

DEVELOPING PATHS AND BLUEPRINTS TO IMPROVE IMPLEMENTATION OF THE ESC 2023 ACS GUIDELINE



Breakout group B: Implementation of the 2023 ESC ASC Guidelines

What do we want to achieve by 2030?

- Optimizing the STEMI networks (delays)
- Secondary prevention post AMI organized, comprehensive, involving majority of patients

Cardiovascular Round Table

Who do we need to reach?

(Patients, primary care, cardiologists, others?)

- EMS
- Cardiologists in ACS centers, ambulatory care
- Primary care
- Patients
- Authorities
- Other national societies, other specialists

With what message?

(Screening, diagnosis, treatment, special considerations?)

- Following the guidelines improves the health of society, improve outcomes
- Following the guidelines on secondary prevention after AMI reduces costs – evidence needed

Through which channels?

- **Translation** to local language / adaptation to local situation
- **LLM** use to translate and interpret guidelines in local language
- Integration with Electronic Health Records systems (+ LLM support)
- Survey on guidelines implementation where are problems, what are the areas to improve (check the performance of STEMI networks, post-AMI care)
- Case-based learning
- Guidelines with advice how to implement them / best examples

Who will be our advocates?

(NCS leads, others?)

- Define the best advocates different situation in the countries
- Define the role of NCS what they want to achieve
- Involvement of politicians
- Take the advantage of local situation
- Editors of national cardiology journals
- Other national societies, other specialists (multimorbidity)

