

## Excluded Papers

North Carolina initiative targets CVD and diabetes with telehealth intervention. <i>Disease Management Advisor</i> 121; 12(11): 127-129	Description of project only. No outcome data.
A strategy for arterial risk assessment and management in type 2 (non-insulin-dependent) diabetes mellitus. European Arterial Risk Policy Group on behalf of the International Diabetes Federation European Region. <i>Diabetic Medicine</i> 1997; 14(7): 611-621	Not relevant – statement re: risk factors that should be considered and treatment to reduce risk.
Directory of Asian initiatives. 1998.	Not relevant
Saving lives: our healthier nation. Presented to Parliament by the Secretary of State for Health. 1999.	Not relevant – no outcomes
Identifying persons at risk for CHD: The Framingham scoring method. <i>Consultant</i> 2001; 41(10): 01	Two page reference sheet on Framingham
Challenging inequalities in health: celebrating success. <i>Community Health UK Action</i> 2001; (54): 10-12 2001;	Not relevant. Does not address identifying/access/compliance with people with/at risk of CHD.
Identifying persons at risk for CHD: The Framingham scoring method. <i>Consultant</i> 2002; 42(1)	Two page reference sheet on Framingham
Pharmacy records could be used to enhance statin compliance in elderly. <i>Pharmaceutical Journal</i> 2002; 269(7208): 27	News item only with no relevant outcomes.
New BP guidelines establish diagnosis of pre-hypertension: level seeks to identify at-risk individuals early. <i>Case Management Advisor</i> 2003; Reports From the Field: 1.: 1	Not relevant: criteria for elevated blood pressure
Keep supplement. <i>American Journal of Kidney Diseases</i> 2005; 45(s2)	Not relevant - programme to identify people at risk of c kidney disease. The program evaluates people with a history of diabetes, hypertension or CKD to find people with CKD (not to find those at risk of CHD).
Our health, our care, our say: a new direction for community services. A brief guide. 2006.	Not relevant- no outcomes
Abbott S, Hobby L. What is the impact on individual health of services in primary health care settings which offer welfare benefits advice? August 2002	Not relevant
Abubakar KD, Arch B, Porter J, Weissberg P. Outcome after acute myocardial infarction: a comparison of patients seen by cardiologists and general physicians. <i>BMC Cardiovascular Disorders</i> 2004; 4: 14	Not relevant

Afonso NG, Aranha AN, Delor B, Cardozo LJ. Low-density lipoprotein cholesterol goal attainment among high-risk patients: Does a combined intervention targeting patients and providers work? <i>American Journal of Managed Care</i> 2006; 12(10): 589-594	No relevant outcomes
Ali S, Atkin K. Primary healthcare and South Asian populations: meeting the challenges. 2004.	Not relevant - book based mostly on discussion. Included one chapter about a study of CHD in Asian people, but this was epidemiological - to describe extent of the problem rather than ways to identify or improve access/compliance.
Allen. Promoting compliance with antihypertensive medication. <i>British Journal of Nursing</i> ; 7 (20) 12-25 Nov 1998 1998; -8	Not relevant - hypertension compliance and discussion paper
Alspach. Preventing prehospital delays in seeking care for acute myocardial infarction: a patient education program. <i>Critical Care Nurse</i> 1999; 19(5): 10-14	Summary of guidelines published in 1994
Amonkar MS, Rosenbluth SA, Simon KJ. Barriers and facilitators to providing common preventive screening services in managed care settings. <i>Journal of Community Health</i> 1999; 24(3): 229-247	Non-UK general population. Not included in Q1.
Anandakumar NM, WongYC, and Chia D. Routine screening with fetal echocardiography for prenatal diagnosis of congenital heart disease. <i>Ultrasound Review of Obstetrics &amp; Gynecology</i> 2002; 2(1): 50-55	Population less than 16 years.
Anderson WM and Hilleman D. Cardiovascular risk factor screening and intervention in African American adults. <i>Journal of Health Care for the Poor and Underserved</i> ; 8 (3) 1997; 322-44	Methodology only.
Andrus, Miranda R., and Clark, Deidre B. Provision of pharmacotherapy services in a rural nurse practitioner clinic. <i>American Journal of Health-System Pharmacy</i> 2007; 64(3): 294-297	No relevant outcomes.
Aoun RM, Aoun S, and Rosenberg, Michael. Are rural people getting HeartSmart? <i>Australian Journal of Rural Health</i> 2004; 12(2): 81-88	Relevant outcomes not reported. States compliance to medication was observed to be high, but doesn't give specific results.
Arora S, Coker N, Gillam S, Ismail H, King's-Fund. Improving the health of black and minority ethnic groups: a guide for primary care organisations. 2000.	Discussion. no relevant outcomes no relevant references
Ashraf. Early detection of heart disease in patients with type-I diabetes. <i>Lancet</i> 2000; 356(9231): 26	Not relevant - commentary on value of electron beam computed tomography
Aspinall PJ, Jacobson B. Ethnic disparities in health	Gives examples of good practice

and health care: a focused review of the evidence and selected examples of good practice: executive summary. 2000.	but no effectiveness data.
Aspinall PJ and Jacobson, B. Managing health inequalities locally: a baseline survey of primary care trusts' experience with health equity audit in the implementation year. <i>Health Services Management Research</i> 2005; 18 (4): 223-231;	Not relevant - only looking at primary care trusts experiences of undertaking HEA (for variety of diseases) not using them to target people at risk of/with CHD
Aspray NK, Cassidy TP, Hawthorne G et al. Rapid assessment methods used for health-equity audit: diabetes mellitus among frail British care-home residents. <i>Public Health</i> 2006; 120(11): 1042-1051	Not relevant - health needs assessment component of HEA to describe current situation.
Asthana S, Gibson, A., Moon, G., Dicker, J., Brigham, P. The pursuit of equity in NHS resource allocation: should morbidity replace utilisation as the basis for setting health care capitations? <i>Social Science &amp; Medicine</i> 2004; 58(3): 539-551	Not relevant
Aubin. Physician extenders for cost-effective management of hypercholesterolemia. <i>Canadian Family Physician</i> 1998; 44(1289): -1297	No relevant outcomes
Bailey BJ, Carney SL, Gillies AH, McColm LM, Smith AJ, and Taylor M. Hypertension treatment compliance: what do patients want to know about their medications? <i>Progress in Cardiovascular Nursing</i> 1997; 12(4): 23-28	Not relevant, hypertension treatment compliance.
Bain NS, Foster K, Grimshaw J et al. Can audit of a local protocol for the management of lipid disorders effect and detect a change in clinical practice? <i>Health Bulletin</i> 1997; 55(2): 94-102	Non-UK general population. Not included in Q1.
Baird and Wright, N. Poor access to care: Rural health deprivation? <i>British Journal of General Practice</i> 2006; . 56(529): 567-568	Not relevant – and discussion only
Barrett. Improving access and quality for ethnic minority women. <i>Womens Health Issues</i> 2001; 11(4)	Not relevant –examples of poor access and discrimination in US and need for improvements
Begum N. Doing it for themselves: participation and black and minority ethnic service users. 2006.	Not relevant – not population at risk/with established CHD
Beswick AD, Brindle P, Fahey T, Ebrahim S. A systematic review of risk scoring methods and clinical decision aids used in the primary prevention of coronary heart disease. 2006.	Not relevant - risk assessment tools
Betancourt JR, Carrillo JE, and Green AR. Hypertension in multicultural and minority populations: linking communication to compliance. <i>Current Hypertension Reports</i> 1999; 1(6): 482-488	not relevant & discussion paper with no relevant references
Bhatnagar D, Morgan J, Siddiq S, Mackness MI, Miller J P, and Durrington PN. Outcome of case finding among relatives of patients with known heterozygous familial hypercholesterolaemia. <i>BMJ</i> 2000; 321(7275): 1497-1500	Non-UK general population. Not included in Q1

Bhatnagar and Bhatnagar, D. Diagnosis and screening for familial hypercholesterolaemia: finding the patients, finding the genes. <i>Annals of Clinical Biochemistry</i> 2006; 43(6): 441-456	Non systematic literature review. Reference list checked – no papers identified
Blake GJ, Ridker PM, and Kuntz KM. Potential cost-effectiveness of C-reactive protein screening followed by targeted statin therapy for the primary prevention of cardiovascular disease among patients without overt hyperlipidemia. <i>American Journal of Medicine</i> 2003; 114(6): 485-494	Not relevant - effectiveness of c-reactive protein for screening. Non UK, non disadvantaged.
Blamey A, Ayana M, Lawson L, Mackinnon J, Paterson I, and Judge K. Final Report The Independent Evaluation of Have a Heart Paisley. 2004 University of Glasgow	Not relevant
Blumenthal. Detecting Occult Coronary Disease in a High-Risk Asymptomatic Population. <i>Circulation</i> 2003; 107(702): 707	OUT - screening tests
Boehm and McFee, R. B. Educate hypertensive patients to increase compliance... "Potential barriers to control of blood pressure" (J Am Osteopath Assoc 2002;102:209-13), Julie L. Kalb, DO, et al. <i>JAOA: The Journal of the American Osteopathic Association</i> 2002; 102(8): 410	Not relevant - letter commenting on importance of compliance for hypertension control
Bonow GM, Greenland P, and Noble J. Identification and management of risk in patients with coronary and other vascular disease: Foreword. <i>American Journal of Medicine</i> 1996; 101(4 A)	Not relevant – risk assessment tools (commentary)
Borzecki OSA, and Berlowitz DR. Barriers to hypertension control. <i>American Heart Journal</i> 2005; 149(5)	Not relevant - non systematic literature review about barriers to hypertensive medication compliance
Bouman. Health education in television entertainment: Medisch Centrum West: a Dutch drama serial. <i>Health Education Research</i> 1998; 13(4)	Not relevant - no relevant outcomes
Bowman, Bryar, RM, and Thompson, DR. Is the place for cardiac rehabilitation in the community? <i>Social Sciences in Health: the International Journal of Research and Practice</i> ; 4 (4) 1998 1998; -54	Not relevant- discussion on benefits of cardiac rehabilitation. No access, identifying, retention, compliance etc outcomes
Bozovich M. Effect of a clinical pharmacist-managed lipid clinic on achieving National Cholesterol Education Program low-density lipoprotein goals. <i>Pharmacotherapy</i> 2000; 20(11): 1375	Out after critical appraisal. Patient compliance outcomes not fully reported. Just states it was 80% but unclear if this result at baseline or follow-up or is for Intervention patients, controls or both.
Bradley WR, Kinmouth AL, Mant D, and Gantley M. Development and evaluation of complex interventions in health services research: case	Methodology paper only

study of the Southampton heart integrated care project (SHIP). <i>British Medical Journal</i> ; 318 (7185) 13 Mar 1999 1999; -15	
Brenner and Brenner, B. Implementing a community intervention program for health promotion. <i>Social Work in Health Care</i> 2002; 35(1-2): 359-375	No outcome measures
Brindle P, Beswick A, Fahey T, Ebrahim S, Accuracy and impact of risk assessment in the primary prevention of cardiovascular disease: a systematic review. <i>Heart</i> 2006; 92(12): 1752-1759	Risk assessment tools
Brindle P, May M, Gill P, et al. Primary prevention of cardiovascular disease: a web-based risk score for seven British black and minority ethnic groups. <i>Heart</i> 2006; 92(11): 1595-1602	Not relevant – risk assessment tools
Brindle and Holt TA. Cardiovascular risk assessment - Time to look beyond cohort studies. <i>International Journal of Epidemiology</i> 2004; 33(3)	Not relevant – risk assessment tools
British Heart Foundation. Education Strategy update. 2007	Not relevant
Broedl C, Geiss HC, and Parhofer KG. Comparison of current guidelines for primary prevention of coronary heart disease: risk assessment and lipid-lowering therapy. <i>Journal of General Internal Medicine</i> 2003; 18(3): 190-195	Risk assessment tools
Brouker ME, Gallagher K, Larrat EP, Dufresne RL. Patient compliance and blood pressure control on a nuclear-powered aircraft carrier: impact of a pharmacy officer. <i>Military Medicine</i> 2000; 165(2): 106-110	Not relevant – compliance in hypertension
Brownson. Changes in newspaper coverage of cardiovascular health issues in conjunction with a community-based intervention. <i>Health Education Research</i> 1996; 11(4): 479-486	No relevant outcomes.
Brownson. Preventing cardiovascular disease through community-based risk reduction: the Boothel Heart Health Project. 1996; (206): 213	Out after critical appraisal - multifaceted intervention. Further reading found that just 1 outcome had some relevance but was not reported fully, plus the population was generic.
Bruckert E and Lievre. Primary prevention of cardiovascular disease in the elderly: the fame study. <i>Atherosclerosis</i> 2000; 144(1): 182	Not relevant and abstract only
Brunenberg, Wetzels GEC, Nelemans PJ et al. Cost effectiveness of an adherence-improving programme in hypertensive patients. <i>Pharmacoeconomics</i> 2007; . 25(3)	Hypertensive compliance
Burnier MS, Valerie F, Bernard, Brunner HR. Monitoring compliance in resistant hypertension: an important step in patient management. <i>Journal of Hypertension - Supplement</i> 2003; 21(2): S37-S42	Not relevant - non systematic literature review about monitoring hypertensive compliance

Burnier M. Impact on clinical outcomes. 2001;(xiii):299-309.	Not relevant
Caan W, Hampton-Matthews S. One from the heart for people with a learning disability. <i>British Journal of Nursing</i> 1999; 8(2): 97-100	Not relevant - not specifically CHD, discussion paper only with no relevant references
Campbell. Secondary prevention clinics for coronary disease: RANDOMISED trial of effect on health. <i>BMJ</i> 1998; 316: 1434-1437	Not relevant
CampbellJP, Kiss K, Jones C, Anton AR. Building capacity for awareness and risk factor identification in the community: the blood pressure assessment program of the Calgary Fire Department. <i>Canadian Journal of Cardiology</i> 2001; 17(12): 1275-1279	Non-UK in generic populations not included in question 1.
Capewell S, Unal B, Critchley JA, McMurray J. Over 20 000 avoidable coronary deaths in England and Wales in 2000: the failure to give effective treatments to many eligible patients <i>Heart</i> 2006; 92: 521-523.	Not relevant
Cappuccio OP. The Wandsworth heart and stroke study. A population-based survey of cardiovascular risk factors in different ethnic groups. Methods and baseline findings. <i>Nutrition Metab Cardiovascular Dis</i> 1998; 8: 371-385	Not relevant.
Cappuccio OP, Cook DG, Atkinson RW, Strazzullo P. Prevalence, detection, and management of cardiovascular risk factors in different ethnic groups in south London. <i>Heart</i> 1997; 78(6): 555-563	Not relevant. Study about the extent of the problem. Population based survey to determine the prevalence of cardiovascular risk factors in an ethnic minority sample and whether their risk had been detected. Not aimed to test an intervention to identify those at risk, but to describe whether these groups are being detected in the current health system.
Cappuccio OP, Strazzullo P, and Kerry SM. Application of Framingham risk estimates to ethnic minorities in United Kingdom and implications for primary prevention of heart disease in general practice: Cross sectional population based study. <i>British Medical Journal</i> 2002; . 325(7375): 30	Risk assessment tools
Carlisle P. The heart of the community. <i>Nursing Times</i> 2001; 97(38): 26-27	No outcomes
Carter. Compliance and cardiac disease. <i>Am J Nursing</i> 1999; (11): 24C-25C	Not relevant - Q &A article
Centers for Disease Control and Prevention (CDC). Improvement in lipid and glycated hemoglobin control among black adults with diabetes--Raleigh and Greensboro, North Carolina, 1997-2004. <i>MMWR - Morbidity &amp; Mortality Weekly Report</i> 2006; 55(46): 1248-1251	Not relevant. Risk reduction programme, no relevant outcomes.

Chabot MJ, Gregoire JP and Milot A. Pharmacist intervention program for control of hypertension. <i>Annals of Pharmacotherapy</i> 2003; 37(9): 1335-1337	Hypertension medication compliance only
Chaitman and Miller, D. D. Perioperative cardiac evaluation for noncardiac surgery noninvasive cardiac testing. <i>Progress in Cardiovascular Diseases</i> 1998; . 40(5)	Not relevant - risk
Chan DS, Chau JPC, Chang AM. Acute coronary syndromes: cardiac rehabilitation programmes and quality of life. <i>Journal of Advanced Nursing</i> 2005; 49(6): 591-599	Non OECD- Hong Kong
Chan L, Hart LG, Goodman DC. Geographic Access to Health Care for Rural Medicare Beneficiaries. <i>The Journal of Rural Health</i> 2006; 2: 140-146	Not relevant –just extent of the problem
Chaturvedi R, Harbinder, Shiomo, Yoav. Lay diagnosis and health-care-seeking behaviour for chest pain in south Asians and Europeans. <i>Lancet, London</i> 2997; 350(9091): 1578-1583	Not relevant - cross-sectional study providing respondents with a case study and investigating whether South Asians and Europeans interpret and act upon angina symptoms differently.
Chobanian AV, Bakris GL, Black HR et al. Seventh report of the Joint National Committee on Prevention, Detection, Evaluation, and Treatment of High Blood Pressure.. <i>Hypertension</i> 2003; 42(6): 1206-1252	Non-UK generic groups, not included in question 1. The brief discussion on disadvantaged groups is in relation to treatment, not identifying/detecting.
Chowdhury TA, Lasker SS, and Mahfuz, R. Ethnic differences in control of cardiovascular risk factors in patients with type 2 diabetes attending an Inner London diabetes clinic. <i>Postgraduate Medical Journal</i> 2006; 82(965): 211-215	Not relevant - state of the problem
Christian AH, Mochari HY, Mosca, LJ. Coronary heart disease in ethnically diverse women: risk perception and communication. <i>Mayo Clinic Proceedings</i> 2005; 80(12): 1593-1599	Non-UK generic population not included in Q1
Citizens Advice Bureau. Prescribing advice. Improving health through CAB advice services. Summer 2005	
CITIZENS ADVICE BUREAU IN GENERAL PRACTICE. High Peak and Dales. April 2005 – March 2006	Not relevant
Clark and Lan VM. Heart failure patient learning needs after hospital discharge. <i>Applied Nursing Research</i> 2004; 17(3): 150-157	Not relevant - educational needs only, no relevant outcomes
Clark NM, Janz NK, Dodge JA et al. Changes in functional health status of older women with heart disease: evaluation of a program based on self-	Not relevant

regulation. <i>Journals of Gerontology Series B-Psychological Sciences &amp; Social Sciences</i> 2000; 55(2): S117-S126	
Cleeman. Executive summary of the third report of the National Cholesterol Education Program (NCEP) expert panel on detection, evaluation, and treatment of high blood cholesterol in adults (adult treatment panel III). <i>JAMA</i> 2001; 285(19): 16	Brief summary of ATP guideline
Cohn JN, Hoke LW, Wayne S et al. Screening for early detection of cardiovascular disease in asymptomatic individuals.. <i>American Heart Journal</i> 2003; 146(4): 679-685	Non-UK generic population not included in Q1
Collins and Ivey, A. M. Pearls for practice. The relationship of patient education and hypertension treatment compliance. <i>Journal of the American Academy of Nurse Practitioners</i> 1999; 11(8): 331-334	Hypertensive compliance only
Commentary. Risk assessment with statin therapy. <i>International Journal of Pharmaceutical Medicine</i> 2001; 15(5)	Not relevant - commentary on risk assessment tools
Cobb, Kraus WE, Root M, Allen JD. Assessing risk for coronary heart disease: beyond Framingham. <i>American Heart Journal</i> 2003; 146(4): 572-580	Risk assessment tools
Connelly J, Cooper J, Mann A, Meade TW. The psychological impact of screening for risk of coronary heart disease in primary care settings. <i>Journal of Cardiovascular Risk</i> 1998; 5(3): 185-191	Not relevant - the psychological impact on the patient of screening, no relevant outcomes
Cook, Drum ML, Kirchhoff AC et al. Providers' assessment of barriers to effective management of hypertension and hyperlipidemia in community health centers. <i>Journal of Health Care for the Poor and Underserved</i> 2006; 17(1): 70-85	No relevant outcomes, and non UK generic populations (not included in Q1)
Coombes, Sanders DCJ, Thiele JM, et al. The extended role of the clinical pharmacist in the management of heart failure and acute coronary syndromes. <i>Journal of Pharmacy Practice &amp; Research</i> 2002; 32(1): 17-23	Ongoing study CSSP - no outcome data just rationale
Cooper AF, Jackson G, Weinman J, Horne R. Factors associated with cardiac rehabilitation attendance: a systematic review of the literature. <i>Clinical Rehabilitation</i> 2002; 16(5): 541-552	Not relevant – data analysis of associations with attendance
Coull, Taylor VH, Elton R, Murdoch PS, Hargreaves AD. A randomised controlled trial of senior Lay Health Mentoring in older people with ischaemic heart disease: The Braveheart Project. <i>Age &amp; Ageing</i> 2004; 33(4): 348-354	Relevant outcomes not fully reported. Use of services is to measure whether the intervention reduces burden on health services. Reporting of compliance and medication is incomplete. See pg 351. States there was a significantly higher concordance with medication (p<.01) but not

	the size of the effect. Then says usage was higher with results for just aspirin and beta-blockers but this is only ~1% higher than at baseline
Cowan. Using clinical risk management processes to develop the national service framework for coronary heart disease. <i>British Journal of Clinical Governance</i> 2002; . 7(4 )	Not relevant - opinion paper on meeting the NSFCHD standards
Craig and Craig IH. Make early diagnosis, prevent early death from familial hypercholesterolaemia. The MED-PED FH program. <i>Medical Journal of Australia</i> 1995; 162(9): 454-455	No relevant outcomes
Crest. Blood pressure control programme for Northern Ireland. 1996 30.	Non-UK generic populations not included in Q3
Crowder. Improved symptom management through enrollment in an outpatient congestive heart failure clinic. <i>MEDSURG Nursing</i> 2006; 15(1): 27-35	Non-UK generic populations qualitative study not included in Q3
D'Agostino , Grundy S, Sullivan LM, Wilson P, CHD Risk Prediction Group. Validation of the Framingham coronary heart disease prediction scores: results of a multiple ethnic groups investigation.. <i>JAMA</i> 2001; 286(2): 180-187	Not relevant – risk assessment tools
Da Costa, Guerreiro JP, Nunes De, Melo M., Da Costa, Miranda A., Martins, A. P., Garca~o J, and Madureira, B. Effect of reminder cards on compliance with antihypertensive medication. <i>International Journal of Pharmacy Practice</i> 2005; 13(3): 205-213	Compliance with antihypertensive medication only
Daly J, Sindone, AP, Thompson DR, Hancock K, Chang E, Davidson P. Barriers to participation in and adherence to cardiac rehabilitation programs: a critical literature review. <i>Progress in Cardiovascular Nursing</i> 2002; 17(1): 8-17	Non-systematic literature review. Reference list unpicked - no references relevant
David SP. Should we use multiple risk factor interventions for the primary prevention of coronary heart disease? <i>American Family Physician</i> 2002; 66(2): 245-246	R - summary of cochrane review about risk reduction interventions
Davidoff and Davidoff, Frank. Primary prevention with over-the-counter statins: a cautionary tale. <i>Clinical Pharmacology &amp; Therapeutics</i> 2005; 78(3): 218-220	Non-systematic discussion paper. No relevant outcomes.
De Lorenzo F. Screen Test: Identify people at risk of Coronary Heart Disease. <i>Health Service Journal</i> 4th December 2003: 29	Not relevant
De Lorenzo F, Izon D, Kakkar V. V. Identification of individuals at high risk of developing Ischaemic Heart Diseases (poster abstract) <i>Journal of</i>	Not relevant

Thrombosis and Haemostasis 2003; 1 S1 Abstract number: P0481	
de Lusignan, Belsey J, Hague N, Dhoul N, van Vlymen J. Audit-based education to reduce suboptimal management of cholesterol in primary care: a before and after study. <i>Journal of Public Health</i> 2006; (4): 361-369	Non-UK general population. Not included in Q1.
Department-of-Health. National service frameworks: a practical aid to implementation in primary care; screening/case finding. 2002.	Not relevant - aid to screening in primary care. Not evaluation of effectiveness
Deskins H, Carole V, Bradlyn AS et al. Preventive Care in Appalachia: Use of the Theory of Planned Behavior to Identify Barriers to Participation in Cholesterol Screenings among West Virginians. <i>The Journal of Rural Health</i> 2006; 4: 367-374	Under 16 years old
DeWalt DA, Pignone M, Malone R et al. Development and pilot testing of a disease management program for low literacy patients with heart failure. <i>Patient Education &amp; Counseling</i> 2004; 55(1): 78-86	Not relevant – no relevant outcomes
Dezii. A retrospective study of persistence with single-pill combination therapy vs concurrent two-pill therapy in patients with hypertension. <i>Managed Care</i> 2000; 9(9): S2-S6	Hypertensive compliance only
Denke and Denke, M. A. Primary prevention of coronary heart disease in postmenopausal women. <i>American Journal of Medicine</i> 1999; 107(2A): 48S-50S	Risk assessment tools
Diamantopoulos, Andreadis EA, Vassilopoulos CV, et al. Adherence to an intensive antihypertensive follow-up programme. <i>Journal of Human Hypertension</i> 2003; 17(6): 01	Hypertensive compliance only
Dickson, Hajjar I, Dickson, Brandy K., and Hajjar, Ihab. Blood Pressure Measurement Education and Evaluation Program improves measurement accuracy in community-based nurses: a pilot study. <i>Journal of the American Academy of Nurse Practitioners</i> 2007; 19(2): 93-102	R - No relevant outcomes
Dollard J, Smith J, Thompson R, Stewart S. Broadening the reach of cardiac rehabilitation to rural and remote Australia. <i>European Journal of Cardiovascular Nursing</i> 2004; 3(1): 27-42	OUT after critical appraisal as doesn't meet SR criteria. References unpicked.
Donaldson and Andrus, M. R. Pharmacist-run lipid management program in rural Alabama. <i>American Journal of Health-System Pharmacy</i> 2004; 61(5): 01	No relevant outcomes
Dorn, Naughton, J., Imamura, D., Trevisan, M., Dorn, J., Naughton, J., Imamura, D., and Trevisan, M. Correlates of compliance in a randomized exercise trial in myocardial infarction patients..	Not relevant - retrospective analysis of exercise trial to determine factors associated with compliance.

<i>Medicine &amp; Science in Sports &amp; Exercise</i> 2001; 33(7): 1081-1089	
Duckitt and Harrington D. Risk factors for pre-eclampsia at antenatal booking: systematic review of controlled studies. <i>British Medical Journal</i> ; 330 (7491) 12 Mar 2005 2005; -567	Not relevant
Duffy VB, Lanier SA, Hutchins HL, Pescatello LS, Johnson MK, Bartoshuk LM. Food preference questionnaire as a screening tool for assessing dietary risk of cardiovascular disease within health risk appraisals. <i>Journal of the American Dietetic Association</i> 2007; 107(2): 237-245	Non-UK generic population not included in Q1
Durrington, Prais H, Bhatnagar D, France M, Crowley V, Khan J, Morgan J. Indications for cholesterol-lowering medication: comparison of risk-assessment methods. <i>Lancet</i> 1999; 353(9149): 278-281	Risk assessment tools
Ebrahim, S., and Davey Smith, G. Multiple risk factor interventions for primary prevention of coronary heart disease.[update in Cochrane Database Syst Rev. 2006;(4):CD001561; PMID: 17054138]. [29 refs]. <i>Cochrane Database of Systematic Reviews</i> 2000; (2): CD001561	Not relevant - risk reduction interventions only
Effective Health Care Bulletin. Cholesterol and coronary heart disease: screening and treatment. <i>Effective Health Care Bulletin</i> 1998; 4(1)	No relevant outcomes.
Elder. Initial results of 'Language for Health': cardiovascular disease nutrition education for English-as-a-second-language students. <i>Health Education Research</i> 1998; 1998 Dec. 13(4)	No relevant outcomes
Elliott and Taylor. Assessing public health capacity to support community-based heart health promotion: the Canadian Heart Health Initiative, Ontario Project (CHHIOP). <i>Health Education Research</i> 1998; 1998 Dec. 13(4)	Not relevant
Engberg. general health screenings to improve cardiovascular risk profiles: a randomised controlled trial in general practice with 5-year follow-up. <i>J Fam Pract</i> 2002; 51	Non-UK generic population not included in Q1
Evangelista LS, Berg J and Dracup, K. Relationship between psychosocial variables and compliance in patients with heart failure. <i>Heart &amp; Lung</i> 2001; 30(4): 294-301	Not relevant - just analysis of predictors and factors correlated with compliance - not qualitative data re barriers and facilitators
Evans and Krentz, A. J. Achieving better blood pressure control in high-risk patients with type 2 diabetes using combination antihypertensive therapy. <i>Vascular Disease Prevention</i> 2007; 4(2): 111-116	Hypertensive compliance only.
Fahey and Fahey, T. Assessing heart disease risk	Not relevant - risk assessment

in primary care. Cholesterol lowering should be just one part of a multiple risk factor intervention.. <i>BMJ</i> 1998; 317(7166): 1093-1094	tools
Fang J, Negassa A, Gern R W, Alderman MH, Access to revascularization among patients with acute myocardial infarction in New York City-- impact of hospital resources. <i>Journal of Urban Health</i> 2006; 83(6): 1085-1094	Non-UK generic population not included in Q3
Farooqi and Bhavsar, M. Project Dil: a co-ordinated primary care and community health promotion programme for reducing risk factors of coronary heart disease amongst the South Asian community of Leicester: experiences and evaluation of the project. <i>Ethnicity and Health</i> 2001; 6 (3/4): 265-270	No relevant outcomes
Farris RP, Haney DM. Dunet DO. Expanding the evidence for health promotion: developing best practices for WISEWOMAN. <i>Journal of Women's Health</i> 2004; 13(5): 634-643	Not relevant – discussion of how impact of WISEWOMAN will be evaluated
Feather. A practical guide to reaching hypertension targets. <i>Practice Nurse</i> 2006; 2006 9 Jun. 31(11)	Not relevant - non systematic discussion about managing hypertension
Fedder DO, Chang RJ, Curry S and Nichols G. For the patient. The effectiveness of a community health worker outreach program on healthcare utilization of west Baltimore City Medicaid patients with diabetes, with or without hypertension.. <i>Ethnicity &amp; Disease</i> 2003; 13(1): 146	No outcomes reported
Ferdinand and Ferdinand, K. C. Lessons learned from the Healthy Heart Community Prevention Project in reaching the African American population. <i>Journal of Health Care for the Poor &amp; Underserved</i> 1997; 8(3): 366-371	Description of the project , full outcomes not reported and no methodology.
Finkelstein EA, Troped PJ, Will JC, Palombo R. Cost-effectiveness of a cardiovascular disease risk reduction program aimed at financially vulnerable women: the Massachusetts WISEWOMAN project. <i>Journal of Womens Health &amp; Gender-Based Medicine</i> 2002; 11(6): 519-526	Results of WISEWOMAN from Masachusetts only. Byers 1999 includes all project results. Costs relate to the minimal/enhanced intervention – not the screening.
Finkelstein EA, Khavjou O, Will JC. Cost-effectiveness of WISEWOMAN, a program aimed at reducing heart disease risk among low-income women. <i>Journal of Women's Health</i> 2006; 15(4): 379-389	Cost-effectiveness of 9/12 groups – Will et al 2004 includes effectiveness data. Costs related to risk reduction not identifying.
Fitzgibbon ML. Quantitative assessment of recruitment efforts for prevention trials in two diverse black populations. <i>Preventive Medicine</i> 1998; 27(6): 838-845	Not relevant
Flanagan, Cox P, Paine D, Davies J, Armitage M. Secondary prevention of coronary heart disease in primary care: a healthy heart initiative. <i>Qjm</i> 1999;	Not relevant- assesses how well patients are currently being managed. Then gives lifestyle

92(5): 245-250	education to patients
Foex. Pre-operative evaluation and risk assessment of patients undergoing vascular surgery. <i>Bailliere's Best Practice in Clinical Anaesthesiology</i> 2000; . 14(1)	Risk assessment tools
Fonarow. Improved treatment of coronary heart disease by implementation of a cardiac hospitalization atherosclerosis management program (CHAMP). <i>American Journal of Cardiology</i> 2001; 87: 819-822	Non-UK generic populations not included in Q1.
Fonarow and Fonarow, Gregg C. Statin therapy after acute myocardial infarction: are we adequately treating high-risk patients?. [45 refs]. <i>Current Atherosclerosis Reports</i> 2002; 4(2): 99-106	Not relevant
Ford, Walker J, Game FL, Bartlett WA, Jones AF. Effect of computerized coronary heart disease risk assessment on the use of lipid-lowering therapy in general practice patients. <i>Coronary Health Care</i> 2001; . 5(1)	Not relevant.
Fort and McClellan, Linda. REACH-Meharry Community-Campus Partnership: Developing Culturally Competent Health Care Providers. <i>Journal of Health Care for the Poor and Underserved</i> 2006; 2: 78-87	No relevant outcomes
Fouad MN, Kiefe CI, Bartolucci AA, Burst NM, Ulene V, and Harvey MR. A hypertension control program tailored to unskilled and minority workers. <i>Ethnicity &amp; Disease</i> 1997; 7(3): 191-199	No relevant outcomes
Fox C. Heart disease and South Asians: delivering the National Service Framework for Coronary Heart Disease. 2004.	Best practice guide based on number on case studies (but no relevant outcomes). Reference list checked.
Foxton J, Nuttall M, and Riley J. Coronary heart disease: risk factor management. . <i>Nursing Standard</i> 2004; 19(13): 47-54	Not relevant - overview of CHD risk factors and their prevention
Francis SA, Barnett N, Denham M. Switching of prescription drugs to over-the-counter status: is it a good thing for the elderly?. <i>Drugs &amp; Aging</i> 2005; 22(5): 361-370	Not relevant
Freudenberg N, Silver, D, Carmona JM, Kass D, Lancaster B, Speers M. Health promotion in the city: a structured review of the literature on interventions to prevent heart disease, substance abuse, violence and HIV infection in US metropolitan areas, 1980-1995. [37 refs]. <i>Journal of Urban Health</i> 2000; 77(3): 443-457	Not relevant
Frich, JC, Malterud K, Fugelli P. Women at risk of coronary heart disease experience barriers to diagnosis and treatment: a qualitative interview study. <i>Scandinavian Journal of Primary Health Care</i>	Non-UK generic population not included in Q1

2006; 24(1): 38-43	
Friday. Antihypertensive medication compliance in African-American stroke patients: Behavioral epidemiology and interventions. <i>Neuroepidemiology</i> 1999; 18(5): 223-230	Not relevant - hypertension compliance only, non-UK and non-SR literature review
Friedman RH, Kazis LE, Jette A, Smith MB, Stollerman J, Torgerson J, and Carey K. A telecommunications system for monitoring and counseling patients with hypertension. Impact on medication adherence and blood pressure control. <i>American Journal of Hypertension</i> 1996; 9(4): 285-292	Not relevant - hypertension medication compliance.
Friedman RH, Stollerman J, Rozenblyum L, Belfer D, Selim A, Mahoney D, Steinbach S. A telecommunications system to manage patients with chronic disease. <i>Medinfo</i> 1998; 9(2): 1330-1334	Discussion of Friedman 1996 OUT - discussion of friedman 96 study already included
Froelicher, Berra K, Stepp C, Saxe J, and Deitrich CE. Risk profile screening. <i>Journal of Cardiovascular Nursing</i> 1995; 10(1): 30-50	Not relevant - risk factors only
Froelicher, Miller NH, Buzaitis A, Pfenninger P, et al. The Enhancing Recovery in Coronary Heart Disease Trial (ENRICHD): strategies and techniques for enhancing retention of patients with acute myocardial infarction and depression or social isolation. <i>Journal of Cardiopulmonary Rehabilitation</i> 2003; 23(4): 269-280	Not relevant - retention in a trial not in services/treatment
Fuat, Hungin, A. P. S., and Murphy, J. J. Barriers to accurate diagnosis and effective management of heart failure in primary care: qualitative study. <i>British Medical Journal</i> ; 2003; 326 (7382) 196 -201	Non-UK general population. Not included in Q1.
Gambling. A qualitative study into the informational needs of coronary heart disease patients. <i>Int J Health Promotion &amp; Education</i> 2003; 41(3)	Not relevant - No access, identifying, retention, compliance etc outcomes
Game FL, Jones AF. Coronary heart disease risk assessment in diabetes mellitus--a comparison of PROCAM and Framingham risk assessment functions. <i>Diabetic Medicine</i> 2001; 18(5): 355-359	Not relevant - risk assessment tool
Gascon, Sanchez-Ortuno M, Llor B et al. Treatment Compliance in Hypertension Study Group. Why hypertensive patients do not comply with the treatment: results from a qualitative study. <i>Family Practice</i> 2004; 21(2): 125-130	Hypertension medication compliance
Gazmararian, Kripalani S, Miller MJ, Echt KV, Ren J, Rask K. Factors associated with medication refill adherence in cardiovascular-related diseases: a focus on health literacy.. <i>Journal of General Internal Medicine</i> 2006; 21(12): 1215-1221	Not relevant - data analysis to look at factors associated with medication adherence
Gelberg L, Andersen RM, Leake BD. The Behavioral Model for Vulnerable Populations: application to medical care use and outcomes for	Not relevant - predicting what illnesses homeless people will seek medical care for. Not an

homeless people.. <i>Health Services Research</i> 2000; 34(6): 1273-1302	intervention, just observation of current situation
Gerber, Ben S., Brodsky, et al. Implementation and evaluation of a low-literacy diabetes education computer multimedia application. <i>Diabetes Care</i> 2005; 28(7): 1574-1580	No relevant outcomes
Gerber JC, Stewart DL. Prevention and control of hypertension and diabetes in an underserved population through community outreach and disease management: a plan of action. <i>Journal of the Association for Academic Minority Physicians</i> 1998; 9(3): 48-52	No outcomes - just discussion on the project & processes
Gettleman and Winkleby MA. Using focus groups to develop a heart disease prevention program for ethnically diverse, low-income women. <i>Journal of Community Health</i> 2000; 25(6): 439-453	No relevant outcomes
Gianakos and Singer, K. Lipid management in high-risk patients. <i>Patient Care</i> 2004; 38(11): 14, 57	Question and answer article on cholesterol management
Gianakos and Vaughan, C. J. Primary prevention of CHD. <i>Patient Care for the Nurse Practitioner</i> 2002; 3p.	Not relevant
Giles and Giles, Thomas D. Atherosclerotic cardiovascular disease: new approaches to risk assessment and intervention. Introduction. <i>American Journal of Medicine</i> 2002; 112 (8A): 1S-2S	Not relevant - discussion re lipid lowering therapy
Girvan BG. The influence of drug dosing interval on patient compliance with antihypertensive agents and the effect of non-compliance on blood pressure control. 2002;	Hypertension medication compliance only
Glick M. New guidelines for prevention, detection, evaluation and treatment of high blood pressure. <i>JADA</i> 1998; 129: 1588-1592	Discussion on how dentists treat patients with CHD based on new guidelines
Glick M. Screening for traditional risk factors for cardiovascular disease: a review for oral health care providers. <i>Journal of the American Dental Association</i> 2002; 133(3): 291-300	Non-UK generic population not included in Q1
Glick M, Greenberg, B L. The potential role of dentists in identifying patients' risk of experiencing coronary heart disease events. <i>Journal of the American Dental Association</i> 2005; 136(11): 1541-1546	Non-UK generic population not included in Q1
Gnani, Ellis C, Majeed A. Co-existing conditions and utilisation of health services associated with heart failure: general practice based study. General-practice-based study. <i>Health Statistics Quarterly</i> , 2001; no 12	Not relevant - current utilisation of general practice services in heart failure patients
Gotto, Jr. and Gotto AMJ. Lipid-lowering therapy for the primary prevention of coronary heart disease. <i>Journal of the American College of Cardiology</i>	Not relevant - discussion re effectiveness of low-dose statins and whether they should be made

1999; 33(7): 2078-2082	over the counter in America.
Gotto, Jr. and Gotto AMJ. Is it appropriate to make statins available over the counter? Over-the-counter statins are worth considering in primary prevention of cardiovascular disease. <i>Circulation</i> 2006; 114(12): 1310-1314	Not relevant - debate about whether to introduce in the US
Grace, Scholey P, Suskin N et al. A prospective comparison of cardiac rehabilitation enrollment following automatic vs usual referral. <i>Journal of Rehabilitation Medicine</i> 2007; 39(3): 239-245	Non-UK generic population not included in Q3
Graham, Kim S, James B, et al. Benefits of standardized diabetes and hypertension screening forms at community screening events. <i>Health Promotion Practice</i> 2006; 7(1): 26-33	No relevant outcomes
Graham and Graham, Helen. A conceptual map for studying long-term exercise adherence in a cardiac population. [51 refs]. <i>Rehabilitation Nursing</i> 2003; 28(3): 80-86	Not relevant - predictors of attendance
Granger, Moser D, Germino B, Harrell J, Ekman I. Caring for patients with chronic heart failure: The trajectory model. <i>European Journal of Cardiovascular Nursing</i> 2006; . 5(3)	Not relevant
Greene, McClellan L, Gardner T et al. Diabetes management among low-income African Americans: a description of a pilot strategy for empowerment. <i>Journal of Ambulatory Care Management</i> 2006; 29(2): 162-166	No relevant outcomes
Gregory, Bostock Y, Backett-Milburn K. Recovering from a Heart Attack: A Qualitative Study into Lay Experiences and the Struggle to Make Lifestyle Changes. <i>Family Practice</i> 2006; (2) 220-225	OUT after critical appraisal - compliance with lifestyle advice - not compliance to treatment / retention within services.
Grover SA. Lipid screening to prevent coronary artery disease: a quantitative evaluation of evolving guidelines. <i>CMAJ : Canadian Medical Association journal</i> ; 163(10): 1263-1269	Risk assessment tools
Grundy, Becker D, Clark LT, et al. Detection, evaluation, and treatment of high blood cholesterol in adults (Adult Treatment Panel III). <i>Circulation</i> 2002; 106(25): 17	Risk assessment tools
Grundy, Balady GJ, Criqui MH et al. Guide to primary prevention of cardiovascular diseases. A statement for healthcare professionals from the Task Force on Risk Reduction. American Heart Association Science Advisory and Coordinating Committee. <i>Circulation</i> 1997; 95(9): 2329-2331	Not relevant
Grundy. Primary prevention of cardiovascular disease in high-risk patients: Introduction. <i>American Journal of Medicine</i> 1999; 107(2 A): 23	summary of guidelines

Grundy and Grundy, S. M. Early detection of high cholesterol levels in young adults.. <i>JAMA</i> 2000; 284(3): 365-367	Not relevant - argues for early detection in young adults but not how
Grundy, Becker D, Clark LT. Detection, evaluation, and treatment of high blood cholesterol in adults (Adult Treatment Panel III). <i>Circulation</i> 2002; . 106(25): 17	Not relevant – non-UK generic populations not included in Q1
Guibert, Leduc N, Fournier P. What factors determine whether individuals found to have hypercholesterolaemia at mass screening accept advice to visit their physician. <i>Public Health</i> 1999; 113(3): 105-110	Determinants of patient characteristics accepting advice to see physician
Haelterman, Qvist R, Barlow P, Alexander, S. Social deprivation and poor access to care as risk factors for severe pre-eclampsia. <i>European Journal of Obstetrics, Gynecology, &amp; Reproductive Biology</i> 2003; 111(1): 10	Not relevant
Hanlon. Health checks and coronary risk; further evidence from a randomised controlled trial. <i>BMJ</i> 1995; 311: 1609-1613	Not relevant - Main focus of the study is the effect of health checks on risk reduction. 5 groups received varying degrees of the intervention (ie feedback, counselling etc). Whilst the % of participants at risk is reported, this is only for group4 and 5 (full intervention vs control) to examine the effect of the full intervention vs control on risk reduction. Manual workers.
Hanlon, Carey L, Tannahill C, Kelly M, Gilmour H, Tannahill A, McEwen J. Behaviour change following a workplace health check: How much change occurs and who changes? <i>Health Promotion International</i> 1998; 13(2): 131-139	Not relevant - no relevant outcomes - change in behaviour. Earlier paper Hanlon 1995 also checked.
Haq IU, Jackson PR, Yeo WW, Ramsay LE. Sheffield risk and treatment table for cholesterol lowering for primary prevention of coronary heart disease. <i>Lancet</i> 1995; 346(8988): 1467-1471	Risk assessment tools
Harmon, Lefante J, and Krousel-Wood M. Overcoming barriers: The role of providers in improving patient adherence to antihypertensive medications. <i>Current Opinion in Cardiology</i> 2006; 21(4): 310-315	Discussion paper – reference list checked
Harris, Record NB, Gilbert-Arcari J, Bunnell S, Record SS, Norton K. Cardiac rehabilitation with nurse care management and telephonic interactions at a community hospital: program evaluation of participation and lipid outcomes. <i>Lippincott's Case</i>	

<i>Management</i> 2003; 8(4): 141-157	Non-UK generic population not included in Q3
Harrison WN and Wardle SA. Factors affecting the uptake of cardiac rehabilitation services in a rural locality. <i>Public Health</i> 2005; 119(11): 1016-1022	Not a qualitative study assessing barriers/enablers
Harting, Van Assema P, van Limpt P, Gorgels T, Van Ree J, Ruland E, Vermeer F, de Vries NK. Cardiovascular prevention in the Harts slag Limburg project: Effects of a high-risk approach on behavioral risk factors in a general practice population. <i>Preventive Medicine: An International Journal Devoted to Practice and Theory</i> 2006; 43(5): 372-378	Not relevant
Harvey, Deal B, Fountain R, Hairston C, Hensarling J, Robinson T. Visible messenger model. <i>Journal of Multicultural Nursing &amp; Health</i> 2003; 9(2): 22-28	Blood pressure only measured to monitor effects of the mentoring
Haskell, Berra K, Arias E, Christopherson D, et al. Multifactor cardiovascular disease risk reduction in medically underserved, high-risk patients. <i>American Journal of Cardiology</i> 2006; 98(11): 1472-1479	Not relevant - risk behaviour reduction alone
He, Muntner P, Chen J et al. Factors associated with hypertension control in the general population of the United States. <i>Archives of Internal Medicine</i> 2002; 162(9): 1051-1058	Not relevant - analysis of factors associated with hypertension control
Headen, Masia NA. Effects of Medicaid Access Restrictions on Statin Utilisation for Patients Treated by Physicians Practising in Poor and Minority Neighbourhoods. . <i>Pharmacoeconomics</i> 2006; 24(3): 41-53	Not relevant
Hedges, Feldman HA, Bittner, et al. Impact of community intervention to reduce patient delay time on use of reperfusion therapy for acute myocardial infarction: rapid early action for coronary treatment (REACT) trial. REACT Study Group. <i>Academic Emergency Medicine</i> 2000; 7(8): 862-872	Non-UK generic population not included in Q3
Hellenius. Four years experience of a cardiovascular opportunistic screening and prevention programme in the primary health care in Sollentuna municipality, Sweden. <i>Scandinavian Journal of Primary Health Care</i> 1999; 17: 111-11518	Non-UK generic population not included in Q1
Hellenius, Johansson Jan, Krakau I, Nilsson P. Reduction of high cholesterol levels associated with younger age and longer education in a primary health care programme for cardiovascular prevention. <i>Scandinavian Journal of Primary Health Care</i> ; 23 (2) Jun 2005 2005; -81	Not relevant - predictors of compliance
Hemingway. Traditional health education to prevent coronary heart disease among low income women. <i>Nursing Standard</i> 2002; 2002 3 Apr. 16(29)	Not relevant

High Peak Citizens Advice Bureau. Healthy Living Network. GP Project Report For Surgeries at Chapel, Whaley Bridge, Hayfield, Fairfield & Stewart Medical Centre. (Advisor -Pam Jones)	
Hilleman DE, Faulkner MA, Monaghan MS. Cost of a pharmacist-directed intervention to increase treatment of hypercholesterolemia. [40 refs]. <i>Pharmacotherapy</i> 2004; 24(8): 1077-1083	Non-UK generic population not included in Q3
Hilton, Doherty S, Kendrick T, Kerry S, Rink E, Steptoe A. Promotion of healthy behaviour among adults at increased risk of coronary heart disease in general practice: methodology and baseline data from the Change of Heart study. <i>Health Education Journal</i> 1999; 58(1): 3-16	Methodology and baseline data only
Hippisley-Cox J and Pringle M. Inequalities in access to coronary angiography and revascularisation: the association of deprivation and location of primary care services. <i>British Journal of General Practice</i> 2000; 50(455): 449-454	Not relevant - data analysis of associations
Ho and Rumsfeld JS. Cardiac risk management in severe mental illness. <i>Lancet</i> 2006; . 367(9521): 06	Discussion – no relevant outcomes Ref list checked.
Hobbs. Primary prevention of cardiovascular disease: managing hypertension and hyperlipidaemia... includes discussion... Cardiovascular risk: a UK priority -- it's time to act II: proceedings of a meeting held at the Royal College of Physicians, 14 November 2003. <i>Heart</i> 2004; 90 Supplement IV: iv22-5.(15 ref)	Not relevant.
Holden S, Craig G. Engaging communities in the Hull/East Riding Health Action Zone: the role of community development in addressing health inequalities. 2002;27-37.	Not relevant - not about CHD.
Holly and Hendel, R. C. Preoperative risk assessment in patients with peripheral vascular disease referred for noncardiac surgery. <i>Cardiology in Review</i> 1998; . 6(1)	Not relevant - risk assessment procedures.
Hornsby, P. P., Reeve, R. H., Gwaltney, J. M. J., Parsons, B. D., and Morse, R. M. The University of Virginia health promotion and disease prevention program. <i>American Journal of Preventive Medicine</i> 1997; 13(1): 36-44	Non-UK generic population not included in Q1
Hoshuyama, Hino, Y., Kayashima, K., et al. Inequality in the health status of workers in small-scale enterprises. <i>Occupational Medicine (Oxford)</i> 2007; . 57(2)	Not relevant - analysis of routinely collected data to determine whether health was poorer in small scale enterprises compared to larger enterprises.
Houriham, Krass, I., and Chen, T. Rural community pharmacy: a feasible site for a health promotion and screening service for cardiovascular risk factors. <i>Australian Journal of Rural Health</i> 2003; 11(1): 28 -	Non-UK generic population not included in Q1

35	
Hunt JS. Impact of educational mailing on the blood pressure of primary care patients with mild hypertension. <i>Journal of General Internal Medicine</i> 2004; 19: 925-930	Hypertension medication compliance.
Huot. Effects of the Quebec Heart Health Demonstration Project on adult dietary behaviours. <i>Preventive Medicine</i> 2004; 38(2): 137-148	No relevant outcomes
Hutchison, Birch, S., Evans, C. E., Goldsmith, L. J., Markham, B. A., Frank, J., and Paterson, M. Screening for hypercholesterolaemia in primary care: randomised controlled trial of postal questionnaire appraising risk of coronary heart disease. <i>British Medical Journal</i> 1998; 316 (7139): 13	Non-UK generic population not included in Q1
Ikeda I, Hiroyasu T, Hideaki F et al. The relationships between interest for and participation in health screening and risk of mortality: The Japan Collaborative Cohort Study. . <i>Preventive Medicine: An International Journal Devoted to Practice and Theory</i> 2005; 41(3-4): 767-771	Not relevant - secondary analysis of whether associations with CHD/cancer mortality
Illyes, Mengden, T., Tisler, A., Illyes, Miklos, Mengden, Thomas, and Tisler, Andras. The virtual hypertension clinic. <i>Blood Pressure Monitoring</i> 2002; 7(1): 67-68	No relevant outcomes
Isles CG, Ritchie LD, Murchie P, and Norrie J. Risk assessment in primary prevention of coronary heart disease: randomised comparison of three scoring methods. <i>BMJ</i> 2000; 320(7236): 690-691	Risk assessment tools
Imperial Cancer Research Fund OXCHECK Study Group. Prevalence of risk factors for heart disease in OXCHECK trial: implications for screening in primary care. <i>British Medical Journal</i> 1991; 302: 600-660	Pre 1995
Imperial Cancer Research Fund OXCHECK Study Group. Effectiveness of health checks conducted by nurses in primary care: final results of the OXCHECK study. <i>BMJ</i> 1995; 310: 1099-1104	Non-UK general population. Not included in Q1.
Jacobs, Ammerman, A. S., Ennett, S. T et al. Effects of a tailored follow-up intervention on health behaviors, beliefs, and attitudes. <i>Journal of Women's Health</i> 2004; 13(5): 557-568	No relevant outcomes - only results of North Carolina WISEWOMAN and looks at lifestyle behaviour change
Jacobson, London, Health Observatory, and Aspinall, P. J. <i>Ethnic disparities in health and health care: a focused review of the evidence and selected examples of good practice</i> . 2004; London Health Observatory.	Gives examples of good practice but no effectiveness data. Send to review
Jilcott SB. Linking clinical care to community resources for cardiovascular disease prevention:	Not relevant - environmental factors which are barriers to

the North Carolina Enhanced WISEWOMAN project. <i>Journal of women's health</i> 2006; 15(5): 569-583	behaviour change
Jilcott, Macon, M. L., Rosamond, W. D., et al. Implementing the WISEWOMAN program in local health departments: staff attitudes, beliefs and perceived barriers. <i>Journal of Women's Health</i> 2004; 13(5): 598-606	No relevant outcomes
John, Vavra, T., Farris, K et al. Workplace-based cardiovascular risk management by community pharmacists: impact on blood pressure, lipid levels, and weight. <i>Pharmacotherapy</i> 2006; 26(10): 1511-1517	OUT after critical appraisal. This was a workplace cardiovascular risk reduction programme in patients identified from pharmacy screening. The methods of the screening to identify patients eligible for the programme are reported, but this is not part of the intervention. Cannot be deduced how many of all the people screened were identified with elevated cholesterol or blood pressure.
Johnell, Rastam, L., Lithman, T., Sundquist, J., Merlo, J. et al. Low adherence with antihypertensives in actual practice: the association with social participation--a multilevel analysis. <i>BMC Public Health</i> 2005; 5: 17	Not relevant - associations from data analysis
Johnson, Levey, AS., Coresh, J., Levin, A., Lau, J., and Eknayan, G. Clinical practice guidelines for chronic kidney disease in adults: Part I. Definition, disease stages, evaluation, treatment, and risk factors. <i>American Family Physician</i> 2004; 70(5): 01	Not relevant
Johnson. A clinic and community-based approach to hypertension control for an underserved minority population: Design and methods. <i>Clinical Cornerstone</i> 2004; 6(3)	commentary only on paper by Ward.
Johnston. Impact on Patients and Partners of Inpatient and Extended Cardiac Counseling and Rehabilitation: A Controlled Trial. <i>Psychosom Med</i> 1999; 61: 225-233	UK study unpicked from Dollard as potential study for access to services. Not relevant.
Jolliffe, Rees, K., Taylor, R. S., Thompson, D., Oldridge, N., Ebrahim, S., Jolliffe, J. A., Rees, K., Taylor, R. S., Thompson, D., Oldridge, N., and Ebrahim, S. Exercise-based rehabilitation for coronary heart disease <i>Cochrane Database of Systematic Reviews</i> 2000; (4)	Not relevant
Jolly Southampton Heart integrated care programme collaboratie group. randomised controlled trial of follow-up care in general practice of patients with myocardial infarction and angina: final results of the southampton heart integrated	Included in the systematic review by Beswick et al 2004

care project (SHIP). <i>BMJ</i> 1999; 318: 706-711	
Jolly. Home-based versus hospital-based cardiac rehabilitation after myocardial infarction or revascularisation: design and rationale of the Birmingham Rehabilitation Uptake Maximisation Study (BRUM): a randomised controlled trial <i>BMC Cardiovascular Disorders</i> 2003; .3, pp.10, 2003 Sep.	Study protocol only
Jolly, Lip, G. Y., Taylor, R. S., et al. Recruitment of ethnic minority patients to a cardiac rehabilitation trial: the Birmingham Rehabilitation Uptake Maximisation (BRUM) study [ISRCTN72884263]. <i>BMC Medical Research Methodology</i> 2005; 5(1): 18	Not relevant - recruitment to a trial
Jones, Collinson, M. A., Dove, J. R., Davies, D. H., and Brown, P. M. R. Identification and treatment of risk factors for coronary heart disease in general practice: a possible screening model. <i>British Medical Journal</i> ; 296 (18 Jun 88) p.1711-4 1988; 441-444	OUT - pre 95
Jones, Jones, D., Jones, Ian, and Jones, Diane. Overcoming barriers to better care. [17 refs]. <i>Professional Nurse</i> 2003; 18(11): 646-647	Not relevant - benefits of lipid lowering therapy
Junghans and Timmis, Adam D. Risk Assessment after Acute Coronary Syndrome. <i>BMJ (British Medical Journal)</i> 2006; no. 7578(pp. 1079-1080)	commentary on paper by Fox
Karlehagen, Ohlson, C. G., Karlehagen, Sigvard, and Ohlson, Carl Goran. Primary prevention of cardiovascular disease by an occupational health service. <i>Preventive Medicine</i> 2003; 37(3): 219-225	Not relevant
Karp, Abrahamowicz, M., Bartlett, G., Pilote, L., Karp, Igor. Updated risk factor values and the ability of the multivariable risk score to predict coronary heart disease. <i>American Journal of Epidemiology</i> 2004; 160(7): 707-716	Not relevant - risk assessment tool only
Kasiske, Malik, M. A., Herzog, C. A.,. Risk-stratified screening for ischemic heart disease in kidney transplant candidates. <i>Transplantation</i> 2005; 80(6): 815-820	Non-UK generic populations not included in Q1
Katurakes. Combining cancer screening assessment with heart risk and cholesterol testing. <i>Oncology Nursing Forum</i> 2006; 33(2): 413	conference abstract only.
Kedward and Dakin, Lorraine. A qualitative study of barriers to the use of statins and the implementation of coronary heart disease prevention in primary care. <i>British Journal of General Practice, London</i> 2003; 53(494): 684-689	Non-UK general population. Not included in Q1.
Kelley and Kelley, M. A. Triage and management of the pregnant hypertensive patient.. [77 refs]. <i>Journal of Nurse-Midwifery</i> 1999; 44(6): 558-571	Not relevant.
Ketola and Klockars, Matti. Computer-assisted	Non-UK generic population not

telephone interview (CATI) in primary care. <i>Family Practice</i> 1999; 16(2): 179-183	included in Q1.
Khavjou, Finkelstein, E. A., Will, J. C., Khavjou, Olga A., Finkelstein, Eric A., and Will, Julie C. The impact of medication use in a multicomponent intervention: results from the WISEWOMAN program. <i>American Journal of Health Promotion</i> 2007; 21(4 ): 267-273	Not relevant - focus is on impact of using medication on risk reduction.
Khunti and Samani, N. J. Improving the delivery of coronary care for ethnic minorities. <i>Heart</i> 2003; 89(5): 479-480	Not relevant
Kieltyka, Urbina, E. M., Tang, R., Bond, M. G., Srinivasan, S. R., Berenson, G. S. Framingham risk score is related to carotid artery intima-media thickness in both white and black young adults: the Bogalusa Heart Study. <i>Atherosclerosis</i> 2003; 170(1): 125-130	Not relevant - risk assessment tool
Kim, Koniak-Griffin, D., Flaskerud, J. H., Guarnero, P. A., Kim, Sue, Koniak-Griffin, Deborah, Flaskerud, Jacquelyn H., and Guarnero, Peter A. The impact of lay health advisors on cardiovascular health promotion: using a community-based participatory approach. <i>Journal of Cardiovascular Nursing</i> 2004; 19(3): 192-199	Not relevant
Kocer, Ince, Nurhan, Kocer, Emel, and Tasci, Atilla. Factors influencing treatment compliance among Turkish people at risk for stroke. . <i>Journal of Primary Prevention</i> 2006; 27(1): 81-89	Not relevant - associations
Kolasa. Summary of the sixth report of the Joint National Committee on Prevention, Detection, Evaluation and Treatment of High Blood Pressure (JNC VI). <i>Journal of Nutrition Education</i> 1998; 30(2): 114	Brief summary of guidelines
Kong. Community-based hypertension control programs that work. <i>Journal of Health Care for the Poor and Underserved</i> ; 8 (4) Nov 97 1997; -15	Non systematic literature review. Focuses on the authors 3 studies all of which are pre 1990
Kouidi, Fahadidou-Tsiligioglou, A., Tassoulas, E., Deligiannis, A., Coats, A., Kouidi, E., Fahadidou-Tsiligioglou, A., Tassoulas, E., Deligiannis, A., and Coats, A. White coat hypertension detected during screening of male adolescent athletes. <i>American Journal of Hypertension</i> 1999; 12(2 Pt 1): 223-226	Population less than 16
Krantz, Havranek, E. P., Mehler, P. S., Haynes, D. K., Long, C. S., Krantz, Mori J., Havranek, Edward P., Mehler, Philip S., Haynes, Deborah K., and Long, Carlin S. Impact of a cardiac risk reduction program in vulnerable patients hospitalized with coronary artery disease. <i>Pharmacotherapy</i> 2004; 24(6): 768-775	Not relevant
Krousel-Wood, Marie, Hyre, Amanda, Muntner,	Non systematic literature review.

Paul, and Morisky, Donald. Methods to improve medication adherence in patients with hypertension: current status and future directions. <i>Current Opinion in Cardiology</i> 2005; 20(4): 296-300	Relevant refs have been unpicked.
Kuhajda, Melissa C., Cornell, Carol E., Brownstein, J. Nell, Littleton, Mary Ann, Stalker, Varena G., Bittner, Vera A., Lewis, Cora E., and Raczynski, James M. Training community health workers to reduce health disparities in Alabama's Black Belt: the Pine Apple Heart Disease and Stroke Project. <i>Family &amp; Community Health</i> 2006; 29(2): 89-102	Not relevant
Kuhajda and Cornell, Carol E. Community Health Adviser (CHA) counseling to reduce Cardiovascular Disease (CVD) risk in women. . <i>Health Education &amp; Behavior</i> 2004; 31(4): 9S-10S	Not relevant.
Kumpusalo, Neittaanmaki, L., Halonen, P., and Pekkarinen, H. Finnish Healthy Village Study: impact and outcomes of a low-cost local health promotion programme. <i>Health Promotion International</i> ; 11 (2) Jun 96 1996; -15	Not relevant.
Kyngas and Lahdenpera, T. Compliance of patients with hypertension and associated factors. <i>Journal of Advanced Nursing</i> ; 29 (4) Apr 1999 1999; -9	Not relevant - data analysis resulting from questionnaires examining factors associated with compliance.
Lacey EA. Psychological morbidity after myocardial infarction in an area of deprivation in the UK: evaluation of a self-help package. <i>European journal of cardiovascular nursing : journal of the Working Group on Cardiovascular Nursing of the European Society of Cardiology</i> 2004; 3(3): 219-224	Not relevant.
Langham, Basnett, I., McCartney, P., Normand, C., Pickering, J., Sheers, D., Thorogood, M., Langham, Sue, Basnett, Ian, McCartney, Peter, Normand, Charles, Pickering, Julie, Sheers, Dilwyn, and Thorogood, Margaret. Addressing the inverse care law in cardiac services. <i>Journal of Public Health Medicine</i> 2003; 25(3): 202-207	Not relevant.
Lappalainen, Koikkalainen, M., Julkunen, J., Saarinen, T., Mykkanen, H., Lappalainen, R., Koikkalainen, M., Julkunen, J., Saarinen, T., and Mykkanen, H. Association of sociodemographic factors with barriers reported by patients receiving nutrition counseling as part of cardiac rehabilitation. <i>Journal of the American Dietetic Association</i> 1998; 98(9): 1026-1029	Not relevant - associations with barriers to healthy eating.
LaRosa, LaRosa, J. C., LaRosa, J. H., and LaRosa, J. C. Enhancing drug compliance in lipid-lowering treatment. [25 refs]. <i>Archives of Family Medicine</i> 2000; 9(10): 1169-1175	Not relevant - discussion paper about current compliance, and reasons for non-compliance. Does have a discussion on recommendations to improve

	compliance, but has not included studies of interventions to improve compliance. Reference list checked - no relevant studies.
Lenz. An interprofessional medication risk assessment program. <i>J Interprofessional Care</i> 2006; 2006 Oct. 20(5)	Not relevant - no relevant outcomes reported – mainly descriptive.
Leung, Ho, G. K., Foong, M., Ho, C. F., Lee, P. K., Mak, L. S., Leung, Cynthia M., Ho, Georgina K. H., Foong, Mary, Ho, C. F., Lee, Peter K. K., and Mak, Lucy S. P. Small-group hypertension health education programme: a process and outcome evaluation. <i>Journal of Advanced Nursing</i> 2005; 52(6): 631-639	Non-OECD.
Lindholm L, Rosen, M., Weinehall, L., Asplund, K.,. Cost effectiveness and equity of a community based cardiovascular disease prevention programme in Norsjo, Sweden. <i>Journal of Epidemiology &amp; Community Health</i> 1996; 50(2): 190-195	Not relevant.
Lindsey. First line of prevention: new screening device helps detect cardiovascular disease. <i>JEMS: Journal of Emergency Medical Services</i> 2005; 30(2): 92-93	Not relevant - screening procedure, not disadvantaged groups.
Lingfors, Lindstrom, Kjell, and Persson, Lars Goran. Lifestyle changes after a health dialogue: results from the Live for Life health promotion programme. <i>Scandinavian Journal of Primary Health Care; 21 (4) Dec 2003</i> 2003; -252	Not relevant.
Luepker, Raczynski, James M et al. Effect of a community intervention on patient delay and emergency medical service use in acute coronary heart disease: The Rapid Early Action for Coronary Treatment (REACT) trial. <i>JAMA: Journal of the American Medical Association</i> 2000; 284(1): 60-67	Non-UK generic population not included in Q3.
Maher, Sinfuego, J., Chao, P., Parekh, J. Primary prevention of coronary heart disease. What has WOSCOPS told us and what questions remain? West Of Scotland Coronary Prevention Study. <i>Drugs</i> 1997; 54(1): 1-8	Not relevant
Mahler. Effects of a videotape information intervention at discharge on diet and exercise compliance after coronary bypass surgery. <i>Journal of Cardiopulmonary Rehabilitation</i> 1999; 19: 170-177	Included in the systematic review by Beswick et al 2004
Maiman and Greenland, P. Improving referral compliance after public cholesterol screening. <i>American Journal of Public Health; 1992; 82: 994-999</i>	Pre 1995
Makin and Lip, G. Y. H. Lipid lowering therapy and coronary heart disease risk assessment in general	Not relevant - risk assessment tools

practice. <i>Coronary Health Care</i> 2001; 5(1)	
Mallion, Schmitt, D., Mallion, J. M., and Schmitt, D. Patient compliance in the treatment of arterial hypertension. [14 refs]. <i>Journal of Hypertension</i> 2001; 19(12): 2281-2283	Hypertension medication compliance only
Mangum, Kraenow, K. R., Narducci, W. A.. Identifying at-risk patients through community pharmacy-based hypertension and stroke prevention screening projects. <i>Journal of the American Pharmaceutical Association</i> 2003; 43(1): 50-55	Non-UK generic population not included in Q1
Marks, Wonderling, D., Thorogood, M., Lambert, H., Humphries, S. E., Neil, H. A.,. Screening for hypercholesterolaemia versus case finding for familial hypercholesterolaemia: a systematic review and cost-effectiveness analysis. [134 refs]. <i>Health Technology Assessment (Winchester, England)</i> 2000; 4(29): 1-123	Generic population only, not included in Q1.
Marquez-Contreras. Therapeutic compliance in dyslipidemia. A trial of efficacy of health education. <i>Atencion primaria / Sociedad Espanola de Medicina de Familia y Comunitaria</i> 1998; 22: 79-84	non-English language
Marquez-Contreras, Martell-Claros, N., Gil-Guillen, V., et al. Efficacy of a home blood pressure monitoring programme on therapeutic compliance in hypertension: the EAPACUM-HTA study. <i>Journal of Hypertension</i> 2006; 24(1): 169-175	Hypertension medication compliance only
Marquez Contreras E. [Trial of the efficacy of health education programs on therapeutic compliance in arterial hypertension]. <i>Atencion primaria</i> 1998; 21(4): 199-204	Foreign language.
Marquez Contreras E. [Treatment compliance in arterial hypertension. A 2-year intervention trial through health education]. <i>Atencion primaria</i> 2000; 26(1): 5-10	Foreign language.
Marquez, Vegazo, Garcia O., Claros, N.M et al. Efficacy of telephone and mail intervention in patient compliance with antihypertensive drugs in hypertension. ETECUM-HTA study. <i>Blood Pressure</i> 2005; 14(3): 151-158	Hypertension medication compliance only
Marshall T. Estimating the value of information in strategies for identifying patients at high risk of cardiovascular disease. <i>Informatics in primary care</i> 2006;	Risk assessment tools
Marshall, Malinovsky, V. E., Marshall, E. C., and Malinovsky, V. E. Hypertension and the eye: applications of the Sixth Report of the Joint National Committee on Prevention, Detection, Evaluation, and Treatment of High Blood Pressure. <i>Journal of</i>	Non-UK generic population not included in Q1

<i>the American Optometric Association</i> 1998; 69(5): 281-291	
Marshall, Rouse, A., Marshall, Tom, and Rouse, Andrew. Resource implications and health benefits of primary prevention strategies for cardiovascular disease in people aged 30 to 74: mathematical modelling study. <i>BMJ</i> 2002; 325(7357): 197	Risk assessment tools & generic population only.
Marshall and Rouse, A. Primary care. Resource implications and health benefits of primary prevention strategies for cardiovascular disease in people aged 30 to 74: mathematical modelling study. <i>BMJ</i> 2002; 325(7357): 197-199	Risk assessment tools & generic population only.
Marshall and Marshall, Tom. The cost-effectiveness of drug treatments for primary prevention of cardiovascular disease: a modelling study. <i>European Journal of Cardiovascular Prevention &amp; Rehabilitation</i> 2006; 13(4): 523-528	Not relevant.
Marshall, Bryan, S., Gill, P., et al. Predictors of patients' preferences for treatments to prevent heart disease. <i>Heart</i> 2006; 92(11): 1651-1655	Not relevant.
Mays, Hesketh, H. A., Ammerman, A. S., Stockmyer, C. K., Johnson, T. L., Bayne-Smith, M. Integrating preventive health services within community health centers: lessons from WISEWOMAN. <i>Journal of Women's Health</i> 2004; 13(5): 607-615	No relevant outcomes.
McGraw and McGraw, Caroline. Multi-compartment medication devices and patient compliance. [22 refs]. <i>British Journal of Community Nursing</i> 2004; 9(7): 285-290	No outcomes for CHD patients / lipid lowering therapy.
McMahon, Kelleher, C. C., Helly, G., and Duffy, E. Evaluation of a workplace cardiovascular health promotion programme in the Republic of Ireland. <i>Health Promotion International</i> ; 17 (4) Dec 2002 2002; -308	Not relevant - no relevant outcomes
McMorrin. Are you Up for It? <i>Primary Health Care</i> 2004; 2004 Jun. 14(5)	No CHD related outcomes. Unclear if disadvantaged populations.
Meer H. Coronary heart disease health improvement programme. Final report. 1999 BHHA-DPH-PHRR-120:67.	No relevant outcomes – not an evaluation.
Meininger, Liehr, P., Mueller, W. H., Chan, W., and Chandler, P. S. Predictors of ambulatory blood pressure: identification of high-risk adolescents. <i>Advances in Nursing Science</i> 1998; 20(3): 50-64	Population less than 16 years old.
Milne, Bradley J, Cooper C, de Swiet M et al. The pre-eclampsia community guideline (PRECOG): how to screen for and detect onset of pre-eclampsia in the community. <i>British Medical Journal</i> : 2005; 330 (7491) 580	Not relevant - risk assessment procedure

Minhas. CHD Care for ethnic groups. <i>General Practitioner</i> , 2002; 30-31	No outcomes are reported.
Missik. Women and cardiac rehabilitation: accessibility issues and policy recommendations. <i>Rehabilitation Nursing</i> 2001; 26(4): 141-147	Not relevant. predictors of attendance.
Mitka. Researchers explore tools to identify individuals at risk for heart disease. <i>JAMA: Journal of the American Medical Association</i> 2005; 293(21): 2582-2583	Not relevant - risk assessment tools
Moher. Cluster randomised controlled trial to compare three methods of promoting secondary prevention of coronary heart disease in primary care. <i>BMJ</i> 2001; 322: 1338-1344	UK generic populations not included in Q1.
Mohiddin. Sharing specialist skills for diabetes in an inner city: a comparison of two primary care organisations over 4 years. <i>J Evaluation in Clinical Practice</i> 2006; 2006 Oct. 12(5)	Not relevant
Montgomery. A systematic review of the use of computers in the management of hypertension. <i>Journal of Epidemiology &amp; Community Health</i> 1998; 52: 520-525	Hypertension medication compliance only
Montgomery, Fahey, T., Peters, T. J., MacIntosh, C., Sharp, D. J., Montgomery, A. A., Fahey, T., Peters, T. J., MacIntosh, C., and Sharp, D. J. Evaluation of computer based clinical decision support system and risk chart for management of hypertension in primary care: randomised controlled trial.. <i>BMJ</i> 2000; 320(7236): 686-690	Not relevant
Morey and Morey, S. S. AHA and ACC outline approaches to coronary disease risk assessment. <i>American Family Physician</i> 2541; 61(8): 2534-2538	Brief summary of guidelines on risk assessment
Mouton, Beaudouin, R., Troutman, A., and Johnson, M. S. Barriers to follow-up of hypertensive patients. <i>Journal of Health Care for the Poor and Underserved</i> ; 12 (3) Aug 2001 2001; 12(3): -301	Non-UK generic population not included in Q3
Muller, Kaufmann, P. G., Luepker, R. V., Weisfeldt, M. L., Deedwania, P. C., and Willerson, J. T. Mechanisms precipitating acute cardiac events: Review and recommendations of an NHLBI workshop. <i>Circulation</i> 1997; . 96(9)	Not relevant
Naghavi, Falk, E., Hecht, H. S., and Shah, P. K. The First SHAPE (Screening for Heart Attack Prevention and Education) guideline. <i>Critical Pathways in Cardiology: A Journal of Evidence-Based Medicine</i> 2006; . 5(4)	Summary of guideline (see below)
Naghavi, Falk, E., Hecht, H. S., et al,. From vulnerable plaque to vulnerable patient--Part III: Executive summary of the Screening for Heart Attack Prevention and Education (SHAPE) Task Force report. [125 refs]. <i>American Journal of</i>	Generic populations not included in Q1.

<i>Cardiology</i> 2006; 98(2A): 2H-15H	
Nally, Jr. and Nally, J. V. J. Cardiovascular disease in renal failure: risk assessment, screening, treatment. <i>Cleveland Clinic Journal of Medicine</i> 1996; 63(3): 138-140	Not relevant
National Cholesterol Education Program (NCEP) Expert Panel on Detection and National Cholesterol Education Program (NCEP) Expert Panel on Detection, Evaluation and Treatment of High Blood Cholesterol in Adults Adult Treatment Panel III. Third Report of the National Cholesterol Education Program (NCEP) Expert Panel on Detection, Evaluation, and Treatment of High Blood Cholesterol in Adults (Adult Treatment Panel III) final report.. <i>Circulation</i> 2002; 106(25): 3143-3421	Not relevant - risk assessment procedure and tools, not disadvantaged groups
Naylor, Paterson, J. M., Naylor, C. D., and Paterson, J. M. Cholesterol policy and the primary prevention of coronary disease: reflections on clinical and population strategies. [188 refs]. <i>Annual Review of Nutrition</i> 1996; 16: 349-382	Not relevant. Non systematic review of literature on cholesterol lowering activities. Reference list checked buy info on identifying but all pre 1995.
Naylor. Evaluating the participatory process in a community-based heart health project. <i>Social Science &amp; Medicine</i> 2002; 2002 Sep. 55(7)	Not relevant
Neal, Demerath, E., Gonzales, E., Spangler, E., Minor, V. E., Stollings, R., Islam, S., Neal, W. A., Demerath, E., Gonzales, E., Spangler, E., Minor, V. E., Stollings, R., and Islam, S. Coronary Artery Risk Detection in Appalachian Communities (CARDIAC): preliminary findings. <i>West Virginia Medical Journal</i> 2001; 97(2): 102-105	Population less than 16 years old.
Newell, Bowman, J. A., Cockburn, J. D., Newell, S. A., Bowman, J. A., and Cockburn, J. D. A critical review of interventions to increase compliance with medication-taking, obtaining medication refills, and appointment-keeping in the treatment of cardiovascular disease. [51 refs]. <i>Preventive Medicine</i> 1999; 29(6 Pt 1 ): 535-548	Hypertension medication compliance only
Newell, Bowman, J. A., Cockburn, J. D., Newell, S. A., Bowman, J. A., and Cockburn, J. D. Can compliance with nonpharmacologic treatments for cardiovascular disease be improved?. [41 refs]. <i>American Journal of Preventive Medicine</i> 2000; 18(3): 253-261	Not service retention, adherence to prescribed treatments.
Nguyen, Tenner, T. E., Jenkins, L. A., Hansen, H. A., Lutherer, L. O., Nguyen, H. X., Tenner, T. E., Jenkins, L. A., Hansen, H. Andrew, and Lutherer, L. O. A citywide evaluation of identification of risk factors for cardiovascular disease in emergency department patients complaining of chest pain. <i>Texas Medicine</i> 2002; 98(3): 82-88	Not relevant.

Nielsen, Dyhr, Lise, Lauritzen, Torsten, and Malterud, Kirsti. Long-Term Impact of Elevated Cardiovascular Risk Detected by Screening. A Qualitative Interview Study. <i>Scandinavian Journal of Primary Health Care</i> 2005; no. 4(pp. 233-238)	Not relevant - qualitative study reporting the impact on patients who were told they had elevated cardiovascular risk. In terms of lifestyle changes & anxiety. Not testing intervention to identify patients.
Nine, Lakies, C. L., Jarrett, H. K., Davis, B. A., Nine, Susan L., Lakies, Charlotte L., Jarrett, Helen Kay, and Davis, Barbara A. Community-based chronic disease management program for African Americans. <i>Outcomes Management</i> 2003; 7(3): 106-112	Not relevant.
Nola, Gourley, D. R., Portner, T. S., Gourley, G. K., Solomon, D. K., Elam, M., Regel, B., Nola, K. M., Gourley, D. R., Portner, T. S., Gourley, G. K., Solomon, D. K., Elam, M., and Regel, B. Clinical and humanistic outcomes of a lipid management program in the community pharmacy setting.[erratum appears in J Am Pharm Assoc (Wash). 2000 Sep-Oct;40(5):583]. <i>Journal of the American Pharmaceutical Association</i> 2000; 40(2): 166-173	Non-UK generic population not included in Q1
North. Healthy hearts. <i>Practice Nurse</i> 1999; 22(7)	UK generic populations not included in Q1.
Nuttall. An introduction to risk assessment and prevention in coronary heart disease. <i>Br J Cardiac Nursing</i> 2006; 2006 Jan. 1(1)	No relevant outcomes
O'Loughlin, Paradis, G., Gray-Donald, K., Renaud, L., O'Loughlin, J. L., Paradis, G., Gray-Donald, K., and Renaud, L. The impact of a community-based heart disease prevention program in a low-income, inner-city neighborhood. <i>American Journal of Public Health</i> 1999; 89(12): 1819-1826	Out following critical appraisal. The study reports results on the wider community-based heart disease prevention program. This study does report awareness of screening sessions and participation -but references the other O'Loughlin paper already included. It is unclear whether the screening programme in this paper is the same as O'Loughlin 96 as it describes them as being held during sidewalk sales, but references the study which was conducted at schools. No other information or outcomes are provided for screening so this is excluded on basis of relevance.
Office-of-the-Deputy-Prime-Minister, Department-of-Health. Creating healthier communities: a resource pack for local partnerships. 2005.	Not relevant.
Ofili, Igbo-Pemu, P., Bransford, T., Ofili, E., Igbo-	Not relevant.

Pemu, P., and Bransford, T. The prevention of cardiovascular disease in blacks. [38 refs]. <i>Current Opinion in Cardiology</i> 1999; 14(2): 169-175	
Ogedegbe. Barriers and facilitators of medication adherence in hypertensive African Americans: a qualitative study. <i>Ethnicity &amp; Disease</i> 2004; 14: 3-12	Hypertension compliance only.
op Reimer. Cardiovascular risk estimation by professionally active cardiovascular nurses: results from the Basel 2005 Nurses Cohort. <i>European J Cardiovascular Nursing</i> 2006; December 2006. 10(12)	Not relevant.
Ott and Ott, W. J. The accuracy of antenatal fetal echocardiography screening in high- and low-risk patients. <i>American Journal of Obstetrics &amp; Gynecology</i> 1995; 172(6): 1741-1747	Population less than 16 years old.
Paradis, O, ' , L, O, u, g, h, L, i, and n O'Loughlin, J. Coueur en sante St-Henri - a health health programme in Montreal Canada: design and methods for evaluation. <i>J Epidemiol Community Health</i> 1995; 49(495): 502	No relevant outcomes.
Parkes and et, al. Inequity of use of implantable cardioverter defibrillators in England: retrospective analysis. <i>BMJ</i> 2005; 330 (7489): 454-455 (26 #February 2005) 2005;	Not relevant.
Parra-Medina, Wilcox, S., Thompson-Robinson, M., Sargent, R., Will, J. C., Parra-Medina, Deborah, Wilcox, Sara, Thompson-Robinson, Melva, Sargent, Roger, and Will, Julie C. A replicable process for redesigning ethnically relevant educational materials. <i>Journal of Women's Health</i> 2004; 13(5): 579-588	Not relevant - no eligible outcomes.
Pasternak. 2001 National Cholesterol Education Program (NCEP) guidelines on the detection, evaluation and treatment of elevated cholesterol in adults: Adult treatment panel III (ATP III). <i>ACC Current Journal Review</i> 2002; 11(4)	Risk assessment tools
Patton, Meyers, J., Lewis, B. E., Patton, K., Meyers, J., and Lewis, B. E. Enhancement of compliance among patients with hypertension. <i>American Journal of Managed Care</i> 1997; 3(11): 1693-1698	Hypertension medication compliance only.
Pelletier. Heart health promotion: a community development experiment in a rural area of Quebec, Canada. <i>Health Promotion Int</i> 1997; 1997 Dec. 12(4)	Not relevant - no relevant outcomes.
Perez-Stable, Salazar, R., Perez-Stable, Eliseo J., and Salazar, Rene. Issues in achieving compliance with antihypertensive treatment in the Latino population. <i>Clinical Cornerstone</i> 2004; 6(3): 49-61	Not relevant - hypertensive compliance only.
Pescatello, Murphy, D., Vollono, J., Lynch, E.,	Main outcomes are the

<p>Bernene, J., and Costanzo, D. The cardiovascular health impact of an incentive worksite health promotion program. <i>American Journal of Health Promotion</i>; 2001; 16(1)-20</p>	<p>cardiovascular benefits of the programme. It doesn't report how many were identified - just the means of different health outcomes. Whilst the number of CHAPplus people represent the number who sought formal exercise, smoking cessation or cardiac rehabilitations - results are not presented separately - so it doesn't provide information on % identified at risk / took part in cardiac services.</p>
<p>Peters and Jackson, Margot. Accessibility and use of touchscreens by black and ethnic minority groups in the Three Cities Project. <i>Ethnicity &amp; Health</i>; 10 (3) Aug 2005 2005; -211</p>	<p>Not relevant - just use of information kiosks.</p>
<p>Petrella, Speechley, M., Kleinstiver, P. W., Ruddy, T., Petrella, Robert J. Impact of a social marketing media campaign on public awareness of hypertension. <i>American Journal of Hypertension</i> 2005; 18( 2): 270-275</p>	<p>Non-UK generic population not included in Q3.</p>
<p>Petrilla, Benner, J. S., Battleman, D. S., Tierce, J. C., Hazard, E. H., Petrilla, A. A., Benner, J. S., Battleman, D. S., Tierce, J. C., and Hazard, E. H. Evidence-based interventions to improve patient compliance with antihypertensive and lipid-lowering medications. [70 refs]. <i>International Journal of Clinical Practice</i> 2005; 59(12): 1441-1451</p>	<p>Doesn't meet SR quality and most included studies don't meet criteria</p>
<p>Philis-Tsimikas, Walker, C., Philis-Tsimikas, A., and Walker, C. Improved care for diabetes in underserved populations. <i>Journal of Ambulatory Care Management</i> 2001; 24(1): 39-43</p>	<p>Not relevant</p>
<p>Piper. The limitations of well men clinics for health education. <i>Nursing Standard</i> 1997; 11(30): 47-49</p>	<p>Non systematic review, reference list checked.</p>
<p>Plans-Rubio. Management of pharmaceutical resources for the primary prevention of coronary heart disease in Catalonia (Spain) based on efficiency and equity. <i>Disease Management &amp; Health Outcomes</i> 2001; . 9(9)</p>	<p>No relevant outcomes.</p>
<p>Poduri, Grisso, J. A., Poduri, A., and Grisso, J. A. Cardiovascular risk factors in economically disadvantaged women: a study of prevalence and awareness. <i>Journal of the National Medical Association</i> 1998; 90(9): 531-536</p>	<p>No relevant outcomes.</p>
<p>Power-Kean. A stitch in time: women and heart health quilt project. <i>Canadian Nurse</i> 2001; 2001 Jun. 97(6)</p>	<p>No relevant outcomes.</p>
<p>Pratt, Ha, Louisa, Levine, Steven R., and Pratt, Cornelius B. Stroke Knowledge and Barriers to</p>	<p>Not relevant.</p>

Stroke Prevention Among African Americans: Implications for Health Communication. . <i>Journal of Health Communication</i> 2003; 8(4): 369-381	
Price and Cooper, L. A. Hypertension in African Americans: Strategies to help achieve blood pressure goals. <i>Consultant</i> 2003; 43(11): 15	Non systematic literature review. Reference list checked.
Price. The Heartbeat Challenge programme: promoting healthy changes in New Zealand workplaces. <i>Health Promotion Int</i> 2000; 2000 Mar. 15(1)	Not relevant.
Rader and Meagher, E. Lipid lowering drug therapy in primary prevention: Who should be treated? <i>Preventive Cardiology</i> 1999; . 2(3)	Not relevant.
Rahimi, Spertus, J. A., Reid, K. J., Bernheim, S. M., Krumholz, H. M., Rahimi, Ali R., Spertus, John A., Reid, Kimberly J., Bernheim, Susannah M., and Krumholz, Harlan M. Financial barriers to health care and outcomes after acute myocardial infarction. <i>JAMA</i> 2007; 297(10): 1063-1072	Not UK qualitative data on barriers/facilitators.
Ramsay, Haq, I. U., Jackson, P. R., Yeo, W. W., Pickin, D. M., Payne, J. N., Ramsay, L. E., Haq, I. U., Jackson, P. R., Yeo, W. W., Pickin, D. M., and Payne, J. N. Targeting lipid-lowering drug therapy for primary prevention of coronary disease: an updated Sheffield table.[erratum appears in <i>Lancet</i> . 1996 Nov 2;348(9036):1251; PMID: 8898071]. <i>Lancet</i> 1996; 348(9024): 387-388	Not relevant - risk assessment tools
Rankin, Butzlaff, A., Carroll, D. L., Reedy, I., Rankin, Sally H., Butzlaff, Alice, Carroll, Diane L., and Reedy, Imelda. FAMISHED for support: recovering elders after cardiac events. <i>Clinical Nurse Specialist</i> 2005; 19(3): 142-149	No relevant outcomes.
Rashid and Rashid, Shiry. Should cholesterol-lowering medications be available in Canada without a prescription?. [26 refs]. <i>Canadian Journal of Cardiology</i> 2007; 23(3): 189-193	Not relevant.
Rawaf S, Bahl V. Assessing health needs of people from minority ethnic groups. 1998.	No relevant outcomes.
Ray, P., Murphy, G. J., and Shutt, L. E. Recognition and management of maternal cardiac disease in pregnancy. [106 refs]. <i>British Journal of Anaesthesia</i> 2004; 93(3): 428-439	Non systematic literature review, references checked.
Record, Harris, D. E., Record, S. S et al. Mortality impact of an integrated community cardiovascular health program. <i>American Journal of Preventive Medicine</i> 2000; 19(1): 30-38	Non-UK generic population not included in Q1
Redberg, Greenland, P., Fuster, V., Pyorala, K., Blair, S. N., Folsom, A. R., Newman, A. B., O'Leary, D. H., Orchard, T. J., Psaty, B., Schwartz, J. S., Starke, R., Wilson, P. W. Prevention Conference VI:	Conference abstract only

Diabetes and Cardiovascular Disease: Writing Group III: risk assessment in persons with diabetes. <i>Circulation</i> 2002; 105(18): e144-e152	
Redfern, Ellis, E. R., Briffa, T., Freedman, S. B. High risk-factor level and low risk-factor knowledge in patients not accessing cardiac rehabilitation after acute coronary syndrome. <i>Medical Journal of Australia</i> 2007; 186(1): 21-25	Not relevant.
Reid C, McNeil JJ, Williams F. Cardiovascular risk reduction: a randomized trial of two health promotion strategies for lowering risk in a community with low socioeconomic status. <i>Journal of Cardiovascular Risk</i> 2(2) 155-163	Identification of people at risk was not part of the intervention, just to find people eligible for an RCT. Methods of identification not fully reported.
Ren, Kazis, L. E., Lee, A., Zhang, H., Miller, D. R. Identifying patient and physician characteristics that affect compliance with antihypertensive medications. <i>Journal of Clinical Pharmacy &amp; Therapeutics</i> 2002; 27(1): 47-56	Not relevant.
Rhodes, Lauderdale, D. S., Stocking, C. B., Howes, D. S., Roizen, M. F., Levinson, W. Better health while you wait: a controlled trial of a computer-based intervention for screening and health promotion in the emergency department. <i>Annals of Emergency Medicine</i> 2001; 37(3): 284-291	non UK generic populations not included in Q1.
Rich-Edwards, Manson, J. E., Hennekens, C. H., et al. The primary prevention of coronary heart disease in women. <i>New England Journal of Medicine</i> 1995; 332(26): 1758-1766	Population less than 16 yrs old.
Rich, Gray, D. B., Beckham, V., et al. Effect of a multidisciplinary intervention on medication compliance in elderly patients with congestive heart failure. <i>American Journal of Medicine</i> 1996; 101(3): 270-276	Not relevant.
Riesen, Darioli, R., Noll, G. Lipid-lowering therapy: strategies for improving compliance. [84 refs]. <i>Current Medical Research &amp; Opinion</i> 2004; 20(2): 165-173	Non systematic literature review. References checked.
Rimmer, Silverman, K., Braunschweig, C., Quinn, L., Liu, Y. Feasibility of a health promotion intervention for a group of predominantly African American women with type 2 diabetes. <i>Diabetes Educator</i> 2002; 28(4): 571-580	Not relevant.
Robinson. A novel telephone system for management of secondary prevention to a low density lipoprotein cholesterol < or =100mg. <i>Am J Cardiol</i> 2000; 85: 305-308	Doesn't measure compliance with statins (just compliance with the intervention under investigation).
Rollins and Rollins, Gina. Nurse practitioners improve risk factor management for patients with	SUMMARY OF paper by Allen (American Heart Journal) 2002.

coronary heart disease. <i>Report on Medical Guidelines &amp; Outcomes Research</i> 2002; 13( 22): 9-10	Obtained full text
Ronda. The Dutch Heart Health community intervention 'Hartslag Limburg': results of an effect study at individual level. <i>Health Promotion Int</i> 2004; 2004 Mar. 19(1)	Not relevant - interventions to promote healthier lifestyle
Rose, Kim, M. T., Dennison, C. R., Hill, M. N., Rose, L. E., Kim, M. T., Dennison, C. R., and Hill, M. N. The contexts of adherence for African Americans with high blood pressure. <i>Journal of Advanced Nursing</i> 2000; 32(3): 587-594	Hypertension medication compliance only
Ross, Manuszak, M. A., Wachs, J. E., Ross, Joyce L., Manuszak, Margaret A., and Wachs, Joy E. Identification and management of vascular risk: beyond low density lipoprotein cholesterol. [66 refs]. <i>AAOHN Journal</i> 2003; 51(12): 521-531	Not relevant – non SR lit review discussing risk factors and tests to measure risk factors (e.g. c-reactive protein).
Ross, M. G., Downey, C. A., Bemis-Heys, R., Nguyen, M., Jacques, D. L., and Stanziano, G. Prediction by maternal risk factors of neonatal intensive care admissions: evaluation of >59,000 women in national managed care programs. <i>American Journal of Obstetrics &amp; Gynecology</i> 1999; 181(4): 835-842	Not relevant.
Roter, Hall, J. A., Merisca, R., Nordstrom, B., Cretin, D., Svarstad, B., Roter, D. L., Hall, J. A., Merisca, R., Nordstrom, B., Cretin, D., and Svarstad, B. Effectiveness of interventions to improve patient compliance: a meta-analysis. <i>Medical Care</i> 1998; 36(8): 1138-1161	Not relevant - not specific to CHD (all groups included). Does include some studies on compliance with hypertensives, but this is not relevant for this guidance, and the papers are pre 1995.
Rubinstein and Rubinstein, A. National Cholesterol Education Program, second report of the Expert Panel on detection, evaluation, and treatment of high blood cholesterol in adults. <i>Circulation</i> 1995; 91(3): 908-909	letter in response to new guidelines
Ruoff. Evidence-based cardiovascular disease prevention: Challenges to assessing risk in office practice. <i>Consultant</i> 2005; . 45(13)	Not relevant.
Rutten FH and et, al. Is treatment of atrial fibrillation in primary care based on thromboembolic risk assessment? <i>Family Practice; 20 (1) Feb</i> 2003; -21	Not relevant
Rybacki and Rybacki, James Joseph. Improving cardiovascular health in postmenopausal women by addressing medication adherence issues. [65 refs]. <i>Journal of the American Pharmaceutical Association</i> 2002; 42(1): 63-71	Non systematic literature review – reference list checked.
Saounatsou, Patsi, O., Fasoi, G., Stylianou, M., Kavga, A., Economou, O., Mandi, P., and Nicolaou,	Hypertension medication compliance only

M. The influence of the hypertensive patient's education in compliance with their medication. <i>Public Health Nursing</i> 2001; 18(6): 436-442	
Savader, Ehrman, K. O., Porter, D. J., Wilson, L. D., Oteham, A. C.. The Legs For Life Screening for Peripheral Vascular Disease: results of a prospective study designed to improve patient compliance with physician recommendations. <i>Journal of Vascular &amp; Interventional Radiology</i> 2001; 12(10): 1149-1155	Non-UK generic population not included in Q1
Schlundt, Mushi, C., Larson, C. O., Marrs, M.,. Use of innovative technologies in the evaluation of Nashville's REACH 2010 community action plan: reducing disparities in cardiovascular disease and diabetes in the African American community. <i>Journal of Ambulatory Care Management</i> 2001; 24(3): 51-60	Not relevant
Schmermund, Mohlenkamp, S., Stang, A., et al. Assessment of clinically silent atherosclerotic disease and established and novel risk factors for predicting myocardial infarction and cardiac death in healthy middle-aged subjects: Rationale and design of the Heinz Nixdorf RECALL study. <i>American Heart Journal</i> 2002; . 144(2)	Not relevant and methodology only
Schmidt, Lauter, J., Schmidt, Ralf, and Lauter, Josef. MyHeart: fighting cardio-vascular diseases by preventive lifestyle and early diagnosis. <i>Studies in Health Technology &amp; Informatics</i> 2005; 117: 51-59	Not relevant -not an evaluation just description of the project
Schroeder K. How can we improve adherence to blood pressure-lowering medication in ambulatory care? <i>Archives of Internal Medicine</i> 2004; 164(722): 732	Hypertension medication compliance only
Schroeder, Hollinghurst, Sandra, Peters, Tim J., and Schroeder, Knut. Nurse-led adherence support in hypertension: a randomized controlled trial. <i>Family Practice</i> ; 22 (2) Apr 2005 2005; -151	Hypertension medication compliance only
Schultz, O'Donnell, J. C., McDonough, K. L et al. Determinants of compliance with statin therapy and low-density lipoprotein cholesterol goal attainment in a managed care population. <i>American Journal of Managed Care</i> 2005; 11(5): 306-312	Not relevant.
Schuster and Schuster, H. Improving lipid management--to titrate, combine or switch. [55 refs]. <i>International Journal of Clinical Practice</i> 2004b 2004; 58(7): 689-694	Not relevant - treatment
Schwarz and Elman, C. S. Identification of factors predictive of hospital readmissions for patients with heart failure. <i>Heart &amp; Lung</i> 2003; 32(2): 88-99	summary of JNC guidelines
Schwed. Electronic monitoring of compliance to lipid-lowering therapy in clinical practice. <i>Journal of</i>	Not testing effectiveness of an intervention to improve

<i>Clinical Pharmacology</i> 1999; 39: 402-409	compliance, but to monitor it.
Sellers. Understanding the variability in the effectiveness of community heart health programmes: a meta-analysis. <i>Social Science &amp; Medicine</i> 1997; 1997 May. 44(9)	Not relevant
Shaffer. Reducing low-density lipoprotein cholesterol levels in an ambulatory care system. Results of a multidisciplinary collaborative practice lipid clinic compared with traditional physician-based care see comments. <i>Archives of Internal Medicine</i> 1995; 155(21): 2330	Not relevant.
Shaw, Blumenthal, R. S., Raggi, P. Screening asymptomatic low-risk individuals for coronary heart disease: issues and controversies. <i>Journal of Nuclear Cardiology</i> 2004; 11(4): 382-387	Non systematic literature review. Reference list checked.
Shea, Starren, J., Weinstock, R. S., et al. Columbia University's Informatics for Diabetes Education and Telemedicine (IDEATel) Project: rationale and design.. <i>Journal of the American Medical Informatics Association</i> 2002; 9(1): 49-62	Protocol, no results yet
Shea, Weinstock, R. S., Starren, J., et al. A randomized trial comparing telemedicine case management with usual care in older, ethnically diverse, medically underserved patients with diabetes mellitus. <i>Journal of the American Medical Informatics Association</i> 2006; 13(1): 40-51	Not relevant.
Shephard, Mazzachi, B. C., Shephard, A. K., McLaughlin, K. J., Denner, B., Barnes, G. The impact of point of care testing on diabetes services along Victoria's Mallee Track: results of a community-based diabetes risk assessment and management program. <i>Rural &amp; Remote Health</i> 2005; 5(3 ): 371-Sep	Non-UK generic population not included in Q1
Shepherd, Battye, K., Chalmers, E., Shepherd, Frank, Battye, Kristine, and Chalmers, Elizabeth. Improving access to cardiac rehabilitation for remote Indigenous clients. <i>Australian &amp; New Zealand Journal of Public Health</i> 2003; 27(6): 632-636	Non-UK generic populations not included in Q3.
Shepherd, Cobbe, S. M., Lorimer, A. R., and McKillop, J. H. West of Scotland Coronary Prevention Study: identification of high-risk groups and comparison with other cardiovascular intervention trials. <i>Lancet</i> ; 16 Nov 96 96 A.D.; -42	Not relevant.
Shepherd. Identifying patients at risk for coronary heart disease: Treatment implications. <i>European Heart Journal</i> 1998; . 19(12)	Not relevant.
Shepherd. How to target South Asians. <i>Health Service Journal</i> . 24 Feb 2005 115 pp pp 2005;	Not relevant. Targeting south asians into physical activity.
Sheps, Dart, R. A., Sheps, S. G., and Dart, R. A.	Summary of JNC guidelines

New guidelines for prevention, detection, evaluation, and treatment of hypertension: Joint National Committee VI. <i>Chest</i> 1998; 113(2): 263-265	
Shuttleworth. Combating high cholesterol. <i>Nursing Times</i> 2006; 2006 12 Dec. 102(50)	Not relevant.
Simon, Mijiti, W., Garipey, J., Levenson, J., Simon, Alain, Mijiti, Wuliya, Garipey, Jerome, and Levenson, Jaime. Current possibilities for detecting high risk of cardiovascular disease. [39 refs]. <i>International Journal of Cardiology</i> 2006; 110(2): 146-152	Not relevant.
Simpson, Johnston, M., McEwan, S. R., Simpson, W. M., Johnston, M., and McEwan, S. R. Screening for risk factors for cardiovascular disease: a psychological perspective. [39 refs]. <i>Scottish Medical Journal</i> 1997; 42(6): 178-181	Non-UK general population. Not included in Q1.
Sin, Belza, B., Logerfo, J., Cunningham, S., Sin, Mo Kyung, Belza, Basia, Logerfo, James, and Cunningham, Susanna. Evaluation of a community-based exercise program for elderly Korean immigrants. <i>Public Health Nursing</i> 2005; 22(5): 407-413	Not relevant
Siskind, Johnson, M., Qureshi, A., Solow, B., Chesebro, D., Oldham, N., Siskind, A., Johnson, M., Qureshi, A., Solow, B., Chesebro, D., and Oldham, N. The impact of automatic prescriptions on reducing low-density lipoprotein cholesterol levels.. <i>Effective Clinical Practice</i> 2000; 3(5): 240-246	Not relevant - physician compliance with guidelines. no relevant outcomes.
Skrtic, Niklason, A., Leoo, T., Hedner, T., RIAHD Study Group., Skrtic, S., Niklason, A., Leoo, T., Hedner, T., and RIAHD Study Group. Risk factor identification and assessment in hypertension and diabetes (RIAHD) study. <i>Blood Pressure</i> 2006; 15(6): 367-374	OUT - Q1 non-UK
Smith, Merritt, S. L., Patel, M. K., Smith, E. D., Merritt, S. L., and Patel, M. K. Church-based education: an outreach program for African Americans with hypertension. <i>Ethnicity &amp; Health</i> 1997; 2(3): 243-253	OUT - education programme only
Smith, Jr. and Smith, S. C. J. Identification and management of risk in patients with coronary and other vascular disease. Guest commentary. <i>American Journal of Medicine</i> 1996; 101(4A): 4A3S-4A5S	Not relevant - commentary on risk reduction strategies.
Smith, Jr. and Thomas, T. S. Lipid lowering therapy and risk management: The role of a multidisciplinary team. <i>ACC Current Journal Review</i> 1997; . 6(2)	Description, no outcomes
Sommerlad and Robbins. Healthy alliances and social action broadcasting: assessment of a local	Not relevant - project aimed at raising awareness and changing

radio project. <i>Health Education Journal</i> 1997; 1997 Mar. 56(1)	lifestyle behaviour.
Song. Managing health habits for myocardial infarction (MI) patients. <i>Int J Nursing Studies</i> 2001; 2001 Aug. 38(4)	Not relevant - motivation intervention for behavioural modification
Song, Brown, P. M., Song, S. H., and Brown, P. M. Coronary heart disease risk assessment in diabetes mellitus: comparison of UKPDS risk engine with Framingham risk assessment function and its clinical implications. <i>Diabetic Medicine</i> 2004; 21(3): 238-245	Not relevant - risk assessment tools
Spencer. Heart of the Black Country. <i>NHS Magazine</i> 2001; 2 (9): 10-11 (#October 2001) 2001;	News item about opening of new heart centre but no outcomes
Spurgeon, Hicks, Carolyn, Barwell, Fred, Walton, Ian, and Spurgeon, Tom. Counselling in primary care: A study of the psychological impact and cost benefits for four chronic conditions. . <i>European Journal of Psychotherapy, Counselling and Health</i> 2005; 7(4): 269-290	Not relevant.
Squire. Easy risk assessment to meet NSF targets. <i>Practice Nursing</i> 2002 Oct. 13(10)	Non-UK general population. Not included in Q1.
Staten, Gregory-Mercado, K. Y., Ranger-Moore, J., Will, J. C., Giuliano, A. R., Ford, E. S., Marshall, J., Staten, Lisa K., Gregory-Mercado, Karen Y., Ranger-Moore, James, Will, Julie C., Giuliano, Anna R., Ford, Earl S., and Marshall, James. Provider counseling, health education, and community health workers: the Arizona WISEWOMAN project. <i>Journal of Women's Health</i> 2004; 13(5): 547-556	Outcomes from Arizona only. Have included paper reporting for all areas in Byers 1999 and Will 2004.
Stebbins, Kaufman, D. J., Lipton, H. L., Stebbins, Marilyn R., Kaufman, David J., and Lipton, Helen Levens. The PRICE clinic for low-income elderly: a managed care model for implementing pharmacist-directed services.. <i>Journal of Managed Care Pharmacy</i> 2005; 11(4): 333-341	Not relevant
Steinmark, Dornelas, E. A., and Fischer, E. H. Determinants and barriers to participation in an Internet based recovery program for cardiac patients. <i>Journal of Clinical Psychology in Medical Settings</i> 2006; . 13(4)	Not relevant.
Step toe. Behavioural counselling in general practice for the promotion of health behaviour among adults at increased risk of coronary heart disease: randomised trial. <i>Br Medical J</i> 1999; 1999 9 Oct. 319(7215)	Not relevant.
Stoddard, Palombo, R., Troped, P. J., Sorensen, G., Will, J. C., Stoddard, Anne M., Palombo, Ruth, Troped, Philip J., Sorensen, Glorian, and Will, Julie C. Cardiovascular disease risk reduction: the Massachusetts WISEWOMAN project. <i>Journal of</i>	Q1. OUT - risk factor prevalence reported (as baseline characteristics) but this group is covered in Byers.

<i>Women's Health</i> 2004; 13(5): 539-546	
Stroebel, Gloor, Bonnie, Huschka, Todd, Kottke, Thomas E., Naessens, Jim, Riegert-Johnson, Douglas, and Smith, Steven A. Adapting the chronic care model to treat chronic illness at a free medical clinic. <i>Journal of Health Care for the Poor and Underserved</i> ; 16 (2) May 2005 2005; -296	Not relevant
Summers and Vanterpool, Grace. How we are working to prevent CHD and diabetes in ethnic communities. <i>Primary Care Report</i> 2003; 5 (3): 46-47	Not available.
Sundquist, Lindstrom, M., Malmstrom, M., Johansson, S.-E., and Sundquist, J. Social participation and coronary heart disease: A follow-up study of 6900 women and men in Sweden. <i>Social Science &amp; Medicine</i> 2004; . 58(3)	Not relevant
Szirmai, Arnold, C., Farsang, C., Szirmai, Laszlo A., Arnold, Csaba, and Farsang, Csaba. Improving control of hypertension by an integrated approach -- results of the 'Manage it well!' programme. <i>Journal of Hypertension</i> 2005; 23(1): 203-211	Hypertension medication compliance only
takiya. Meta analysis of interventions for medication adherence to antihypertensives. <i>Annals of Pharmacotherapy</i> 2004; 38: 1617-1624	Hypertension medication compliance only
Tanenbaum and Edenfield, S. M. Stroke risk assessment in a southeastern university dental hygiene facility. <i>Journal of Dental Hygiene</i> 2006; 80(1): 1p	Abstract only.
Taylor, Frazier, M., Shimp, L. A., and Boyd, E. L. Implementing pharmaceutical care in an inner city pharmacy: Hypertension management and elderly African Americans. <i>Journal of Aging &amp; Pharmacotherapy</i> 2003; 13(1)	Less than 10 patients
Taylor CT, Byrd DC, Krueger K. Improving primary care in rural Alabama with a pharmacy initiative. <i>American journal of health-system pharmacy</i> 2003; 60(11): 1123-1129	Compliance results for dyslipidemia patients not reported separately.
Theisen, Duquette, D., Kardia, S., Wang, C., Beene-Harris, R., Bach, J., Theisen, Velma, Duquette, Debra, Kardia, Sharon, Wang, Catharine, Beene-Harris, Rosalyn, and Bach, Janice. Blood Pressure Sunday: introducing genomics to the community through family history.. <i>Preventing Chronic Disease</i> 2005; 2(2): A23	Intervention consisted of distributing handouts to raise knowledge about family history of blood pressure distributed during screening event. Evaluation is not about the screening event, just how many handouts were distributed.
Thompson DR. How valuable is cardiac rehabilitation and who should get it? <i>Heart</i> 1999; 82(5): 545-546	Not relevant.

Thomsen and Thomsen, Troels. HeartScore: a new web-based approach to European cardiovascular disease risk management. <i>European Journal of Cardiovascular Prevention &amp; Rehabilitation</i> 2005; 12(5): 424-426	No outcomes reported.
Tonstad. Screening for familial hypercholesterolaemia in relatives. <i>Lancet</i> 1995 1995;	OUT - editorial about a survey in Sweden.
Tsuyuki RT. A randomized trial of the effect of community pharmacist intervention on cholesterol risk management: the Study of Cardiovascular Risk Intervention by Pharmacists (SCRIP). <i>Archives of Internal Medicine</i> 2002; 162(10): 1149-1155	Non-UK generic population not included in Q3
Tunstall-Pedoe, Woodward, M., SIGN group on risk estimation., Tunstall-Pedoe, H., Woodward, M., and SIGN group on risk estimation. By neglecting deprivation, cardiovascular risk scoring will exacerbate social gradients in disease. <i>Heart</i> 2006; 92(3 ): 307-310	Same study and superceded by Woodward 2007
Tunstall-Pedoe. Cardiovascular risk scores in relation to social deprivation and ethnicity. <i>Circulation</i> 2007; . 115(8)	Not relevant - risk assessment scores
Turner-Boutle, Sheldon, T., Smith, G. D., and Ebrahim, S. Cholesterol and coronary heart disease: screening and treatment. <i>Nursing Times; 94 (15) 15 Apr 1998</i> 1998; -7	Summary of effective care bulletin
Unwin, Thomson, R., O'Byrne, A. M., Laker, M., and Armstrong, H. Implications of applying widely accepted cholesterol screening and management guidelines to a British adult population: cross sectional study of cardiovascular disease and risk factors. <i>British Medical Journal; 317 (7166) 24 Oct 1998</i> 1998; -30	Screening tool. UK non-disadvantaged groups. Purely comparing variation in who would be screened / treated according to the varying guidelines, by applying to a cohort.
van den Nieuwenhoff, Mesters, I., Nellissen, J. J., Stalenhoef, A. F., de Vries, N. K., van den Nieuwenhoff, Helene W. P., Mesters, Ilse, Nellissen, Joyce J. T. M., Stalenhoef, Anton F., and de Vries, Nanne K. The importance of written information packages in support of case-finding within families at risk for inherited high cholesterol. <i>Journal of Genetic Counseling</i> 2006; 15(1): 29-40	Non-UK generic population not included in Q1
Velonakis and Sourtzi. A health promotion programme for the prevention of cardiovascular diseases in the elderly. <i>Int J Health Promotion &amp; Education</i> 1999; 37(1)	No relevant outcomes.
Viera and Jamieson, B. How effective are hypertension self-care interventions? <i>Journal of Family Practice</i> 2007; . 56(3)	Hypertension compliance only.
Vikman, Airaksinen, K. E., Tierala, I., Peuhkurinen, K., Majamaa-Voltti, K., Niemela, M., Tuunanen, H.,	Not relevant.

Nieminen, M. S., Niemela, K., Vikman, S., Airaksinen, K. E. J., Tierala, I., Peuhkurinen, K., Majamaa-Voltti, K., Niemela, M., Tuunanen, H., Nieminen, M. S., and Niemela, K. Improved adherence to practice guidelines yields better outcome in high-risk patients with acute coronary syndrome without ST elevation: findings from nationwide FINACS studies. <i>Journal of Internal Medicine</i> 2004; 256(4): 316-323	
Waddingham. Monitoring lipids in the surgery. <i>Br J Primary Care Nursing</i> 2006; 2006 Mar. 3(2)	Summary of JBS guidelines
Waeber, Burnier, M., Brunner, H. R., Waeber, B., Burnier, M., and Brunner, H. R. Compliance with antihypertensive therapy. [23 refs]. <i>Clinical &amp; Experimental Hypertension (New York)</i> 1999; 21(5-6): 973-985	Hypertension compliance only.
Waeber, Burnier, M., Brunner, H. R., Waeber, B., Burnier, M., and Brunner, H. R. How to improve adherence with prescribed treatment in hypertensive patients? <i>Journal of Cardiovascular Pharmacology</i> 2000; 35 Suppl 3: S23-S26	Non systematic literature review, references checked.
Ward, Morisky, D. E., Lees, N. B., Fong, R., Ward, H. J., Morisky, D. E., Lees, N. B., and Fong, R. A clinic and community-based approach to hypertension control for an underserved minority population: design and methods. <i>American Journal of Hypertension</i> 2000; 13(2): 177-183	No outcomes.
Ward, Noyce, P. R., and St Leger, A. S. How equitable are GP practice prescribing rates for statins?: An ecological study in four primary care trusts in north west England. <i>International Journal for Equity in Health</i> 2002; . 6, 2007. Article Number: 2	Not relevant
Ward. A heartfelt boost. <i>Health Development Today</i> 2002 2002; 8: 20-22	OUT - description of a project (City-wide Initiative for Reducing Cardiovascular - CIRC) offering health assessments and targeted at deprived people. However not an evaluation and no outcomes reported.
Weaver, Murtagh, M. J., and Thomson, R. G. How do newly diagnosed hypertensives understand 'risk'? Narratives used in coping with risk. <i>Family Practice</i> 2006; no. 6(pp. 637-643)	not relevant
Weinehall, Hellsten, G., Boman, K., Hallmans, G., Asplund, K., and Wall, S. Can a sustainable community intervention reduce the health gap? - 10-year evaluation of a Swedish community intervention program for the prevention of cardiovascular disease. <i>Scandinavian Journal of</i>	Non UK generic populations not included.

<i>Public Health; Supplement 56 2001 2001; -S68</i>	
Wenger and Wenger, N. K. Should women have a different risk assessment from men for primary prevention of coronary heart disease? <i>Journal of Womens Health &amp; Gender-Based Medicine</i> 1999; 8(4): 465-467	Not relevant.
Wessling. Exceeding the standard: the federally funded EXCEED program is taking minority health disparities research to the next level -- by turning information into intervention. <i>Minority Nurse</i> 2004; 44-8.: -8	No evaluation data
Wetzels, Nelemans, P. J., Schouten, J. S., van Wijk, B. L., Prins, M. H., Wetzels, Gwenn E. C., Nelemans, Patricia J., Schouten, Jan S. A. G., van Wijk, Boris L. G., and Prins, Martin H. All that glitters is not gold: a comparison of electronic monitoring versus filled prescriptions--an observational study. <i>BMC Health Services Research</i> 2006; 6: 8	Not relevant - comparison of compliance measures.
Will JC. Reducing risk for cardiovascular disease in uninsured women: combined results from two WISEWOMAN projects. <i>Journal of the American Medical Women's Association (1972)</i> 2001; 56(4): 161-165	Results comparing the minimum intervention and enhanced physical activity and nutrition intervention, not the screening results. These are already included in the review in Byers and in Will 2004.
Williams, Wold, J., Dunkin, J., Idleman, L., Jackson, C., Williams, Armenia, Wold, Judith, Dunkin, Jeri, Idleman, Lynda, and Jackson, Cennette. CVD prevention strategies with urban and rural African American women. <i>Applied Nursing Research</i> 2004; 17(3): 187-194	Risk appraisal is just pre-test measurement not part of the intervention. Aim of the study was to assess differences in CVD risk factors between rural and urban employees and whether a CVD prevention intervention (diet and physical activity behaviour change) affected CVD risk factors.
Williams, Lopez, S., Williams, Bradley R., and Lopez, Suzanna. Reaching the homebound elderly: the Prescription Intervention and Lifelong Learning (PILL) program. <i>Home Health Care Services Quarterly</i> 2005; 24(1-2): 61-72	outcomes data not available at time of study
Williams, McRobbie, D., and Davies, R. (6) Primary prevention of heart disease. <i>Pharmaceutical Journal</i> 2003; . 270(7232): 18	Not relevant
Wilson. Comparison of methods to identify individuals at increased risk of coronary heart disease from the general population. <i>BMJ</i> 2003; 326(1436)	Risk assessment tools
Witt, Thomas, R. J., and Roger, V. L. Cardiac rehabilitation after myocardial infarction: a review to	Discussion only.

understand barriers to participation and potential solutions. <i>Europa Medicophysica</i> 2005; 41(1): 27-34	
Wonderling. What can be concluded from the Oxcheck and British family heart studies: commentary on cost effectiveness analyses. <i>BMJ</i> 1996; 312: 1274-1278	Not relevant.
Woodward, Brindle, P., Tunstall-Pedoe, H., SIGN group on risk estimation. Adding social deprivation and family history to cardiovascular risk assessment: the ASSIGN score from the Scottish Heart Health Extended Cohort (SHHEC). <i>Heart</i> 2007; 93(2): 172-176	Not relevant - screening tools
Worcester, Stojcevski, Z., Murphy, B., and Goble, A. J. Factors associated with non-attendance at a secondary prevention clinic for cardiac patients. <i>European Journal of Cardiovascular Nursing</i> 2003; 2(2): 151-157	Hypertension compliance only.
Wright, Kopecky, S. L., Timm, M., Pflaum, D. D., Carr, C., Evers, K., and Bell, J. Impact of community-based education on health care evaluation in patients with acute chest pain syndromes: the Wabasha Heart Attack Team (WHAT) project. <i>Family Practice</i> ; 18 (5) Oct 2001 2001; -9	Non-UK generic population not included in Q3
Wroe. Early detection in primary prevention of cardiovascular disease. <i>Practical Diabetes International</i> 2000; . 17(2)	Conference report. No relevant outcomes.
Wyer SJ. Increasing attendance at cardiac rehabilitation. 2001 May;np.	Included in systematic review by Beswick et al 2004.
Yancey. Building capacity to prevent and control chronic disease in underserved communities: expanding the wisdom of WISEWOMAN in intervening at the environmental level. <i>Journal of Women's Health</i> 2004; 13(5): 644-649	Commentary on WISEwoman discussing how community intervention can target behaviour change.
Yancy, Benjamin, E. J., Fabunmi, R. P., Bonow, R. O.,. Discovering the full spectrum of cardiovascular disease: Minority Health Summit 2003: executive summary. <i>Circulation</i> 2005; 111(10): 1339-1349	Early detection in primary prevention of cardiovascular disease
Yasin and Yasin, S. Detecting and improving compliance. Is concordance the solution?. [24 refs]. <i>Australian Family Physician</i> 1998; 27(4): 255-260	Non systematic literature review, references checked.
Yates, Annis, L., Pippins, J., Walden, S., Yates, S., Annis, L., Pippins, J., and Walden, S. Does a lipid clinic increase compliance with National Cholesterol Education Program Treatment Guidelines? Report of a case-matched controlled study. <i>Southern Medical Journal</i> 2001; 94(9): 907-909	Not investigating medication compliance.
Yeazel, Bunner, S. H., Kofronet al. Put prevention into practice (PPIP): evaluating PPIP in two family practice residency sites.. <i>Family Medicine</i> 2002;	Non-UK generic population not included in Q1.

34(1): 17-22	
Yip, Wong, T. K., Chung, J. W., et al. Cardiovascular disease: application of a composite risk index from the Telehealth System in a district community. <i>Public Health Nursing</i> 2004; 21(6): 524-532	non-OECD
Zdrojewski, Gluszek, J., Posadzy-Malaczyska et al. Effects of social intervention on detection and efficacy of treatment for arterial hypertension. Main results of the Polish Four Cities Programme. <i>Kardiologia Polska</i> 2004; 61(12): 546-558	Non-UK generic population not included in Q1