



Access to Timely and Optimal Care of Patients With Acute Coronary Syndromes: Community Planning Considerations

A Report by the
National Heart Attack Alert Program



Objectives

- **Describes the background of the report**
- **Reviews the science regarding the importance of time to treatment**
- **Addresses community planning considerations**



Objectives of the “Community Planning” Report (continued)

- **Identifies the essential components of community planning**
- **Offers community planning strategies**

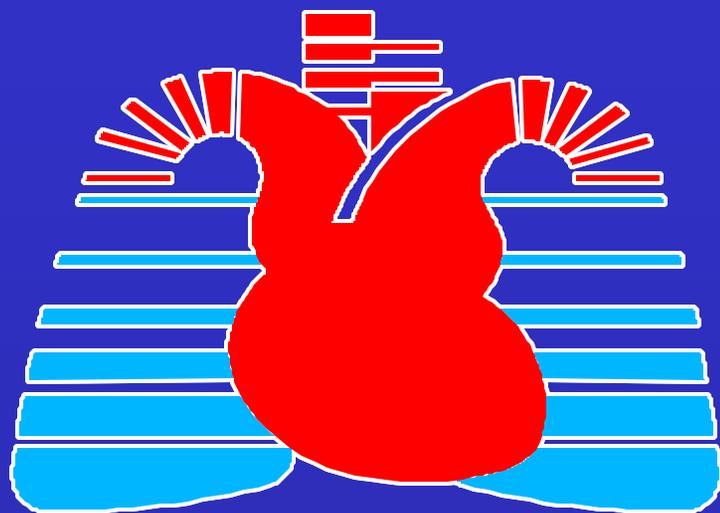


Background

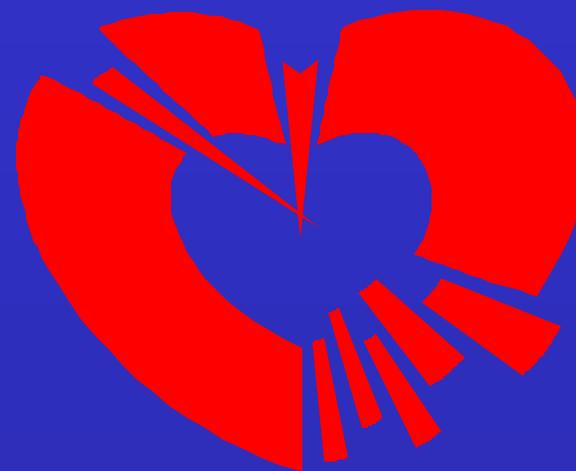


A Public Health Problem

- **Cardiovascular disease (CVD) remains the number one health threat to most adult Americans.**
- **Each year, 1.25 million people experience an acute myocardial infarction (MI).**
 - **Nearly 500,000 die from coronary heart disease (CHD) each year.**
 - **Over half of acute MI deaths occur suddenly and outside a hospital.**



**National Heart, Lung, and
Blood Institute (NHLBI)**



**National Heart Attack
Alert Program (NHAAP)**



NHAAP Goal

- **To promote the rapid identification and treatment of acute MI, with the overriding goal of reducing morbidity and mortality from acute MI, including sudden death**

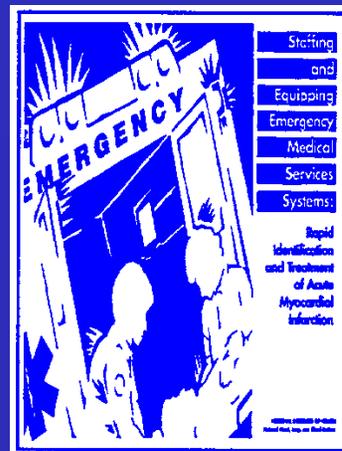
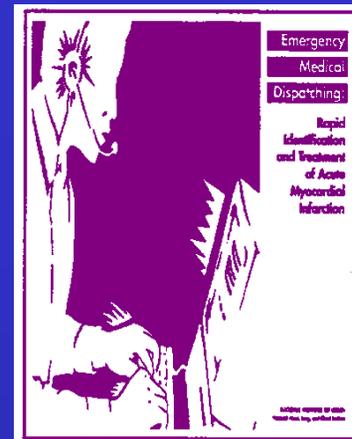
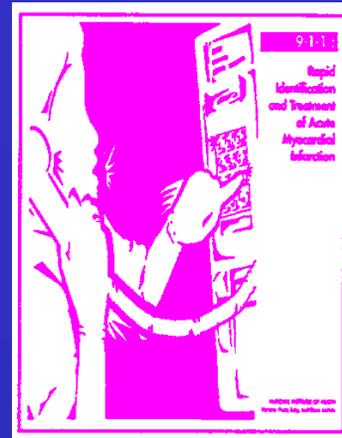
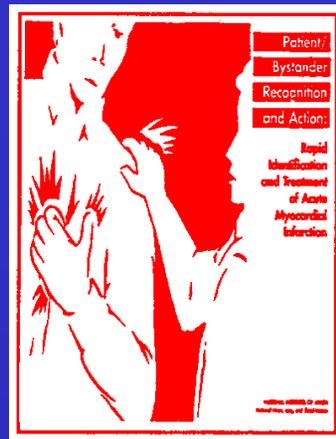


Three Phases of the NHAAP

- **Phase I—Patient/Bystander Recognition and Action**
- **Phase II—Prehospital Action**
- **Phase III—Hospital Action**



First Five NHAAP Reports





American Heart Association (AHA)

“Since 60 percent to 70 percent of sudden deaths by cardiac arrest occur before hospitalization, it is clear that the *community* deserves to be recognized as the ultimate coronary care unit.”

Source: McIntyre, 1980