

# Heart attack packs a wallop to wallet of survivors, their employers

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The economic impact of a heart attack and other forms of acute coronary syndrome goes beyond the hospital to the home and workplace, according to research presented at the American Heart Association's Scientific Sessions 2012.

Men and women with [acute coronary syndrome](#) face additional economic burdens in lost time and income from work and possible inability to return to work, researchers said.

Acute coronary syndrome (ACS) is an umbrella term for situations in which blood supplied to the [heart muscle](#) is suddenly blocked. It includes [heart attack](#) and angina or chest pain.

Using data from Integrated Benefits Institutes' Health and Productivity Benchmarking Databases and IMS Lifelink, researchers analyzed medical, pharmacy and short- and long-term disability claims to calculate direct and indirect costs for more than 37,000 employees and their dependents from 2007 to 2010. Of the total, 77 percent were men and 95 percent were younger than 65.

They found:

- Annual healthcare cost for each worker, including out-of-pocket expenses, was \$8,170. Of that, \$7,545 was for hospitalizations and other medical care and \$625 for pharmacy costs.

- Workers with ACS lost 60.2 days of work in the short term and 397 days in the long term.
- For employers, [disability costs](#) outweighed direct costs. The estimated per claim [productivity loss](#) for short-term disability was \$7,943 and \$52,473 for long-term disability.
- Hospitalizations accounted for 75 percent of total annual costs.

"ACS can have devastating effects from an economic standpoint on employers in terms of lost productivity, but more importantly on costs to the employee reflected in the average lost time per incident," said Robert L. Page II, Pharm.D., M.S.P.H., the study's lead author. The study is unique because 95 percent of participants were under age 65.

"About 47 percent of all ACS patients are younger than 65, so we were looking at a working class population," said Page, an associate professor of [clinical pharmacy](#) and physical medicine and a clinical specialist in the Division of Cardiology at the University of Colorado School of Pharmacy in Aurora, Colo. ACS has non-cardiac and cardiac complications such as possible structural heart damage or depression.

"We want to target individuals early on in terms of risk factor modification for ACS, including smoking cessation, weight loss, appropriate diet, pharmacotherapy for high cholesterol and high blood pressure," Page said.

Provided by American Heart Association

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