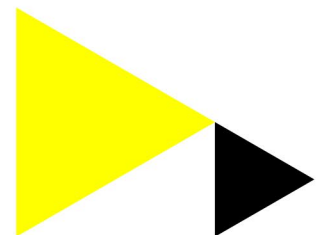
**Document Version**

Final published version

[Link to publication](#)

**Citation for published version (APA):**

Keessen, P., van Duijvenbode, I. C. D., Latour, C. H. M., Kraaijenhagen, RA., Janssen, V., Jørstad, H. T., Scholte op Reimer, W. J. M., & Visser, B. (2021). Bridging the gap from hospital discharge to cardiac rehabilitation using the intervention mapping approach (BRIDGE2CARE). *European journal of preventive cardiology*, 28(suppl. 1), 416-417. <https://doi.org/10.1093/eurjpc/zwab061.426>

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## Bridging the gap from hospital discharge to cardiac rehabilitation using the intervention mapping approach (BRIDGE2CARE)

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**Funding Acknowledgements:** Type of funding sources: Public Institution(s). Main funding source(s): Dutch Research Council

**INTRODUCTION:** Cardiac rehabilitation (CR) is the cornerstone of secondary prevention. After hospital discharge, patients have to wait for participation in CR while often feeling overwhelmed by their cardiac event and in need of tailored information and support.

**PURPOSE:** The objective of this study was to develop a remote (digital) intervention to bridge the gap from hospital discharge to CR.

**METHODS:** We developed an intervention by completing the first three steps of the intervention mapping protocol. Step 1: identification of information- and support needs from the literature and semi-structured interviews. Step 2: Describing performance objectives for the intervention and selecting determinants. Step 3: Generation of program themes and theory based change methods.

**RESULTS:** (Step 1) The following Information- and support needs were identified from the literature (n = 33) and semi structured interviews (n = 22): information about pathology and intervention, medication and side effects, daily physical activities, psychological distress, body signals and social support. Advanced communication and pedagogical skills of the health care provider and the ability to build trust were described as important prerequisites for the intervention. (Step 2) The following performance objectives were formulated: (1) Patients gain knowledge on how their cardiac illness and procedure affects their bodies and health, (2) Patients gain knowledge about medication and side effects, (3) Patients know which daily physical activities they can and can't do after hospital discharge and are physically active, (4) Patients and informal caregivers can deal with psychological distress and know how to discriminate between harmful and harmless body signals. Objectives were described per determinant (knowledge, skill, attitude, social influence, self-efficacy and outcome expectation). (Step 3) A comprehensive remote intervention was developed using theory based coaching strategies, a digital patient platform and information videoclips.

**CONCLUSION:** This study describes the information and support needs of patients after cardiac hospitalization and offers a remote intervention that bridges the gap from hospital discharge to CR.

Abstract Figure. BRIDGE2CARE

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