For Immediate Release

Study Shows Local Heart Attack Programs Dramatically Reduce Treatment Times for Heart Patients

L.A. County patients with chest pain are urged to call 911 for state-of-the-art heart care

LOS ANGELES (October 22, 2007) – Recent data reveals that specialized emergency networks for heart attacks dramatically reduce treatment times for patients suffering from a deadly type of heart attack, called an ST-elevation myocardial infarction (STEMI).

These results were presented at the Cardiovascular Research Foundation’s 19th annual Transcatheter Cardiovascular Therapeutics (TCT) scientific symposium in Washington DC.

“Southern California probably has the largest contiguous STEMI heart attack network in the world, so it is really exciting to present data that highlights our region’s collective success,” said Ivan Rokos MD, an emergency medicine physician and lead researcher for the Southern California STEMI Consortium.

To determine the efficacy of these networks in providing treatment to heart attack patients, researchers looked at an important measurement called door-to-balloon (D2B) time. D2B measures the time it takes for the patient to receive definitive treatment, from the “door” of the emergency department to the first cardiac cath lab “balloon inflation” that opens the blocked artery. The national standard is a D2B time of 90 minutes or less.

After analyzing data from four Southern California counties with regional STEMI networks—Los Angeles, Orange, Ventura, and San Diego—researchers determined that 85% of STEMI heart attack patients who called 911 received definitive treatment within 90 minutes. The data also revealed that the median D2B time for Los Angeles County was 61 minutes.

“STEMI networks provide heart attack patients who call 911 with an express ticket to designated heart centers capable of rapid and skilled coronary intervention,” said David L. Ross, chairman of the Los Angeles County Division of the American Heart Association. “Now, more than ever before, calling 911 is the most important step to take when you or someone near you has symptoms of a heart attack.”

Heart attack symptoms can include uncomfortable pressure or pain in the center of the chest, discomfort in other areas of the upper body such as in the arms, back, jaw, or stomach, and shortness of breath. Approximately 5-10% of patients who have severe chest pain suffer from a STEMI.

“A STEMI is the most dangerous type of heart attack because it involves a sudden blockage of one of the three big coronary arteries that supply blood to the heart,” said Bill French, MD, interventional cardiologist for Harbor-UCLA Medical Center. “Prompt treatment will not only save heart muscle—it can also save lives.”
How the STEMI Receiving Center Program Works
Los Angeles County’s STEMI Receiving Center (SRC) Program strengthens the links between paramedics, emergency departments and cardiologists to ensure that 911 patients experiencing STEMI’s are quickly diagnosed, transported, and treated.

The program begins when a patient who recognizes the symptoms of a heart attack calls 911.

“Paramedics who arrive at the scene will quickly determine whether the patient is suffering from a STEMI using newly purchased 12-lead ECG machines equipped with a special computer program that quickly identifies a STEMI heart attack,” said Marc Eckstein MD, medical director for the Los Angeles City Fire Department.

Once the patient is diagnosed, the paramedics contact the nearest STEMI Receiving Center to pre-activate the emergency department and cardiac cath lab teams. When the paramedic unit arrives, the patient is quickly stabilized in the emergency department and then moved to the hospital’s cath lab. Here, the cardiologist and cath lab team are assembled and ready to open up the artery with the most advanced techniques, using special catheters, angioplasty balloons, and stents. Patients are awake throughout the cardiac cath lab procedure.

“The success of the SRC program is dependent not on one person, but on the teams of paramedics, nurses, and doctors working together to improve patient care,” said William Koenig, MD, medical director of the Los Angeles County Emergency Medical Services Agency. “With the support of the Annenberg Foundation, the American Heart Association, and the Board of Supervisors, which funded the purchase of 12-lead ECG machines for our paramedic units, we now have a state-of-the-art heart attack system that provides time-critical medical intervention.”

For more information, please visit:
LA County’s STEMI Receiving Center Program: http://ladhs.org/ems/Stemi/Stemi_Index.htm
American College of Cardiology National D2B Alliance: http://www.d2balliance.org/

About the Southern California STEMI Consortium
The Southern California STEMI Consortium represents the network of public and private agencies involved in establishing regional STEMI networks in Los Angeles County, Orange County, Ventura County, and San Diego County. LA County contains within its borders 30 hospitals designated as STEMI Receiving Centers. In addition, Ventura County has 3, Orange County has 12, and San Diego County has 13 STEMI Receiving Centers.

About the Los Angeles County EMS Agency
As a division of the Los Angeles County Department of Health Services, the EMS Agency is responsible for managing the county’s medical 911 system, which includes fire departments, law enforcement agencies, ambulance companies and hospitals. Los Angeles County has the largest multi-jurisdictional emergency medical services system in the nation and handles 600,000 911 medical calls a year.

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