
COVID-19: Over 50% of Heart Attack Patients Staying Away From Hospitals



The number of heart attack patients seeking urgent hospital care has dropped by more than 50% during the COVID-19 outbreak, according to an extensive worldwide survey by the European Society of Cardiology (ESC). The findings are published in European Heart Journal – Quality of Care and Clinical Outcomes.

“This is the strongest evidence yet of the collateral damage caused by the pandemic. Fear of catching the coronavirus means even people in the midst of a life-threatening heart attack are too afraid to go to hospital for life-saving treatment. There has been a lack of public reassurance that every effort has been made to provide clean hospital areas for non-COVID-19 patients,” said ESC President Professor Barbara Casadei.

“Yet the risk of dying of a heart attack is much greater than that of dying of COVID-19. Moreover, cardiac death is largely preventable if patients with a heart attack come to hospital in time to get treatment. What we are witnessing is an unnecessary loss of life. Our priority must be to stop this from happening. We must continue to save the lives we know how to save.”

The ESC survey of 3,101 healthcare professionals in 141 countries was conducted in mid-April.

In the most severe heart attacks, known as ST-elevation myocardial infarctions (STEMIs), a major artery to the heart becomes blocked. Urgent treatment – either with a stent or clot busting drugs – restores blood flow, saves lives, and prevents disability. Delay causes irreversible damage to the heart muscle, substantially increasing the risk of heart failure and death.

The vast majority of hospital physicians and nurses answering the ESC survey reported a drop in the number of patients with these severe heart attacks coming to hospital, compared to before the COVID-19 crisis. On average, there was a 50% decrease. In addition, most respondents said that of those patients who did go to hospital, 48% arrived later than usual and beyond the optimal window for urgent treatment.

A separate survey of interventional cardiologists, doctors who insert stents to open blocked arteries, found a 28% increase in life-threatening complications among patients with heart attacks during the pandemic.²

This poll – conducted by the European Association of Percutaneous Cardiovascular Interventions (EAPCI), a chapter of the ESC – surveyed more than 600 interventional cardiologists from 84 countries during the first two weeks of April. Nearly half of respondents said restoration of blood flow was delayed due to COVID-19 fears, a situation likely to lead to premature death and disability.

“The delays we are seeing in heart attack patients coming to hospital have significant harmful consequences,” said EAPCI President-Elect, Professor Dariusz Dudek. “Patients who do not present promptly are in a far worse condition when they finally arrive at hospital and they are often too late to benefit from the life-saving treatment that we can provide.”

“Don’t delay if you have heart attack symptoms: call emergency,” said Professor Dudek. “Every minute counts.”

The EAPCI survey also revealed that the number of other procedures has been drastically reduced during the pandemic. “Interventions on heart valves and other procedures must resume as soon as the local COVID-19 situation allows it. We need to avoid needless suffering and death,” said Professor Dudek.

Professor Casadei said: “Patients’ fears of becoming infected by going to hospital must be addressed. They need to be assured that the in-hospital risk of coronavirus infection has been minimised for patients being admitted with heart attacks or strokes. If you have chest pain or other heart attack symptoms – such as pain in the throat, neck, back, stomach or shoulders that lasts for more than 15 minutes – you must call an ambulance. Remember that COVID-19 mortality is 10 times lower than that of an untreated heart attack. And rapid treatment for a heart attack works.”

Source: [ESC](#)

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