**THE IMPACT OF SOCIOECONOMIC HEALTH DISPARITIES IN CONGESTIVE HEART FAILURE IN OUT PATIENT MANAGMENT A CASE SERIES RETROSPECTIVE ANALYSIS OF DIAGNOSED CASES**

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*Objectives*: To assess the direct relationship of socioeconomic factors among diagnosed cases of CHFTo determine the most prevalent etiology of CHF To determine modifiable and non-modifiable risk factors.

*Methodology*: A retrospective review of data will be collected among patient volunteers (N 13) with Congestive Heart Failure CHF who are managed as out-patient cases on regular annual follow-up. Socioeconomic factors consisting of status of employment, source of income, highest level of education, and ongoing co-morbid health conditions such as hypertension were also collected. Primary or secondary etiology of CHF as well as Modifiable and non-modifiable health factors were also included as variables. In conclusion it was noted that participants consisted demographically of the following minorities such as African American 81 percent, Asian 5 percent, the rest of the 14 percent are Caucasians residing in Harris County, Houston, Texas who are diagnosed with CHF based on chart review. . All participants are 65 years old and above, 4 Male and 9 are female, making up the total number of 13.The socioeconomic status was noted to be negligible due to the fact that 85 percent are Medicare beneficiaries while the rest have private Texas state health insurance coverage. All participants have average of greater than 80 percent of concomitant medication and PCP follow up compliance and adherence respectively. The most prevalent etiology is still hypertension and Left ventricular dilatation. Also noted among the modifiable risk factors are the following 50 percent are previous smokers; zero are previously exposed to regular alcohol use, all participants denies use of prohibited substance or drug abuse to include prescription medication abuse.