

ORGANIZATION OF THE OUTPATIENTS CARDIOLOGICAL SYSTEM

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INTRODUCTION I

- Cardiovascular diseases are the main cause of death in Polish population. It consist 48% of the whole deaths.
- As results of the NAT POL program, near 30% of the whole habitants had more than one risk factor of coronary disease such as: hyperlipidemia, obesity, cigarette smoking, hypertension, diabetes.
- Effectiveness of the treatment of hypertension at the level $< 135/85\text{mmHg}$ = 14% in woman and 10% in man in our country (!!).

INTRODUCTION II

- Death rate of the patients with cardiovascular diseases in Poland is as high as more than twice in comparison to Western Countries (!).
- New outpatients' cardiovascular (C-V) clinic system must be set on.

AIM

- to reduce mortality due to cardiovascular diseases!!
- to improve effectiveness of the treatment of hypertension,
- to select patients with familiar hyperlipidemia
- to make easier system of “selection” of patients with high risk of sudden cardiac death due to arrhythmia or myocardial infarct

AIM II

- to improve
system of dialogue
between general
practitioner and
specialist
- to induce system
of education concerning
primary and secondary
p r e v e n t i o n
- to make clear
system of
noninvasive
diagnostic methods
(echocardiography,
treadmill
or Holter ekg)

General practitioner level

- Patients with diagnosis, after treatment might have a possibility of continuation of therapy, but no changes without consultation with cardiologist.
- Waiting time:
 - chest pain male older than 40 years =on the same day
 - max 14 days after hospitalization
 - patients treated with anticoagulation therapy – with possibility to consultation with cardiologist (by phone, fax)

Basic outpatients clinic C-V

- first step of diagnostic procedures,
- - qualification to invasive diagnosis of patients with coronary disease, with serious arrhythmias,
- - biochemical laboratory test
- - EKG

Basic examinations

- Possibility to send patients to noninvasive diagnosis
 - - echocardiography
 - - treadmill test
 - - Holter EKG,
 - - X -ray
 - - USG vascular diseases

II-nd level

- = patients before coronarography:
- with coronary diseases,
- before valvular replacement procedure
- patients before implantation of pacemaker system
- patients after PTCA and implantation of stents
- Evidence base medicine - important
- **Hospitals with invasive diagnostic laboratory - (4 in Gdansk region)**

III-rd level-Medical University

- PATIENTS: waiting to cardiosurgical procedures or with life threatening arrhythmias
- with valvular diseases
- with multi-vessel coronary diseases
- with pericardial diseases
- with secondary hypertension
- from waiting list to heart transplantation
- with chronic hart failure as a candidates to resynchronization therapy
- with indication to cardioverter defibrillator (ICD) therapy

CONCLUSION

- All must be in cooperation with National Health Service, as a subject to discussion.
- C u c c e s s d e p e n d s o n d e t e r m i n a t i o n a n d c o n s e q u e n c e

