

Black heart attack patients wait longer for advanced treatment, study shows

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Black patients having a heart attack wait longer at hospitals than white patients to get advanced procedures that will restore blood flow to their hearts, according to a University of Michigan Health System study.

The differences in care may be explained by [hospital quality](#), rather than the race of individual patients. Black patients were much more likely to go to slow hospitals than were whites, and as a result waited six hours longer to get life-saving procedures.

Most elderly black patients received care in a small number of hospitals that take longer to transfer their patients, regardless of race, according to the U-M study published in the July issue of *Medical Care*, the journal of the American Public Health Association.

"These data suggest that an individual's race may play much less of a role in generating differences in care, while the hospitals where black patients often go may be even more important," says study lead author Colin R. Cooke, M.D., a Robert Wood Johnson Clinical Scholar at the University of Michigan.

Each year tens of thousands of patients with heart attacks use hospitals that lack staff and capacity to perform angioplasty or [open heart surgery](#) – commonly called revascularization procedures that open clogged arteries and restore [blood flow](#) to the heart.

Experts recommend that [heart attack](#) patients, who come to the

emergency room of these hospitals, be transferred quickly to one that can do revascularization.

Researchers analyzed nearly 26,000 Medicare patient records for the study that looked at how hospitals across the nation may influence racial differences in health care.

The U-M authors note that the causes for delays in hospitals that serve a greater number of black patients is not clear, but based on prior research speculate that quality of care at these hospitals may be worse.

Strapped by financial constraints, safety net hospitals may forego development of a 'quality improvement culture' or limit adoption of computer order entry or electronic medical records, infrastructure which may improve the quality of care.

The most important step in improving cardiovascular care for black patients is addressing organizational issues and resources at hospitals where black patients seek [medical care](#), authors say.

More information: "Race and Timeliness of Transfer of Revascularization in Patients with Acute Myocardial Infarction," *Medical Care*.

Provided by University of Michigan

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