

Angioplastia Primária em Portugal. Como implementar o "Stent for Life" no nosso País

Hélder Pereira

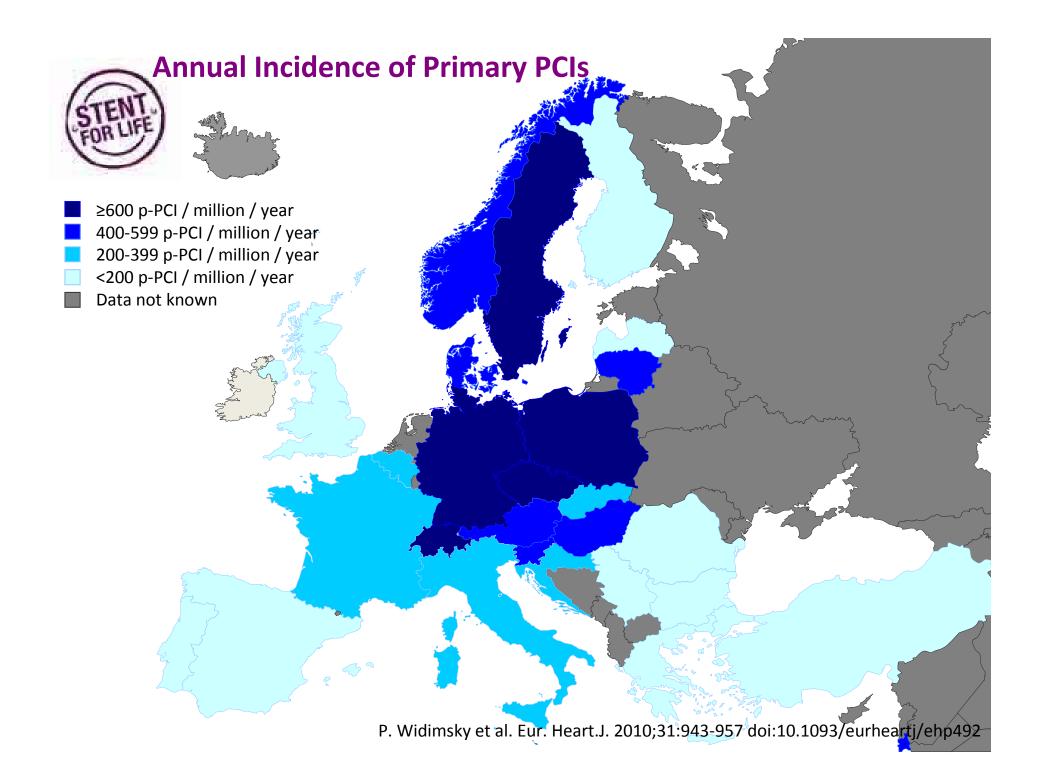
Stent for Life Initiative

Portugal



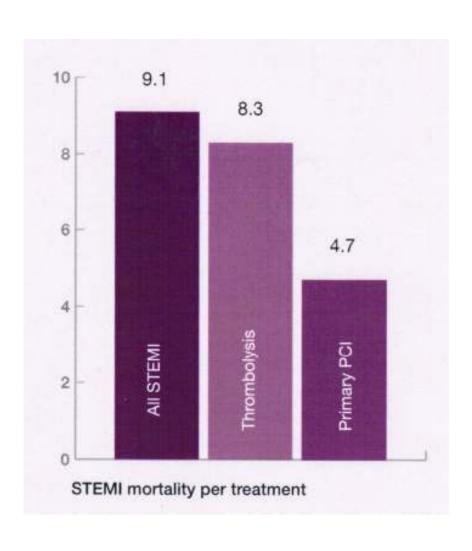
Hélder Pereira, MD, FESC, FACC

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Stent for Life Initiative



Stent for Life INITIATIVE

To improve the delivery and patient access to the life saving indications of PCI thereby reduce the mortality and morbidity of patients suffering from acute coronary syndromes.









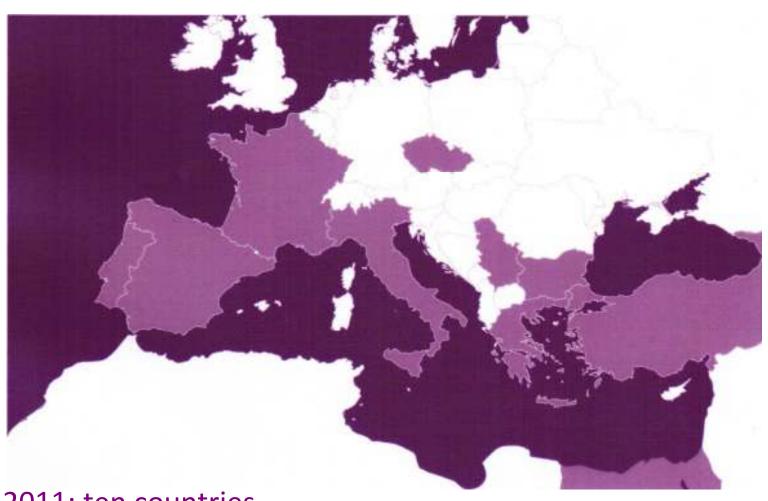
Stent for Life Initiative

Prague 8 Feb 2011





Stent for Life Initiative



2011: ten countries



- 1- Define regions/countries with an unmet medical need in the optimal treatment of ACS.
- 2- Implement an action program to increase patient access to primary PCI where indicated:

To increase the use of primary PCI to more than 70% among all ST segment elevation myocardial infarction patients,

To achieve primary PCI rates of more than 600 per one million inhabitants per year,

To offer 24/7 service for primary PCI procedures at all invasive facilities to cover the country STEMI population need.

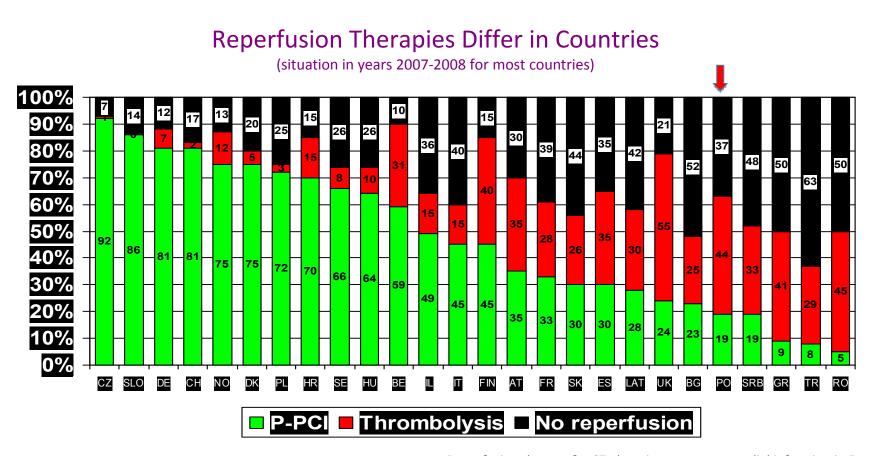
J.Knot: How to set up an effective national primaryangioplasty network: lessons learned from five European countries (EuroIntervention, August 2009).



To increase the use of primary PCI to more than 70% among all ST segment elevation myocardial infarction patients



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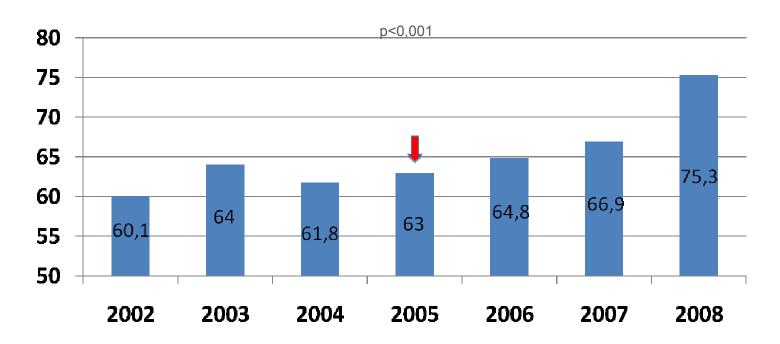
Reperfusion therapy for ST elevation acute myocardial infarction in Europe: description of the current situation in 30 countries. P. Widimsky et al. Eur. Heart.J. 2010;31:943-957 doi:10.1093/eurheartj/ehp492



To increase the use of primary PCI to more than 70% among all ST segment elevation myocardial infarction patients,

Portuguese Registry ACS 2002/8

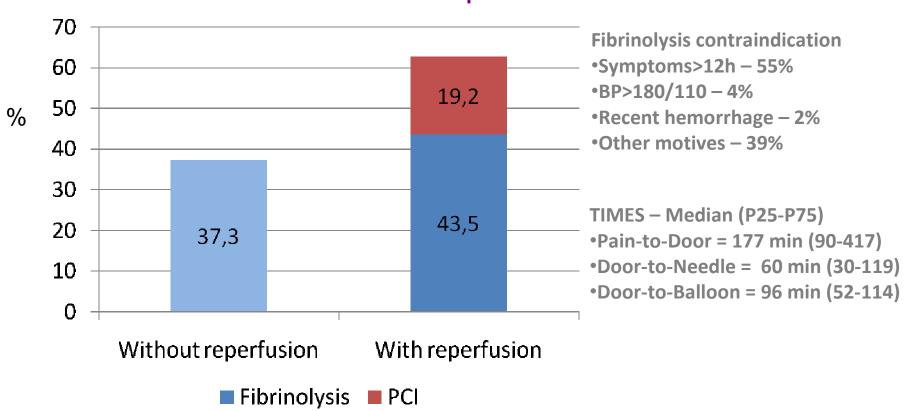
STEMI: Reperfusion:





To increase the use of primary PCI to more than 70% among all ST segment elevation myocardial infarction patients,

Portuguese Registry ACS 2002-8 RESULTS STEMI: Reperfusion:

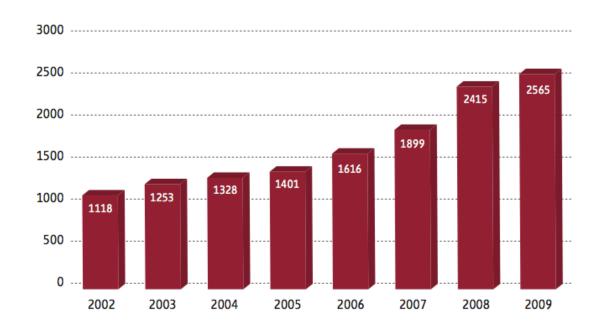


Achieve primary PCI rates of more than 600 per one million inhabitants per year



Achieve primary PCI rates of more than 600 per one million inhabitants per year

Evolution of P-PCI from 2002-9:



2009: 239 PPCI/million





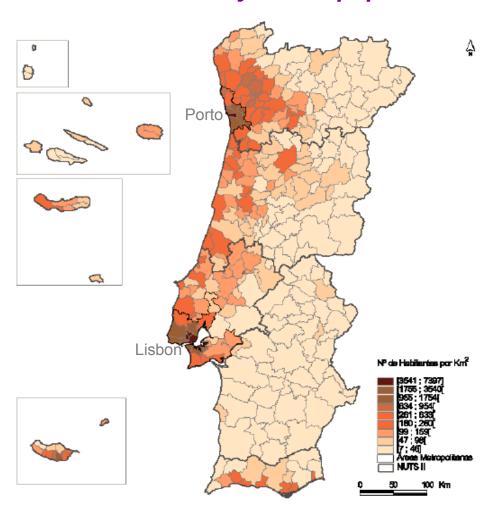




To offer 24/7 service for primary PCI procedures at all invasive facilities to cover the country STEMI population need



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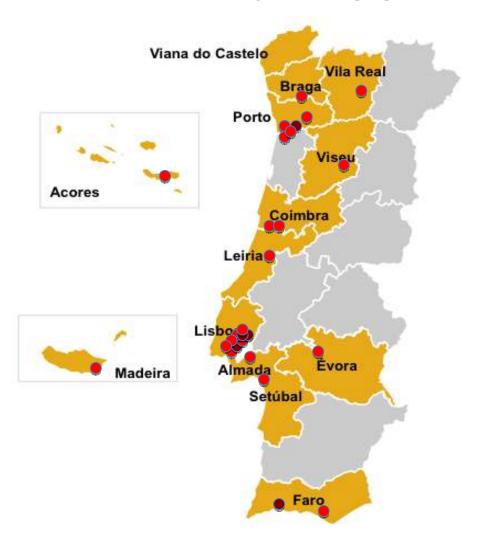




Public centrePrivate centre

ImplementanActionPlan to IncreasePrimary-PCI

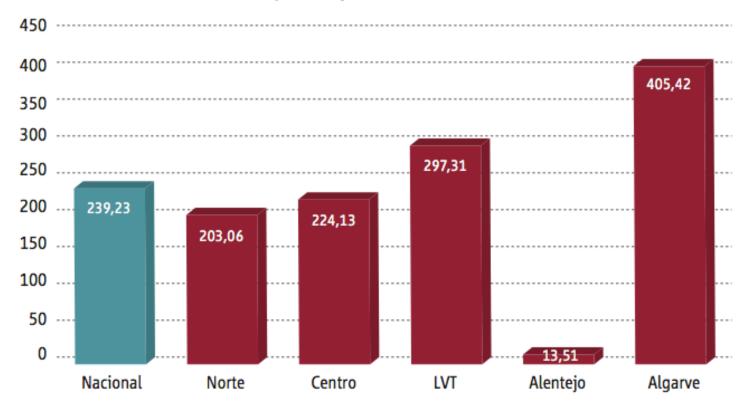
To offer 24/7 service for primary PCI procedures at all invasive facilities to cover the country STEMI population need





To offer 24/7 service for primary PCI procedures at all invasive facilities to cover the country STEMI population need

Primary PCI per Million (2009):



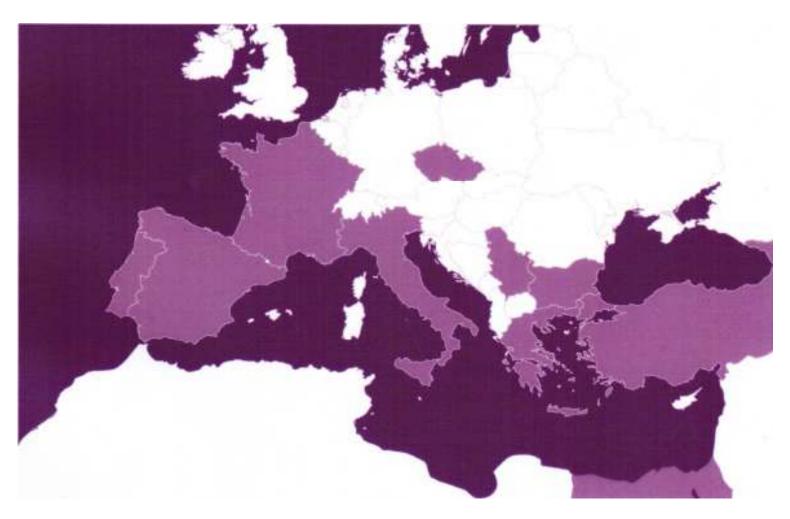








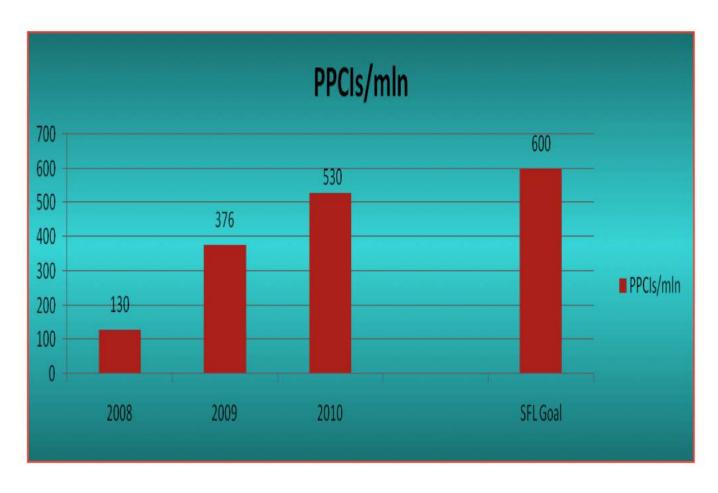
Stent for Life Initiative





Bulgaria

Goal



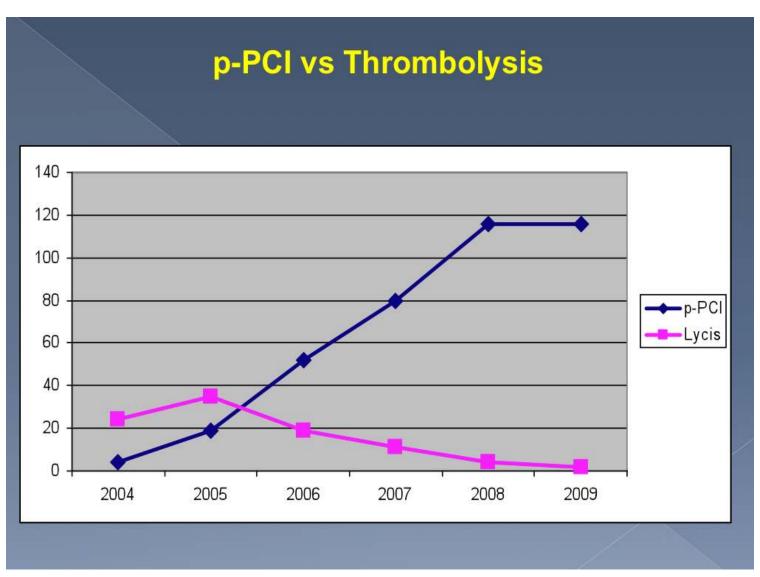


Greece



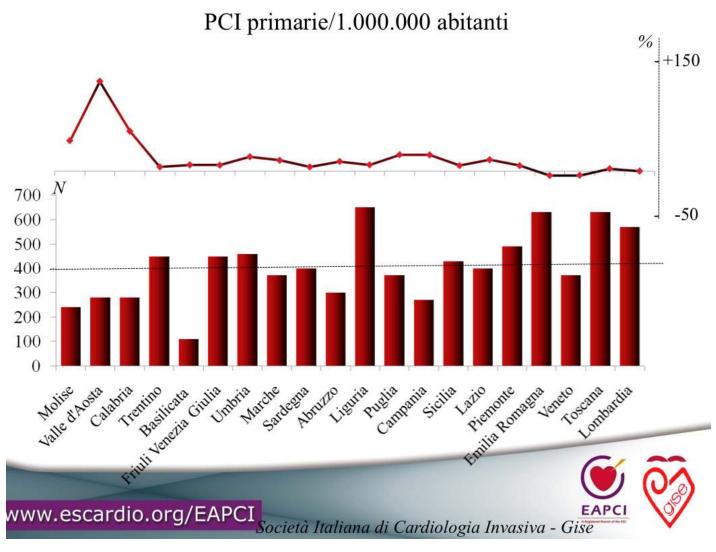


Greece



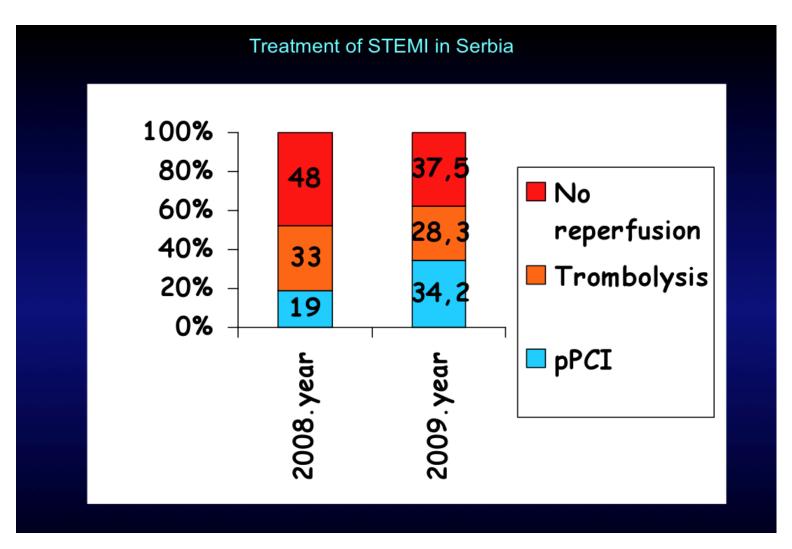


Italy





Servia

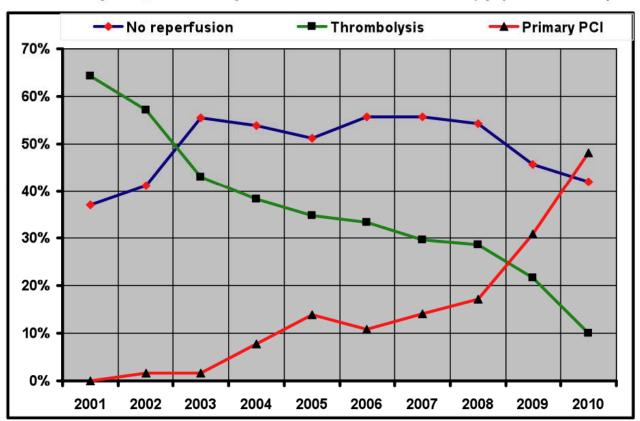




Romania



RO-STEMI registry
Primary PCI, thrombolysis and conventional therapy (2001 – 2010)





Spain

Spain: AMI Networks in 2010

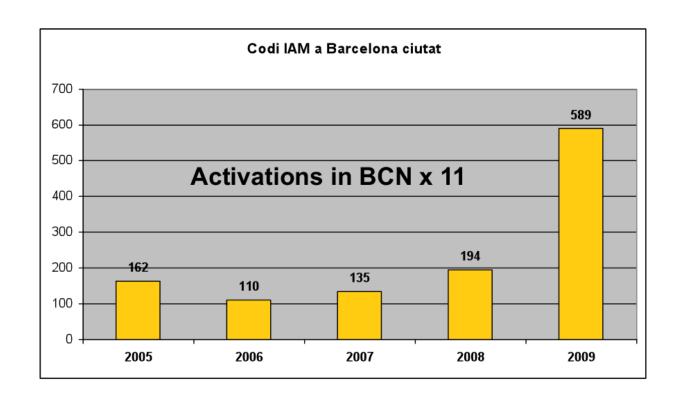
- Galicia
- Islas Baleares
- Murcia
- Navarra
- Cataluña
- Castilla la Mancha





Spain

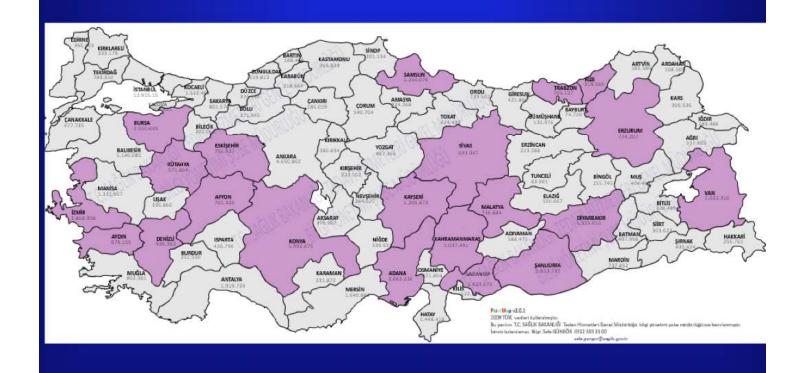
Evolution of AMI activities in the community of Catalonia, Spain





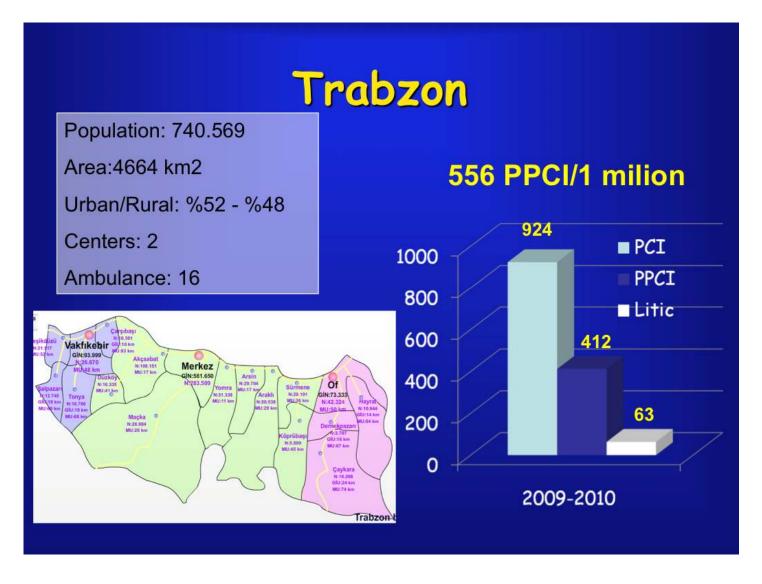
Turkey

Selected city for SFL project





Turkey







- I Nominate and approve SFL Steering Committee Members;
- II- Organize SFL Task Force meeting (January 2011) and agree on key program implementation barriers; (barriers and limits);
- III Analyze current STEMI network situation (including country map with 24/7 STEMI centers);
- IV Present 3 years SFL Initiative objectives to SFL Executive Board (February, Prague);
- V Start interview process to hire SFL national project manager;
- VI Establish AMI/STEMI registry if not in place;
- VII Draft SFL budget



I - Nominate and approve SFL Steering Committee Members;



SFL Steering Committee Members

- SFL Champion: Hélder Pereira
- APIC President: Leitão Marques
- Health Ministry Cardiovascular Diseases Coordinator: Rui Ferreira
- National Institute of Medical Emergency (INEM): Miguel Sousa-Oliveira
- APORMED: Paulo Tomaz



II - Organize SFL Task Force meeting and agree on key program implementation barriers; (barriers and limits)



Present 3 years SFL Initiative objectives to SFL Executive Board

MACRO level

National Health Service System:

- Reorganization of EMS (INEM)
- Heterogeneity among country regions;- Secondary transportation (non-PPCI centres)
- Awareness campaigns for patients

MESO level

How hospitals are organized:

- Strategies, structures, processes, practices;
- Numbers of interventional cardiologists and long period of training:

MICRO level

Clinical effectiveness, culture, safety, patient experience;



III - Analyze current STEMI network situation (including country map with 24/7 STEMI centers);



Via Verde Coronária

("Coronary Green Way")

INEM











CODU VMER

SIV





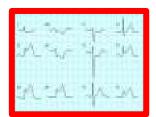


















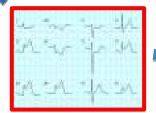








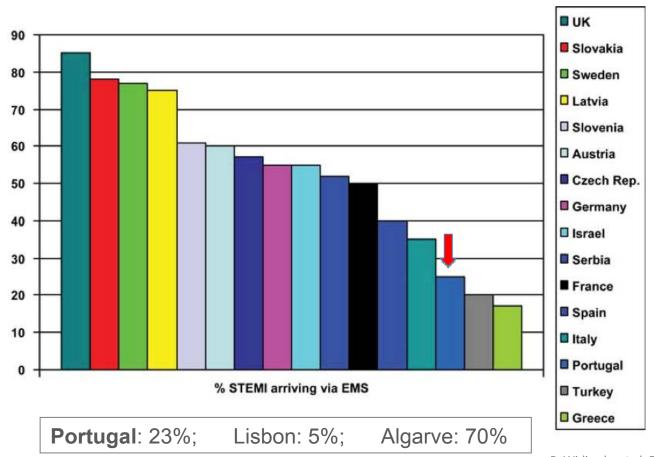




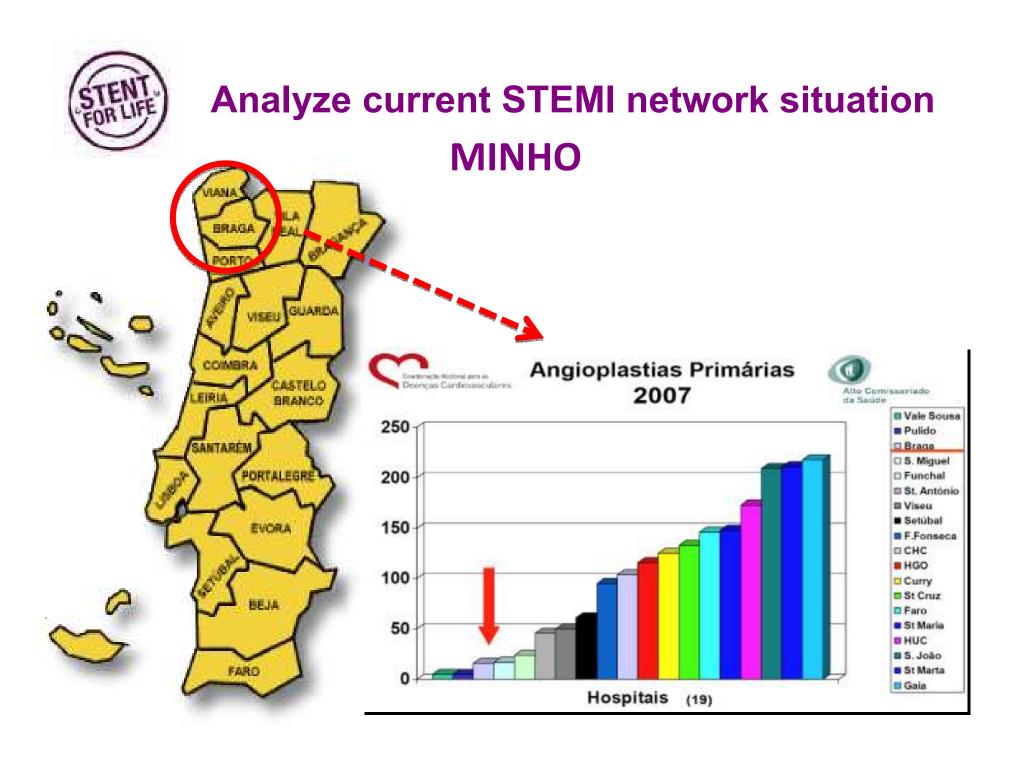




Percentage of STEMI patients arriving to the first hospital via EMS services:



P. Widimsky et al. Eur. Heart.J. 2010;31:943 RuiFererira, Alto Comissariado

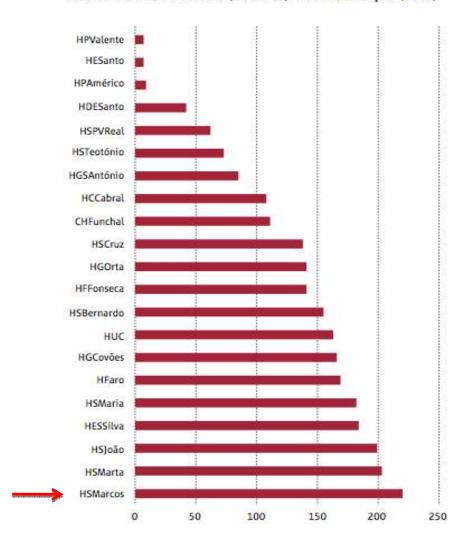




MINHO



ANGIOPLASTIAS PRIMÁRIAS (DOENTES) POR INSTITUIÇÃO (2009)





ALGARVE





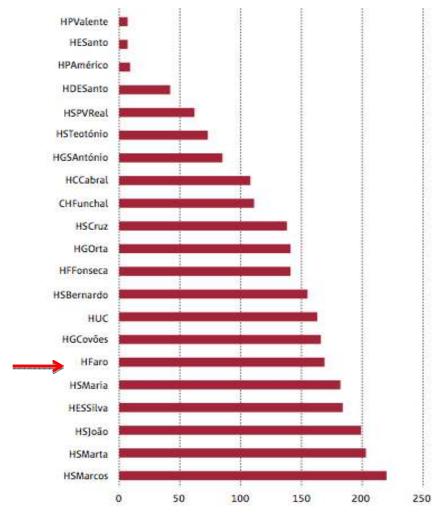
Algarve reperfusion rate: 86%



ALGARVE



ANGIOPLASTIAS PRIMÁRIAS (DOENTES) POR INSTITUIÇÃO (2009)





Analyze current STEMI network situation ALGARVE (Faro)





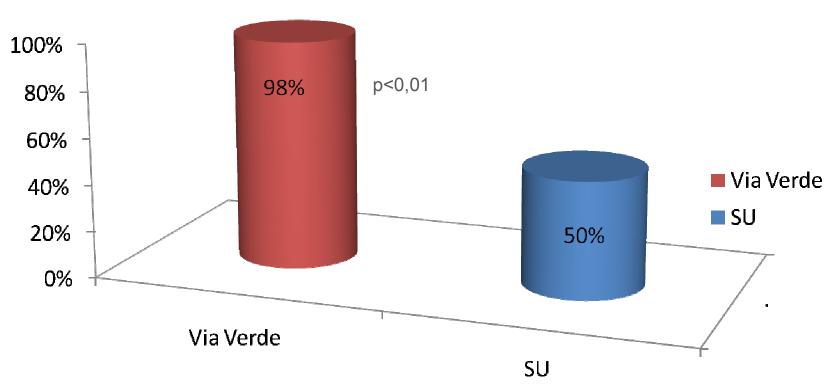


Portugal: 23%; Lisbon: 5%; Algarve: 70%



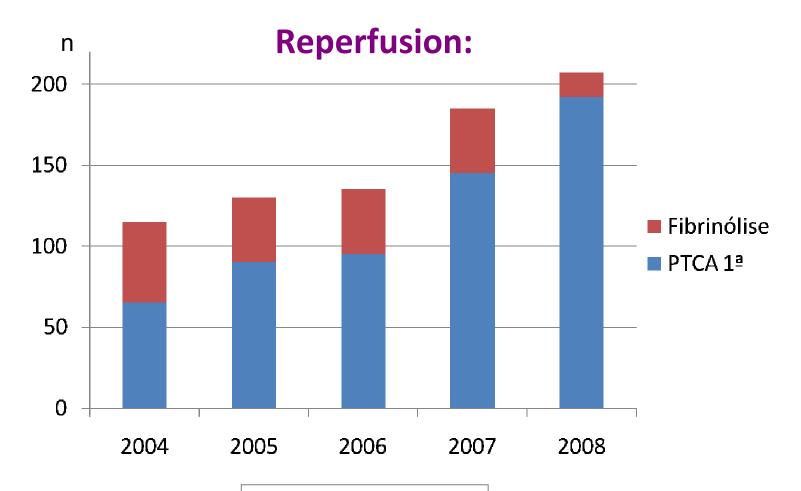
ALGARVE

Door to Balloon Time < 90 min:





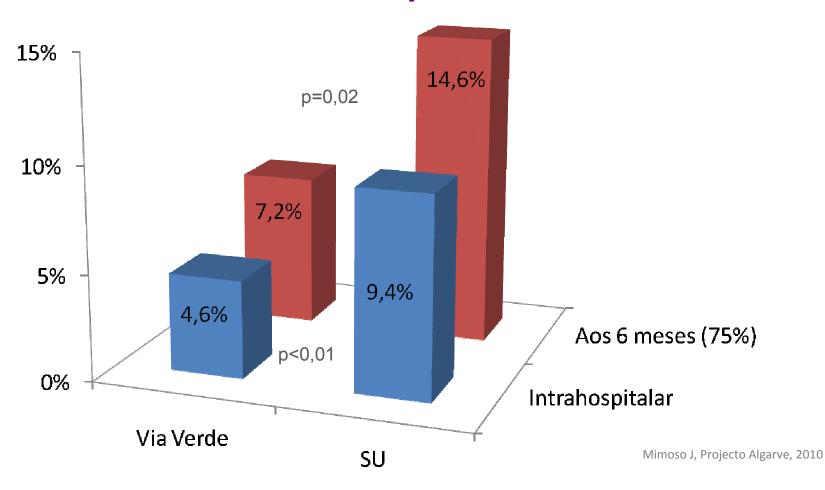
ALGARVE



2009: 405 P-PCI/Million



ALGARVE Mortality:







Registries and quality control:







Interventional Cardiology: Activity Indicators;

Alto ComissariadodaSaúde



National Registry of ACS;

Portuguese Society of Cardiology



Capic

National Registry of Interventional Cardiology

Portuguese Society of Cardiology



Registries and quality control:

REGISTOS

Registo nacional de síndromes coronárias agudas: sete anos de actividade em Portugal [114]

José Ferreira Santos, Carlos Aguiar, Cristina Gavina, Pedro Azevedo, João Morais, em nome dos investigadores do Registo Nacional de Síndromes Coronárias Agudas da Sociedade Portuguesa de Cardiologia, Lisboa, Portugal





Registries and quality control:

ARTIGO ESPECIAL

Registo Português de Cardiologia de Intervenção em 2002 [1]

HÉLDER PEREIRA

em nome dos investigadores do Registo Nacional de Cardiologia de Intervenção

Rev Port Cardiol 2004;23 (1):7-14





National Registry of Interventional Cardiology

Portuguese Society of Cardiology



- CardioBase
- Other





Thank you

