

2005 Georgia Data Summary:

STROKE and the Paul Coverdell Stroke Registry



Stroke is the third leading cause of death in Georgia and is a major cause of disability. Education and better patient care can improve the outcome of stroke.

DEFINITION

- Cerebrovascular disease is a condition where blood vessels supplying the brain become narrowed or blocked.
- Stroke, or brain tissue death, occurs as a result of the absence of blood flow to or in the brain.
- A stroke can be the result of a thrombus (blocked artery) or a hemorrhage (ruptured artery).
- Some strokes can be prevented through behavioral modifications.

DEATHS

- Stroke is the third leading cause of death in Georgia, accounting for 4,285 deaths in 2003¹.
- From 2000 to 2003, black females in Georgia experienced 80 stroke deaths per 100,000 persons².
- Black males are 1.5 times more likely to die from a stroke than white males².
- In 2003, strokes were responsible for 18% of all cardiovascular deaths in Georgia¹.

ESTIMATED COST

Stroke cost Georgians an estimated \$1.5 billion in 2003, including health care costs and costs due to death and disability³.

HOSPITALIZATIONS

In Georgia, stroke was the primary diagnosis for 23,164 hospitalizations in 2003¹.

Data sources:

¹Gregory KS, Wu M and Kanny D. Cardiovascular Disease in Georgia, 2005. Georgia Department of Human Resources, Division of Public Health and the American Heart Association, Southeast Affiliate, December 2005. Publication number DPH05.094HW.

²Morehouse School of Medicine; Georgia Minority Health and Health Disparities Report, 2005.

³Georgia Highlights: Heart Disease and Stroke, 2004:

<http://www.health.state.ga.us/pdfs/epi/cdiee/cvh.factsheet.04.pdf>

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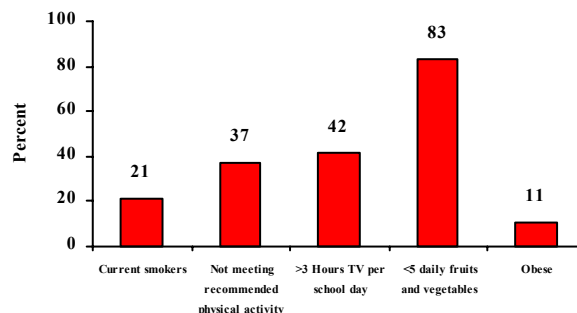
Visit <http://www.health.state.ga.us/epi/cdiee/cardio.asp> for more information about cardiovascular disease in Georgia.

RISK FACTORS FOR STROKE

Modifiable risks factors can increase or decrease the occurrence of an event. Altering these risks can limit or prevent the occurrence of a stroke. Stroke modifiable risk factors include:

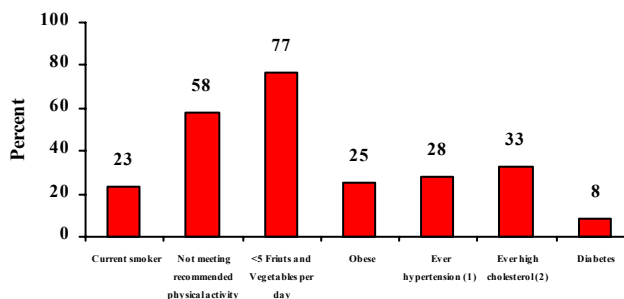
- Smoking
- Inadequate physical activity
- Obesity
- Diabetes
- Hypertension
- High blood cholesterol
- Poor diet

Prevalence of risk factors for stroke among high school students, Georgia, 2003



Data Source: Georgia Student Health Survey

Prevalence of risk factors for stroke among adults, Georgia, 2003



- (1) The percentage of Georgians who reported having been told they had high blood pressure
(2) Of persons who had their blood cholesterol level checked, the percentage told that they have high cholesterol

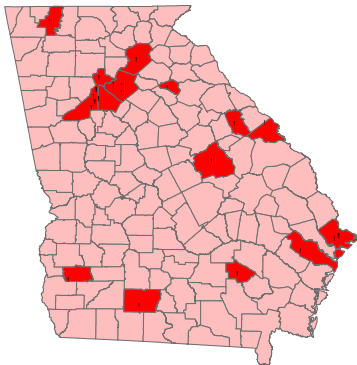
Data source: Georgia Behavioral Risk Factor Surveillance System

INTERVENTION MEASURES

PAUL COVERDELL STROKE REGISTRY

- Funded by the Centers for Disease Control and Prevention to enhance quality improvement in stroke care.
- The registry will measure, track, and standardize treatment practices to improve emergency and long-term care for acute stroke patients.
- Developed as an offspring of the Coverdell Pilot Program, launched by Emory University.
- Pilot program demonstrated significant improvement in stroke patient care indicators.
- Current program is implemented in Georgia, North Carolina, Illinois, and Massachusetts.
- Twenty-seven hospitals throughout Georgia began participation in 2005; additional hospitals will be recruited in 2006.

Georgia Coverdell Hospital Locations



Objectives

- Increase quality improvement through collaborative efforts among participant hospitals.
- Lower the stroke morbidity experienced in Georgia.
- Enhance the effectiveness of secondary care and prevent recurrent strokes.
- Develop protocols to guide physician care with effective stroke management.
- Develop effective methods to care for acute stroke patients.
- Track the most effective and frequently visited facilities used by stroke patients.

Methods/Agents for Secondary Prevention

- Lifestyle modifications – smoking cessation, adequate diet, frequent exercise, and low sodium intake.
- Antithrombotics – aspirin
- Antihypertensives - diuretics, angiotensin-converting enzyme inhibitors, and angiotensin receptor blockers
- Thrombolytics - Tissue-type Plasminogen Activator (tPA)
- Anticoagulants – Heparin and Warfarin

GET WITH THE GUIDELINES

- Developed by the American Heart Association / American Stroke Association to guide patient-driven care.
- Uses the Patient Management Tool (PMT) to report data on stroke care from emergency medical services through patient discharge.

Patient Management Tool

- PMT allows tracking of patient's treatment to improve management and secondary prevention of stroke.
- PMT is a real-time instrument used to provide interactive guidelines and integrate discharge processes.
- All PMT data are de-identified and all hospital site information is confidential to comply with federal privacy and security laws.

STROKE AND HEART ATTACK PREVENTION PROGRAM (SHAPP)

- Mission is to reduce illness and premature death in Georgia due to stroke and heart disease.
- Is an education-based program that educates on primary prevention activities such as lifestyle modification.
- Offers medication assistance and screening, referrals, diagnosis, and treatment.