

First Nations people less likely to receive coronary angiography after heart attack

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First Nations people are less likely to receive guideline-recommended angiography after a heart attack compared with non–First Nations people and have poorer long-term survival rates, according to new research published in *CMAJ* (*Canadian Medical Association Journal*).

First Nations people in Canada have a 2.5-fold higher prevalence of heart disease compared with non–First Nations people and increasing rates of hospitalization for cardiovascular health issues.

To understand the effect of delivering <u>coronary angiography</u> to First Nations people, researchers looked at data on 46 764 people with <u>acute myocardial infarction</u> in Alberta, of whom 1043 (2.2%) were First Nations. The First Nations participants were younger than non–First Nations (59 years v. 68 years old), more likely to have diabetes (54% v. 34%) and lived further from laboratories that performed coronary angiography. Of the people who received coronary angiography within one day after their <u>heart attack</u>, 31% were First Nations compared with 39% of non–First Nations people.

"Given the benefit of invasive intervention in people with acute MI [myocardial infarction], efforts to improve access to angiography after acute MI for First Nations patients along with the use of medical therapy that has proven effective may improve outcomes," writes Dr. Lauren Bresee, Department of Medicine, University of Calgary, Calgary, Alberta, with coauthors.



More information: www.cmaj.ca/lookup/doi/10.1503/cmaj.131667

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