

Loyola's on-site cardiology team dramatically improves care for heart attack patients

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The availability of an in-house, around-the-clock interventional cardiology team dramatically decreases the time it takes to restore blood flow to heart attack patients, according to data presented this week. These findings were reported by researchers from Loyola University Health System (LUHS) at the American College of Cardiology annual meeting in New Orleans.

In April 2009, Loyola became the first hospital in Illinois to launch a [Heart Attack](#) Rapid Response Team (HARRT). This group includes an interventional cardiologist, a nurse and other members of the cardiac catheterization team who are available at the hospital 24 hours a day, seven days a week. Most hospitals do not have such teams on site during nights and weekends.

"Valuable time is lost when nurses, doctors and technicians have to be called in from home," said interventional cardiologist John Lopez, MD, study investigator and HARRT co-director, LUHS. "Our staff is on hand and prepared all of the time to meet patients when they arrive and require immediate care."

A task force of the American College of Cardiology and American Heart Association recommends that patients undergoing heart attacks receive balloon angioplasties as soon as possible or within 90 minutes of arriving at the hospital -- known as the "door-to-balloon" time.

These data revealed Loyola has far exceeded this standard since the

HARRT program launched, with a median door-to-balloon time of just 47 minutes. All patients received angioplasties within 90 minutes and 82 percent received them within 60 minutes. These results greatly exceed the national standards and results from the best hospitals in the country.

During a heart attack, a blockage in an artery stops [blood flow](#). [Heart muscle](#) begins to die due to lack of blood and oxygen. But a [balloon angioplasty](#), if done in time, can stop a heart attack by restoring blood flow.

"Having a team on site 24/7 is the best way to enhance emergency angioplasty times," said Michelle Fennessy, APN, study investigator, LUHS. "By treating patients quickly, you save more lives and improve their prognosis."

Provided by Loyola University Health System

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