

ARIC MANUSCRIPT PROPOSAL FORM

Manuscript #531

1. Title: Trends in Pre-hospital Delay from Onset of Symptoms to Hospital Arrival for Acute Myocardial Infarction: ARIC Community Surveillance

2. Working group:

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3. Timeline:

Analysis to begin immediately. First draft completed by January 1998.

4. Rationale:

In the thrombolytic therapy era the past 15 years has underscored the importance of obtaining medical care for symptoms of myocardial infarction in a more timely manner. Community and professional education programs have been initiated to reduce the elapsed time persons experience from the onset of symptoms suggestive of acute myocardial infarction to hospital arrival. ARIC community surveillance provides an excellent opportunity to evaluate the trends in delay time across geographic, gender and ethnic lines.

5. Hypotheses:

Time from onset of symptoms to hospital arrival has declined between 1987 and 1995.

Time from onset of symptoms to hospital arrival is greater among blacks as compared to whites.

Time from onset of symptoms to hospital arrival is greater among women as compared to men.

Time from onset of symptoms to hospital arrival is greater among those with less severe infarctions as compared to more severe infarctions.

6. Data: Community surveillance data from 1987 to 1995. Hospital record abstraction (HRA) 23b, final ARIC diagnostic classifications (MIDX), hospital discharge diagnosis, gender, age, race, center, date of MI (MIDATE), severity indicators, medical history from HRA form.