

Mecca's cardiac hospital describes how it copes with the Hajj

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Mecca's cardiac hospital has described how it copes with the huge patient influx during the Hajj and gives details of the echocardiography service in an abstract presented at the 27th Annual Conference of the Saudi Heart Association (SHA).

The conference is being held 12 to 15 February in Riyadh, Saudi Arabia. Experts from the European Society of Cardiology (ESC) will present a special programme.

"Planning ahead is vital for successfully delivering cardiac services during a large event like the Hajj," said abstract author Dr Mohamed Ali Hassan, a cardiologist at King Abdulla Medical City (KAMC) in Makkah (Mecca), Saudi Arabia. "Our hospital's Hajj Committee works year round to ensure that we are prepared."

Around 2-4 million people attend the annual Hajj (pilgrimage) in Mecca and medical services are provided free of charge. KAMC provides almost all [cardiac care](#) in Makkah (Mecca), including during Hajj month when it treats 700-1000 [cardiac patients](#). Of these, 60-70% are Hajj visitors. Most Hajj visitors who have a cardiac event are older than 65 years. Diabetes and hypertension are the most common comorbidities.

KAMC has a Hajj Committee which starts monthly meetings at the end of one Hajj and convenes more frequently as the next Hajj approaches. The committee reviews the hospital's performance during the previous Hajj season and identifies areas for improvement. It also collects

information from the Hajj authority and Ministry of Health in Saudi Arabia, plus the Hajj missions of visiting countries.

The most crucial piece of information is how many people are expected to attend. The second issue is which countries they will come from.

"Hajj visitors come from more than 150 countries but the majority are from the Indian subcontinent," said Dr Hassan. "Knowing the main countries of origin helps us to have interpreters available, since language barriers are one of the difficulties we commonly face."

KAMC asks its staff to come forward if they know other languages. Hajj missions, who are in charge of citizens from their country during the event, also help with interpreting.

Additional doctors, nurses, echocardiography technicians and information technology (IT) staff are recruited to work during the Hajj season. Dr Hassan said: "The good thing is that most of the extra staff work for us during the Hajj almost every year. So they know the hospital and they know what we need them to do. This helps us with our preparations. It's also important when there is a high volume of work to make sure that our IT systems are up to scratch and that any failure will be corrected immediately."

The abstract describes the additional demands on the hospital's echocardiography (echo) service, which is central to the diagnosis of many cardiac conditions. The number of echo studies performed during the Hajj more than doubled between 2011 and 2015, from 318 to 708. Correspondingly, the number of echo machines deployed increased from four to nine and the number of technicians increased from seven to 13.

Hajj missions can help during the event. "Hajj missions with the bulk of visitors tend to have medical services," said Dr Hassan. "Their doctors come to our hospital to see patients from their country, interpret, explain

procedures and get consent for transoesophageal echocardiography and other procedures."

He concluded: "Planning cardiac services for the Hajj goes on all year and becomes more intense nearer the time. To get ready for a large event, gather all the information you need for the service you will provide including demographic data about the people who will be coming - are they young or old, and so on. Make sure you have a reliable source of manpower. Specify the equipment you will need and how many staff are required to operate and maintain it. Things should run smoothly if you are prepared."

Professor Hani Najm, SHA vice president, past president and head of international affairs, said: "Saudi Arabia and most of the Gulf countries continue to experience a high incidence of coronary risk factors and with the young population there would be a sharp increase of heart attacks in the next decade. This calls for a wide and aggressive move to control these risk factors in order to avoid this tidal wave that may outstretch the resources available."

Professor Roberto Ferrari, a past president of the ESC and course director of the ESC programme in Riyadh, said: "Delivering a high quality cardiac service requires teamwork. The ESC advocates setting up a 'Heart Team' of all the specialties, who come together to manage patients with cardiovascular disease. This team would need to be scaled up to deal with any anticipated rise in demand on the service."

More information: Dr Mohamed Ali Hassan will present the abstract 'King Abdulla Medical City - Makkah (KAMC) echocardiography service experience and challenges during Hajj season (pilgrimage)'

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