POPULATION-BASED SURVEILLANCE OF CORONARY HEART DISEASE

Robert J. Goldberg

*University of Massachusetts Medical School, USA

We have been carrying out population-based surveillance of hospitalized events of acute myocardial infarction (AMI) in approximately one half million residents of Central Massachusetts (U.S.) hospitalized with confirmed AMI at all medical centers (n=11-16) in Central Massachusetts on an approximate biennial basis between 1975 and 2011. This includes an examination of multi-decade long trends in the incidence rates, in-hospital and post-discharge death rates, and hospital management practices in approximately 10,500 residents of Central Massachusetts hospitalized with an independently validated first AMI during the years under study. After an initial increase in the incidence rates of initial AMI during the early years of this community-wide investigation, there has been a decline in the incidence rates of AMI during the most recent decade long period under study (2001-2011). There have been consistent declines in the in-hospital case-fatality rates of AMI over time (16.3% in 1975-84; 12.9% in 1986-1999; 8.8 % in 2001-2011) in both crude and multivariable adjusted analyses as well as increases in one year post-discharge survival rates during the years under study. In addition to these encouraging trends, there have been marked increases over time in the hospital prescribing of several effective cardiac medications including angiotensin converting enzyme inhibitors, aspirin, beta blockers, statins, thrombolytic agents, and coronary revascularization procedures (e.g., percutaneous coronary intervention). We will also present data on recent trends in the type of AMI (e.g., ST-segment vs. Non ST-segment elevation) and the impact of type of AMI on the natural history and management of AMI.

Biography

Goldberg received his PhD in 1978 from the Johns Hopkins University School of Hygiene and Public Health in Baltimore, MD, where he also completed a post-doctoral fellowship in cardiovascular epidemiology. He is a Professor and Chief of the Division of Epidemiology of Chronic Diseases and Vulnerable Populations at the University of Massachusetts Medical School in Worcester, MA. He has published more than 440 papers on a wide array of topics in clinical epidemiology and clinical research in peer reviewed journals and has sat on several scientific study sections at the National Institutes of Health.

Biography
Robert.Goldberg@umassmed.edu

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