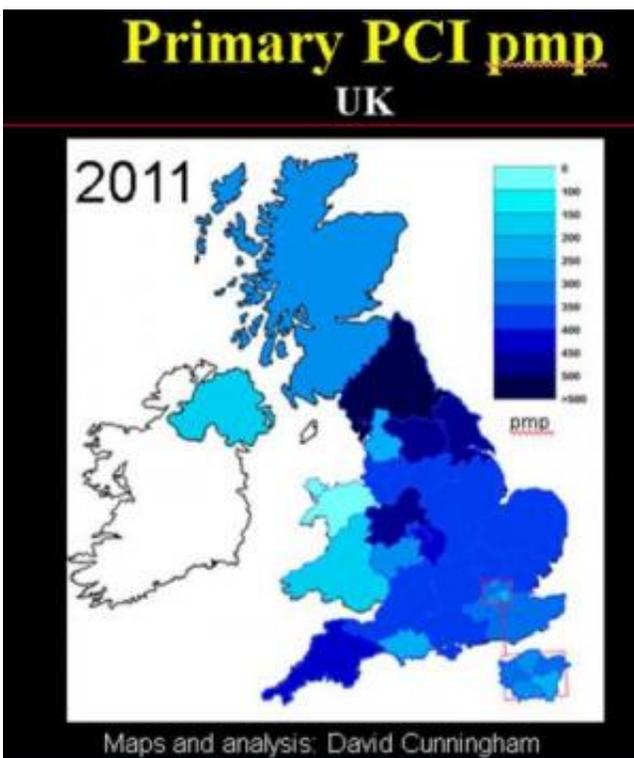


Public report national audit of percutaneous coronary interventional procedures 2011

January 28 2013



This is a map showing primary PCI per million population. Credit: NICOR

The 2011 annual report of the National Audit of Percutaneous Coronary Intervention (PCI) highlights the significant progress within hospitals to expand PCI services to treat more patients with acute coronary syndromes.

PCI mechanically improves [blood flow](#) to the heart and can be used to relieve the symptoms of angina, prevent and treat heart attacks. When used to treat [heart attack](#) patients, the procedure is called primary PCI. Commissioned and funded by the Healthcare Quality Improvement Partnership, the National Audit of PCI is clinically led by the British Cardiovascular Intervention Society and managed by the National Institute for [Cardiovascular Outcomes](#) Research.

Key findings include:

- There has been a year on year increase in the number of PCIs performed in the UK over the last decade. In 2002, 44,913 PCI procedures were performed compared to over 88,000 performed in 2011. This has been achieved by an expansion of both the number of PCI centres and activity within existing centres.
- Primary PCI is now the preferred treatment for [heart attack patients](#) instead of traditional 'clot busting' drugs. The percentage of patients receiving primary PCI has more than doubled since 2006.
- There has been a year on year improvement in treating patients within target times. In 2011 80% of all patients were treated within 150 minutes of calling for professional help and 92% treated within 90 minutes of arriving at the PCI centre. This compares very favourably with international data.
- Patients who need to be transferred between hospitals for primary PCI had longer delays to treatment than [patients](#) admitted directly to a PCI centre. Transfers delayed treatment by about 50 minutes.
- There has been a continued increase in the use of the [radial artery](#) instead of the femoral for access, and this may be one of the factors responsible for driving down complication rates.

Whilst overall access to PCI and primary PCI has improved there remain large differences between the countries of the United Kingdom.

For overall PCI rates per million population, Wales has the lowest rates at 1170 pmp and Northern Ireland the highest (1751 pmp). The PCI activity for England is 1395 pmp. For primary PCI England had the highest rates at 362 pmp and N Ireland the lowest (158 pmp). The differences between cardiac networks and countries are shown in the graphic.

The report collected data on 88,692 PCI procedures from 97 NHS PCI centres and 7 private hospitals between January and December 2011.

Peter Ludman, Consultant Cardiologist and Clinical Lead of the national audit said: "One of the key steps to maintaining and improving high quality treatment is measuring what you are doing. It is a great tribute to all PCI centres in the UK that they are dedicated to providing detailed information about the procedures they carry out, so that the information can be collated and analysed at a National level. These data provide considerable insight into the practice of PCI, showing not only how practice is evolving over the years, but also how different units compare with each other and how the UK compares with other countries".

Professor Huon Gray, Interim National Clinical Director for Heart Disease, Department of Health England said: "I congratulate all those who have worked so hard to collect these excellent data, and particularly pay tribute to the expert work of Dr Peter Ludman in producing such comprehensive analyses each year. The information this report generates is invaluable to all those involved in planning, managing and delivering PCI services."

The full report will be published on the [NICOR website](#) on Tuesday 29th January 2013.

Provided by University College London

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