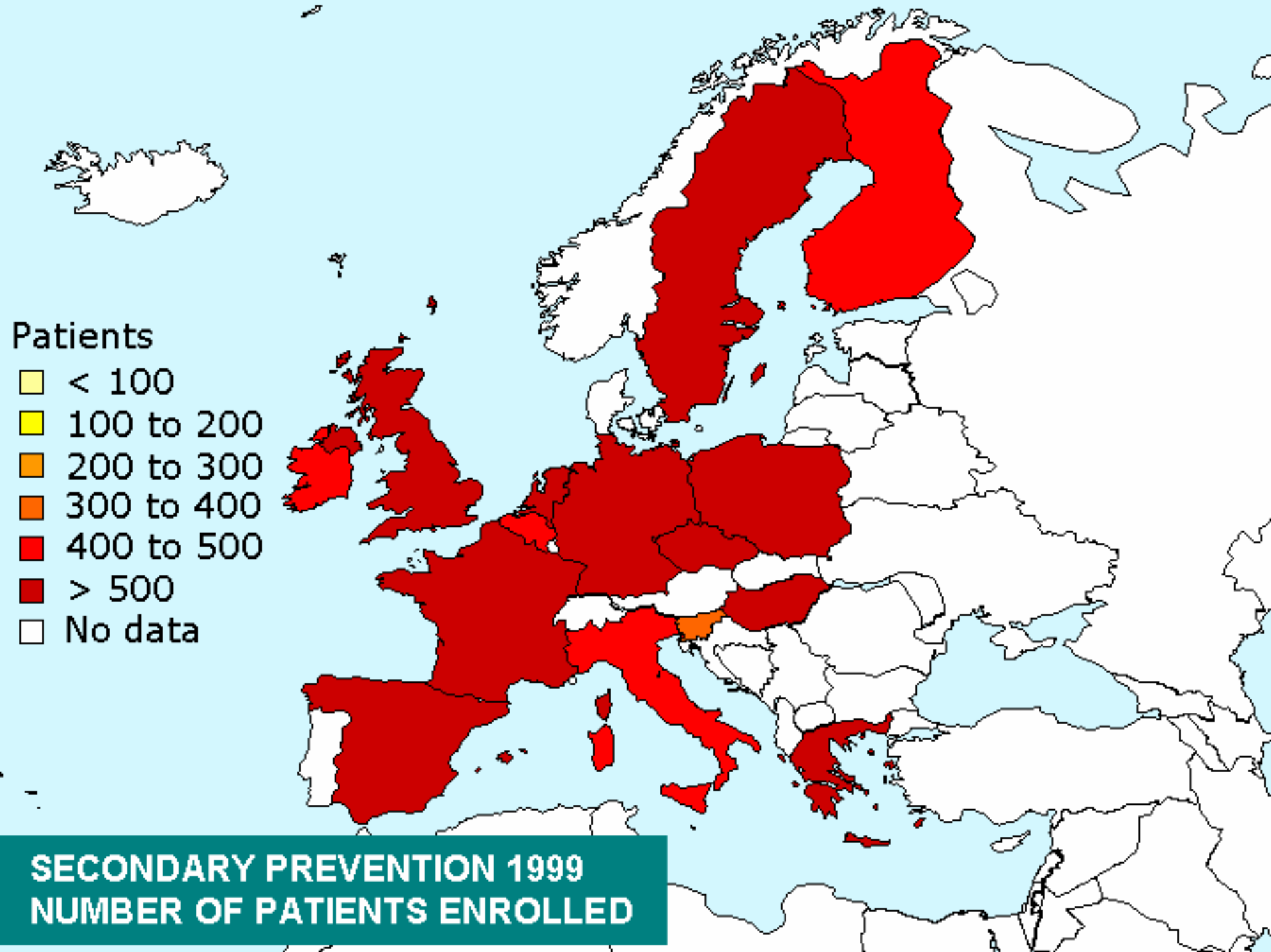
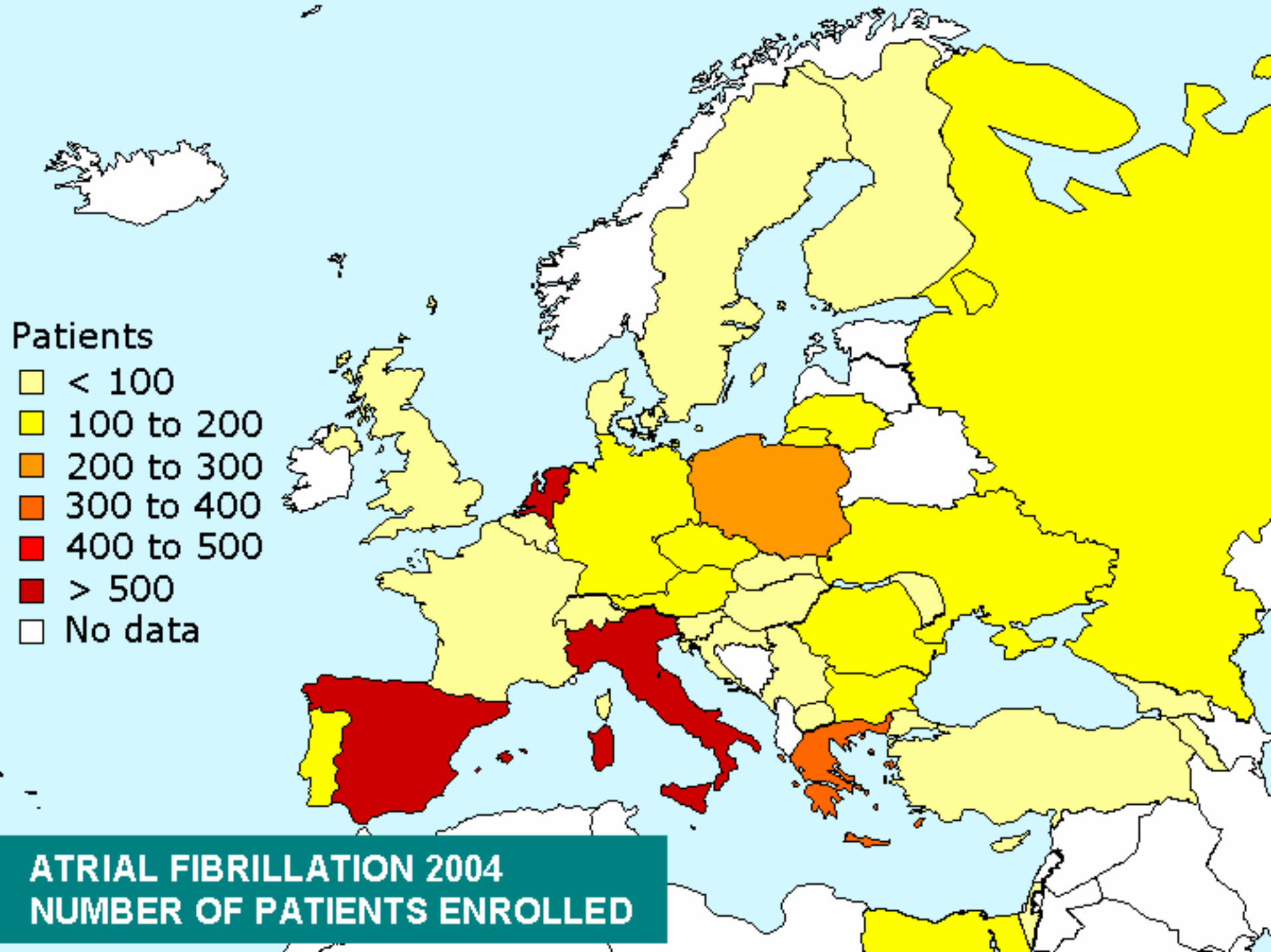


**EURO HEART SURVEY
PARTICIPATING COUNTRIES**





Patients

- < 100
- 100 to 200
- 200 to 300
- 300 to 400
- 400 to 500
- > 500
- No data

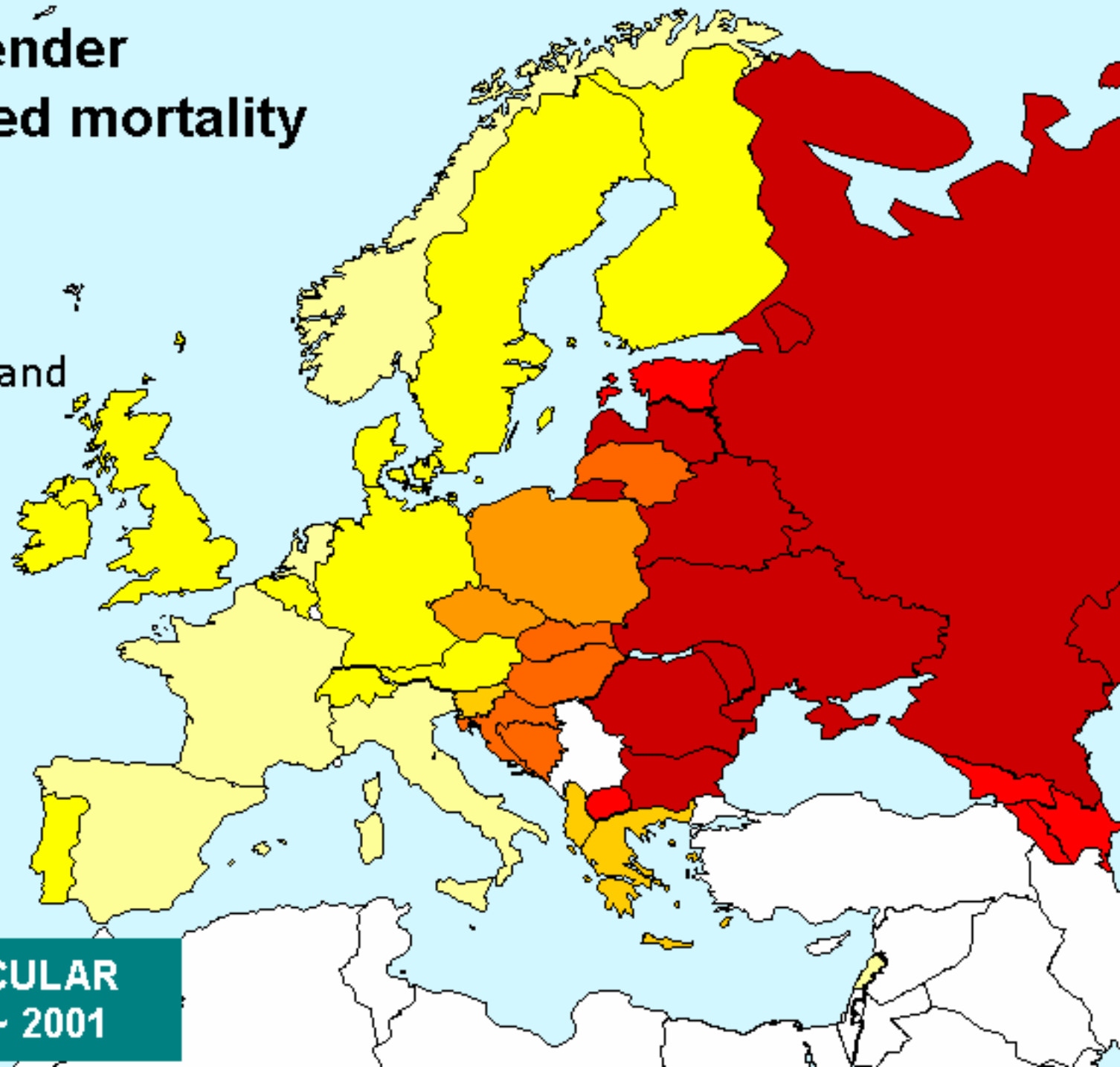
**ATRIAL FIBRILLATION 2004
NUMBER OF PATIENTS ENROLLED**

Age and gender standardised mortality



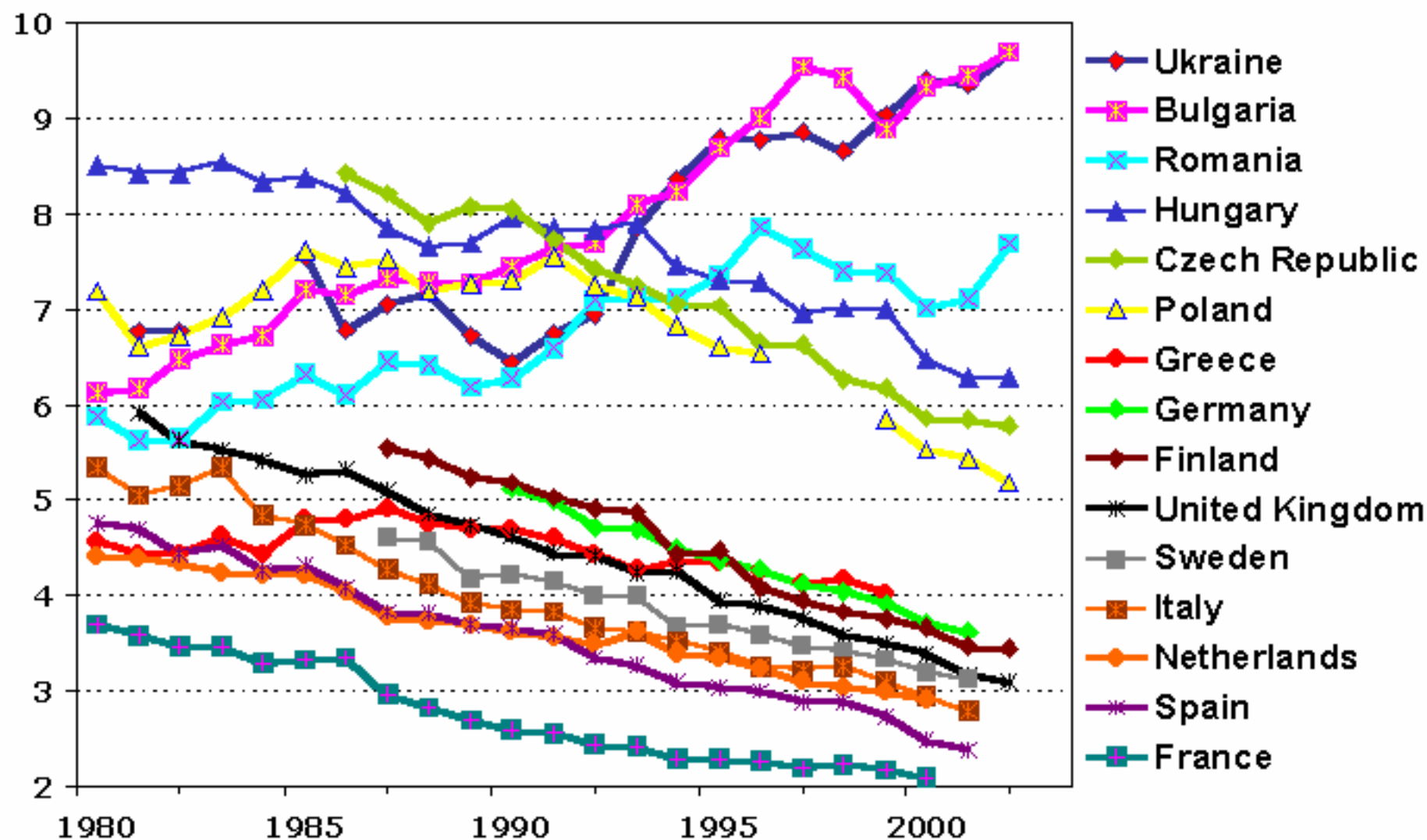
Number/thousand

-  < 3
-  3 to 4
-  4 to 5
-  5 to 6
-  6 to 7
-  7 to 8
-  > 8
-  No data

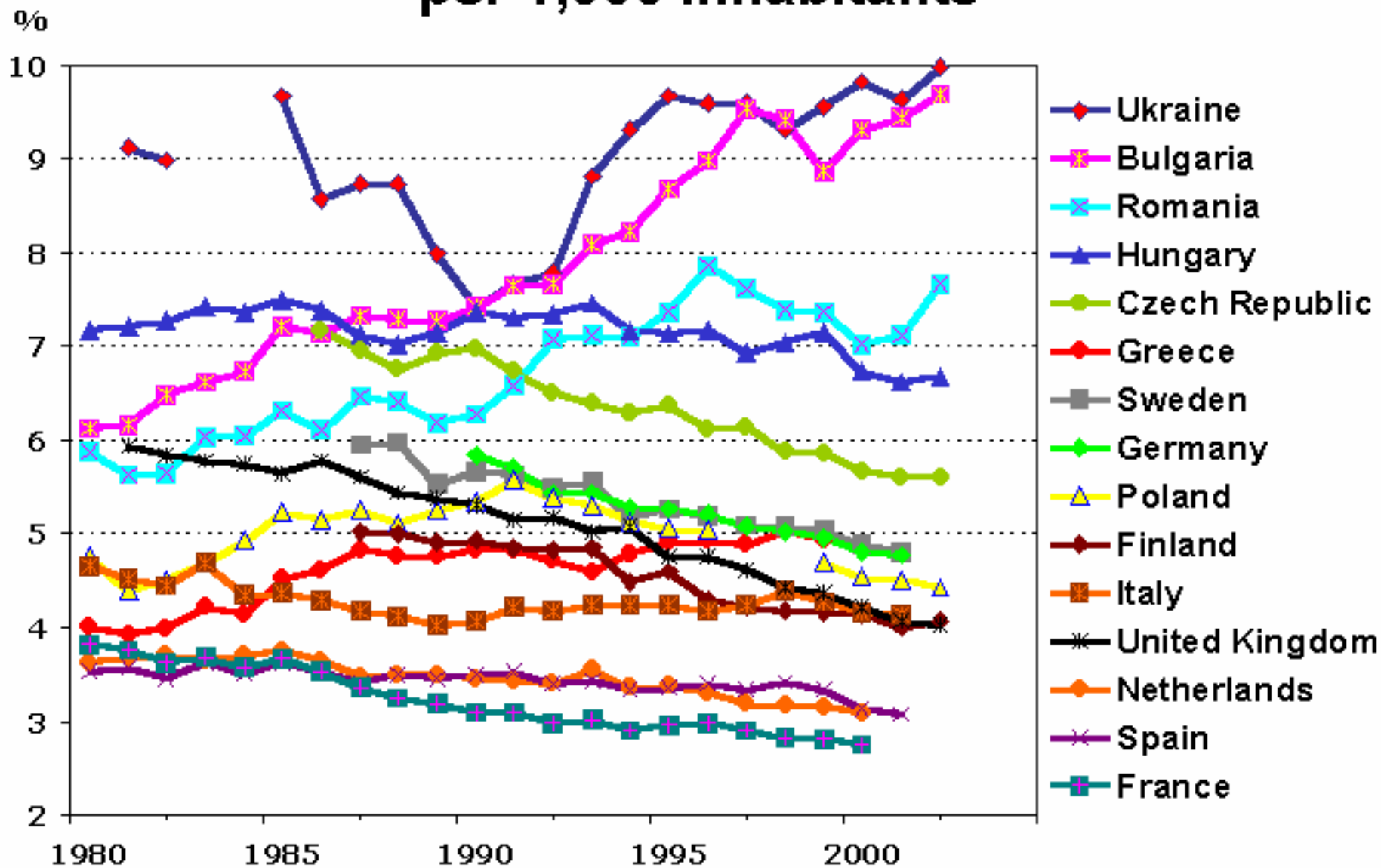


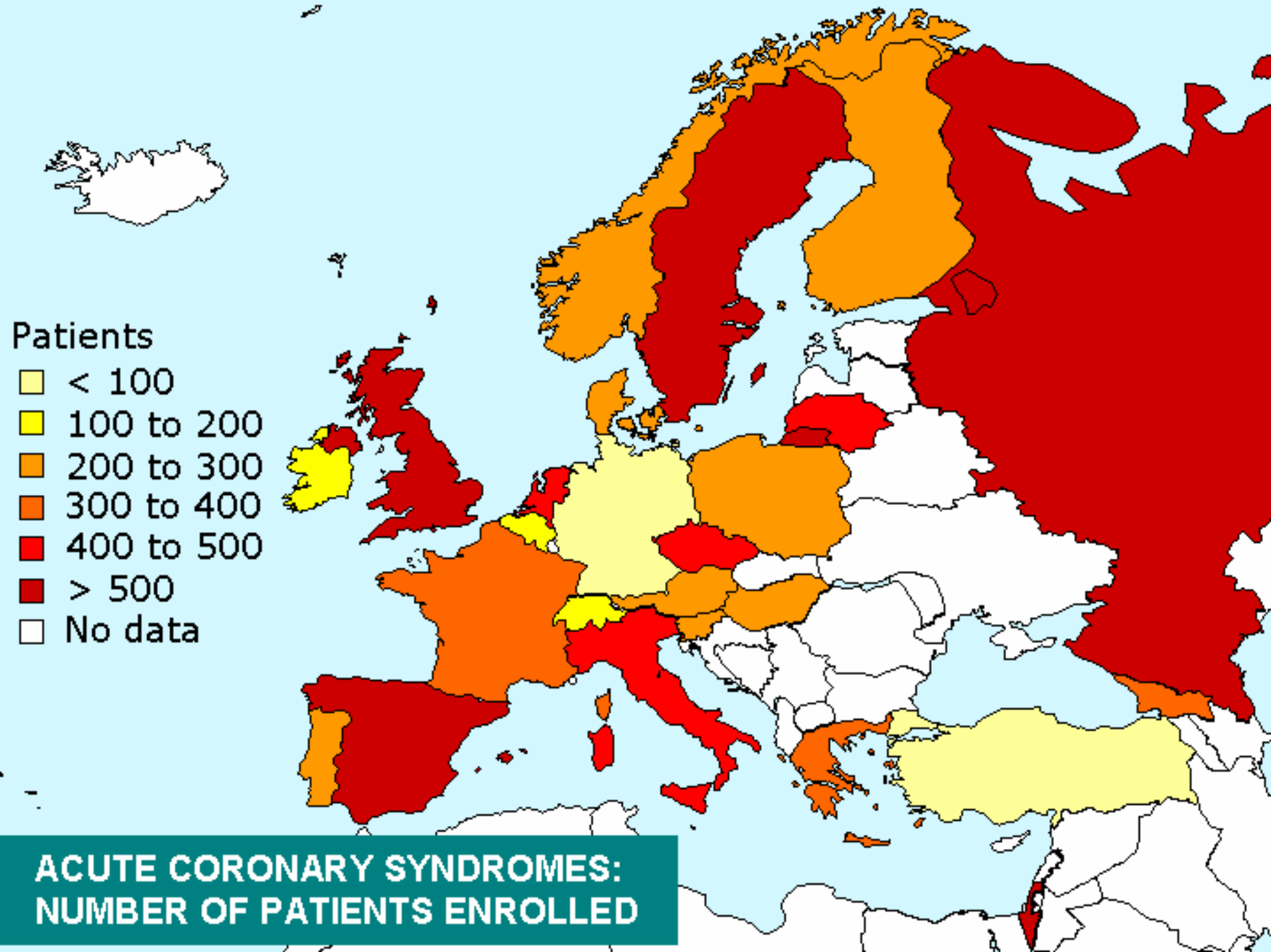
**CARDIOVASCULAR
MORTALITY ~ 2001**

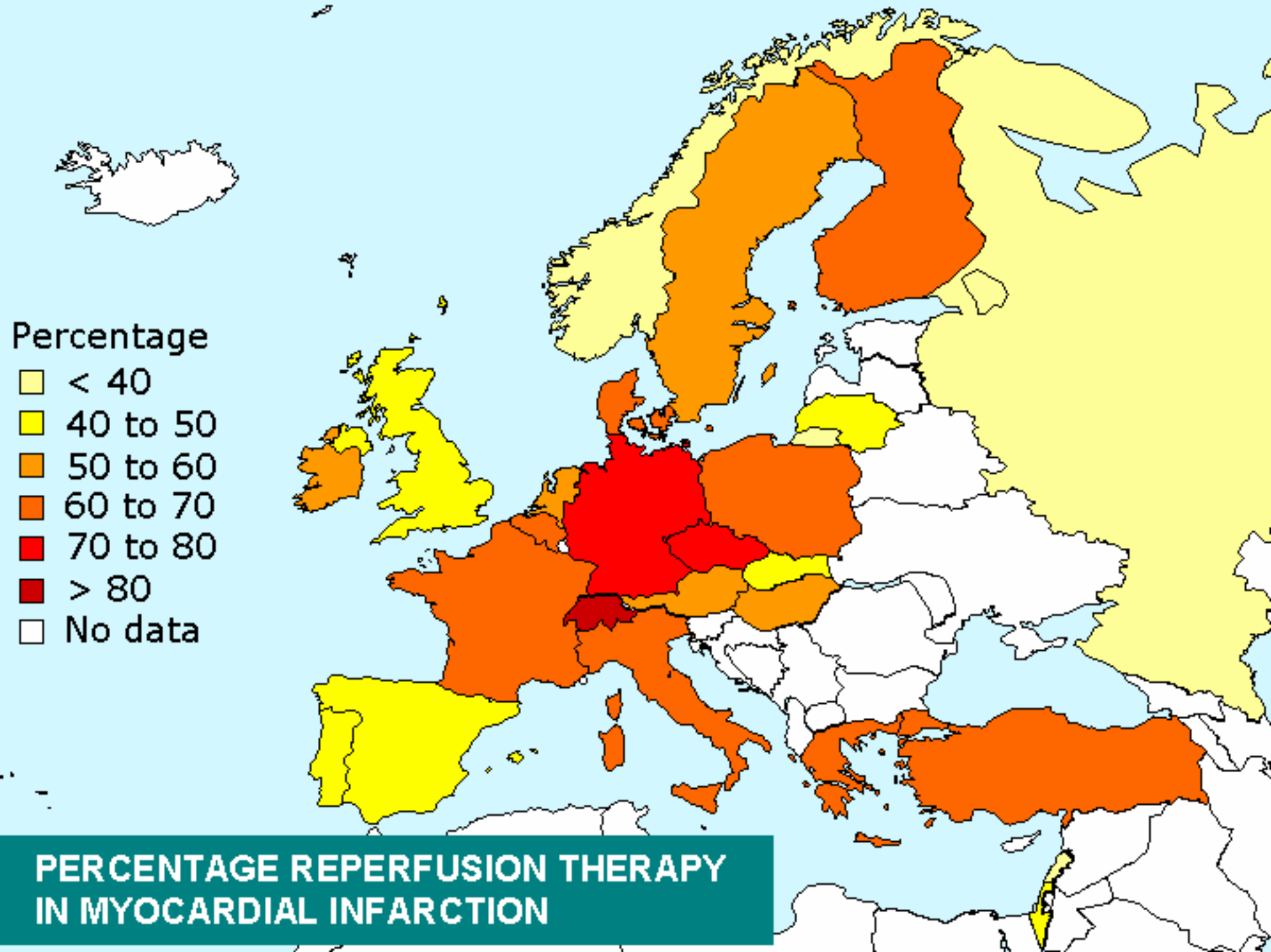
Age and gender standardised cardiovascular mortality per 1,000 inhabitants

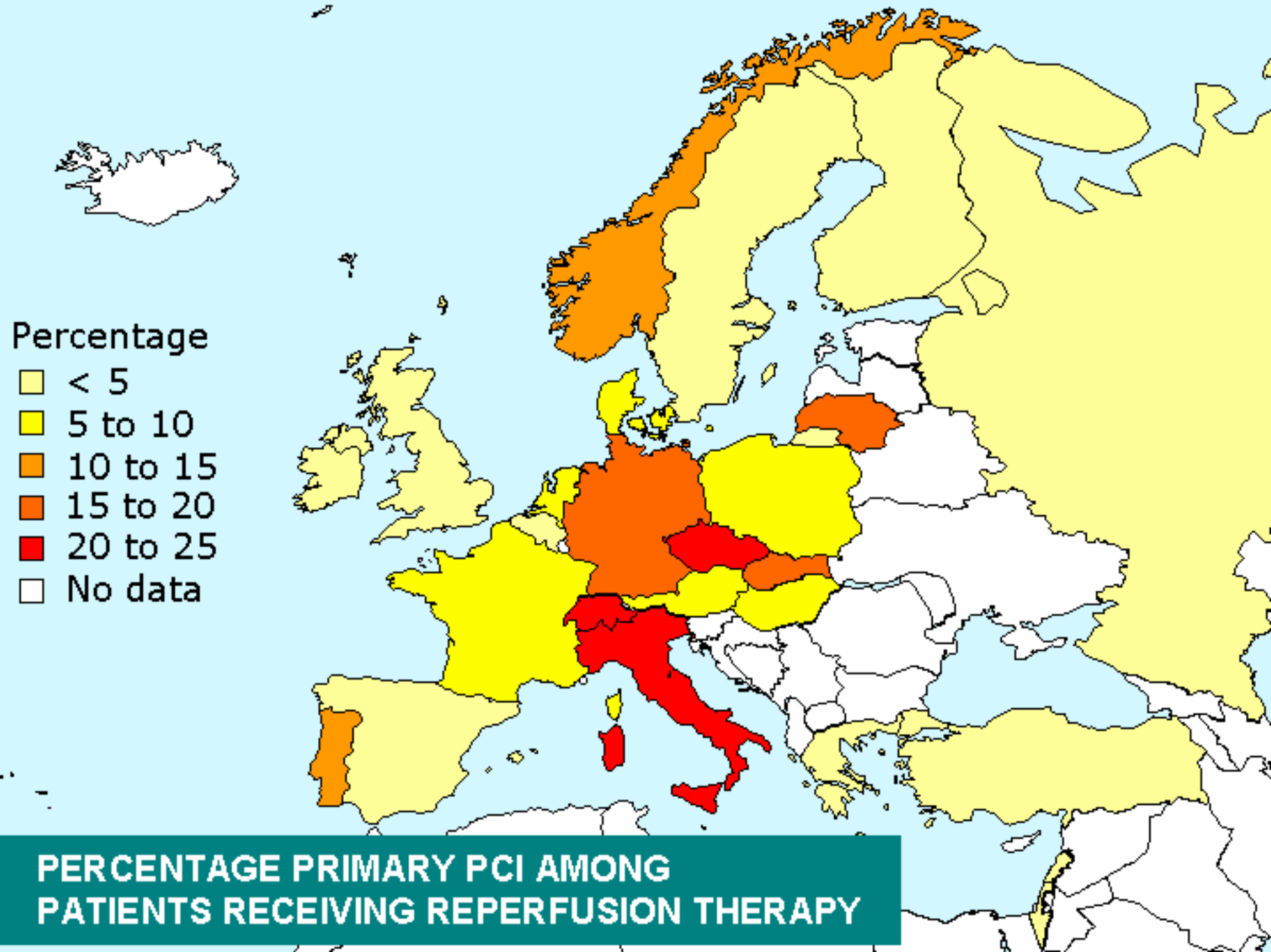


Crude cardiovascular mortality per 1,000 inhabitants









Percentage

- < 5
- 5 to 10
- 10 to 15
- 15 to 20
- 20 to 25
- No data

PERCENTAGE PRIMARY PCI AMONG PATIENTS RECEIVING REPERFUSION THERAPY

Time from emergency room to start of fibrinolytic therapy

minutes

300

240

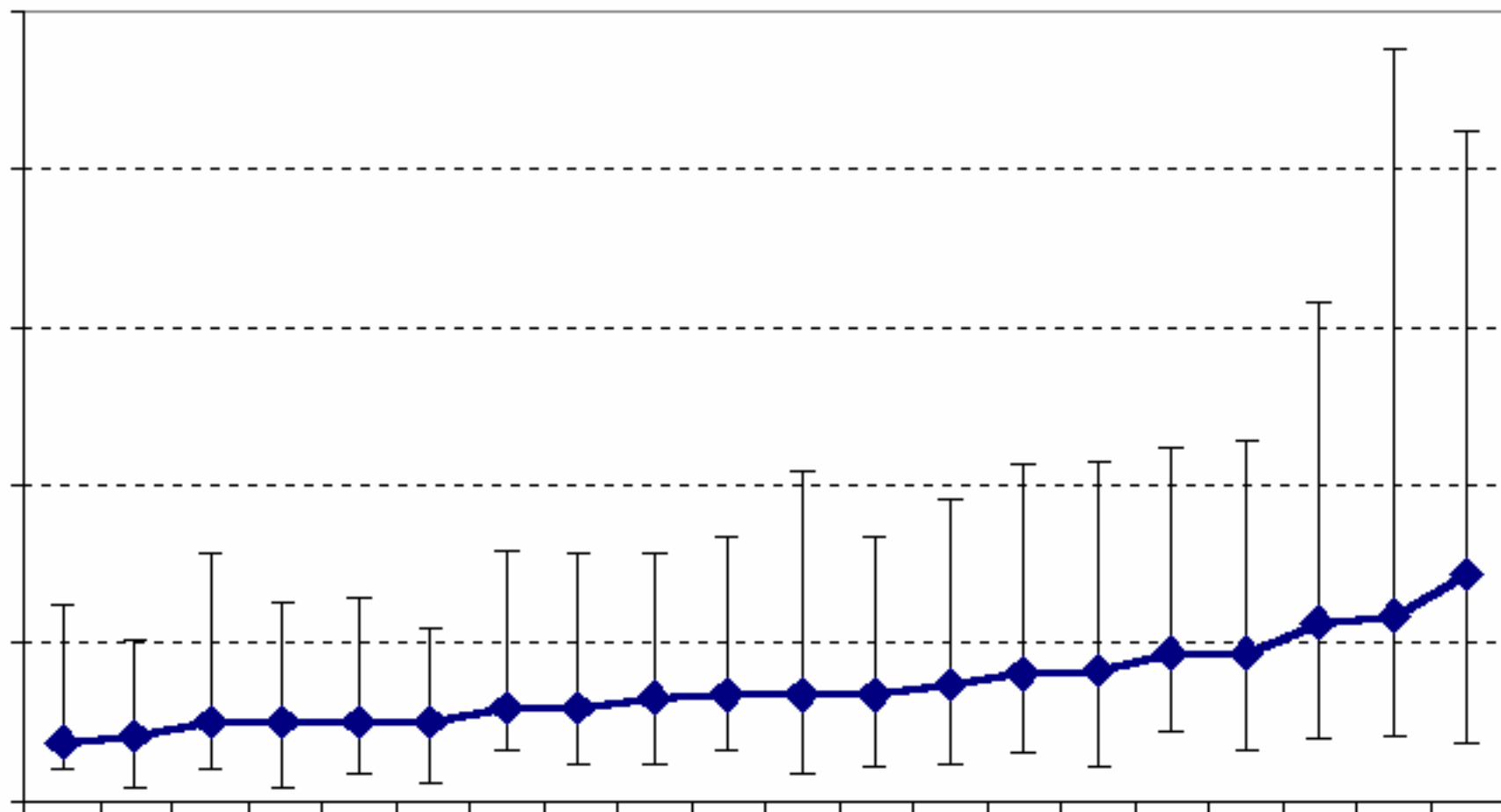
180

120

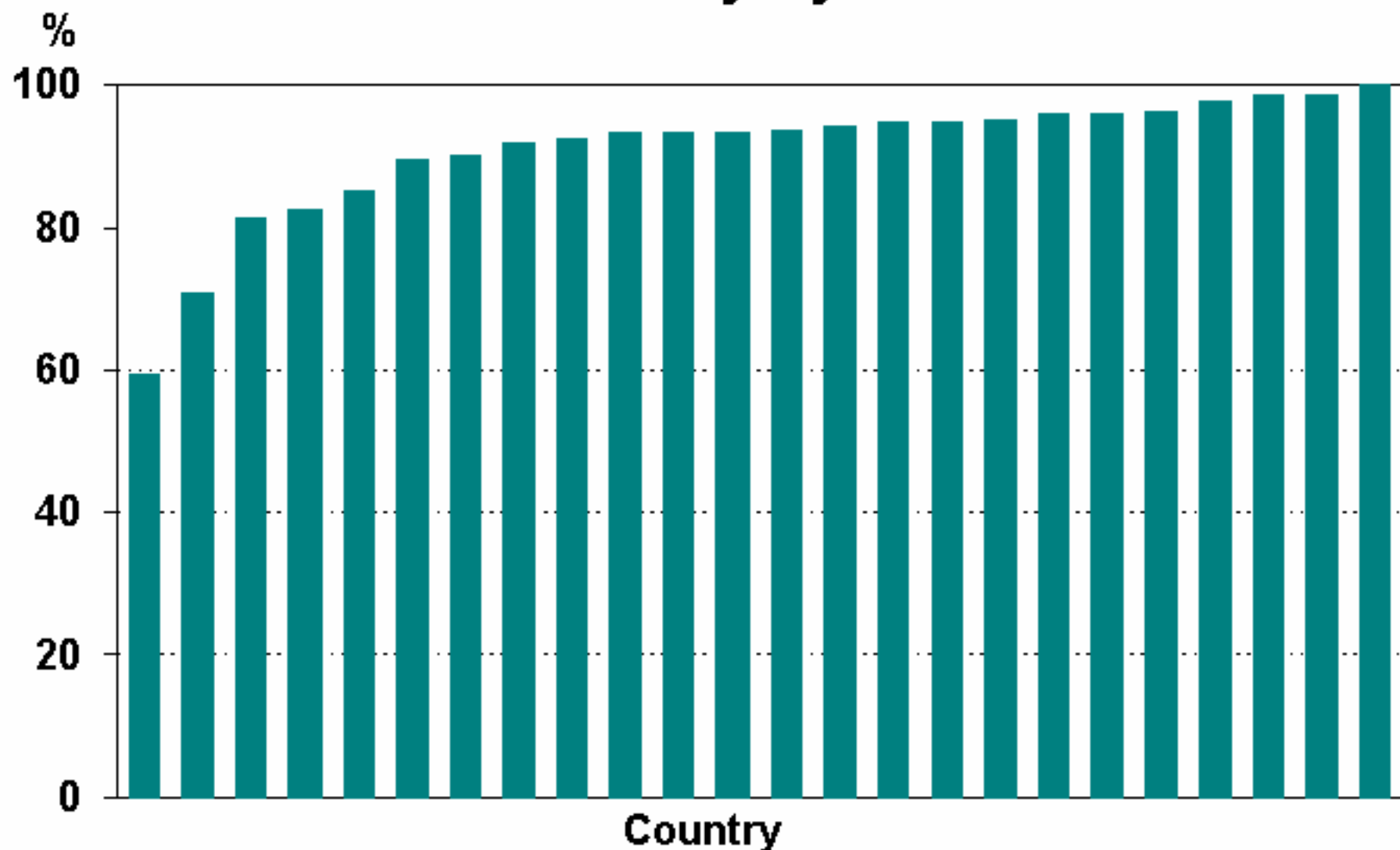
60

0

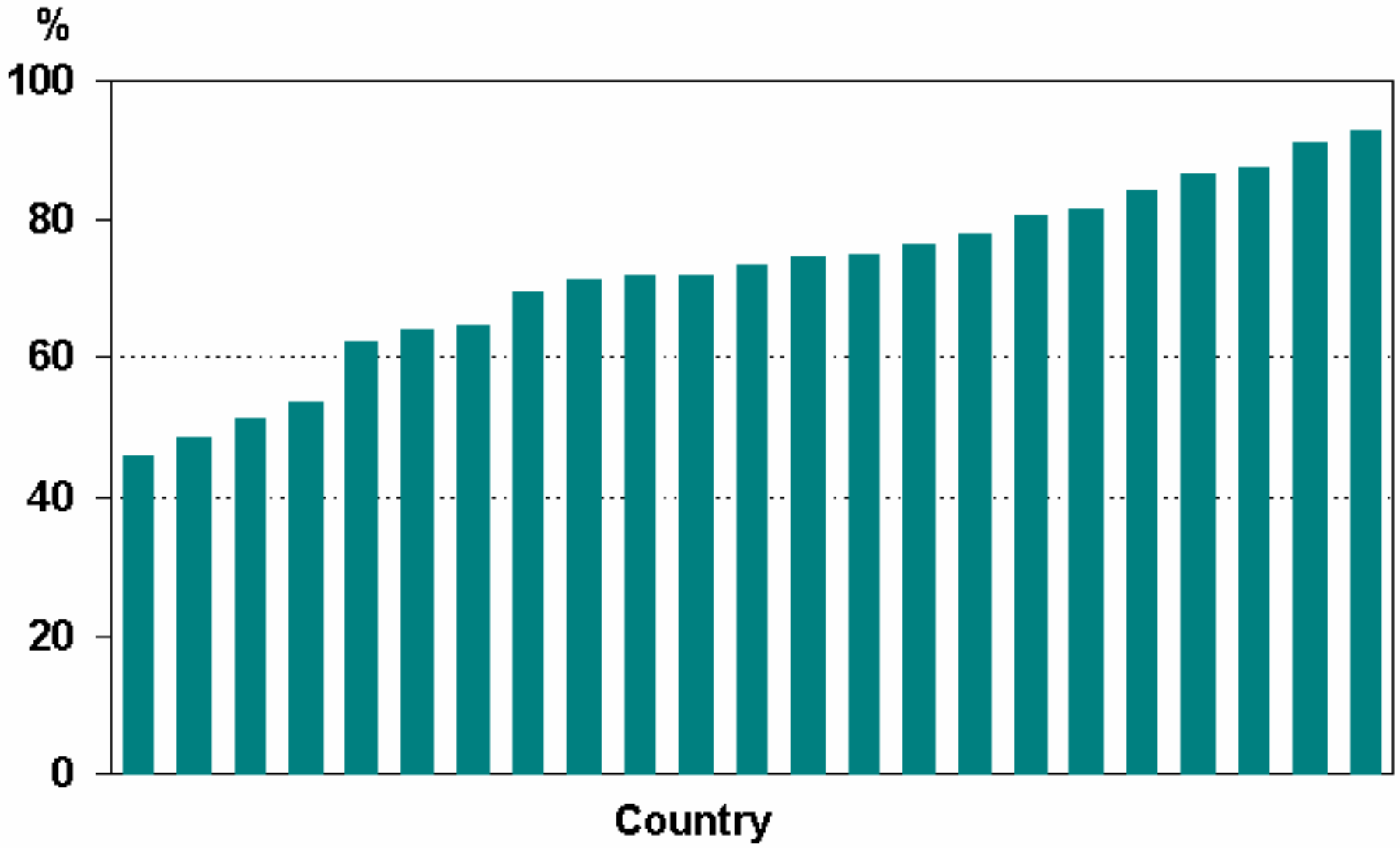
Country



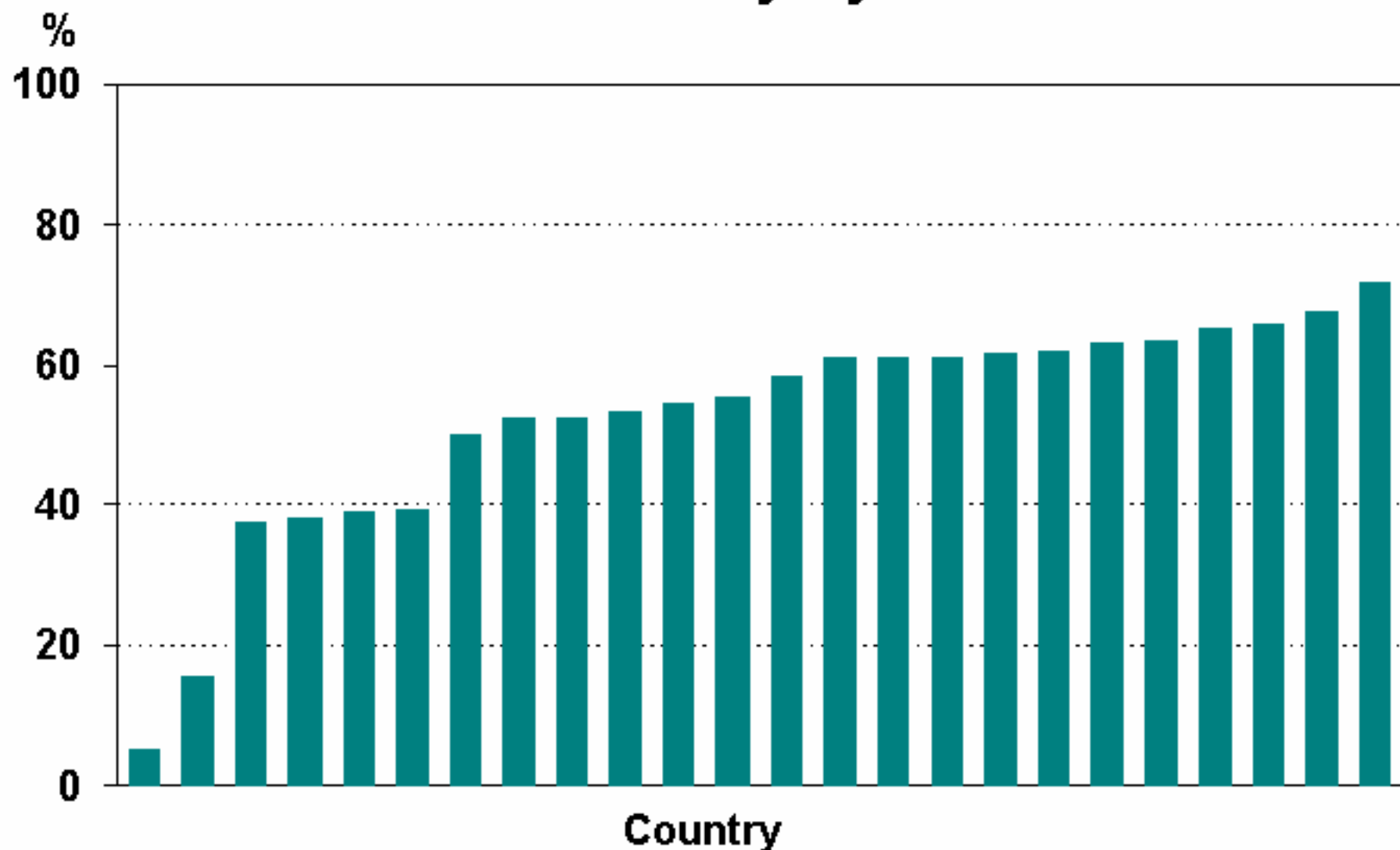
Antiplatelet therapy at hospital discharge in Acute Coronary Syndromes



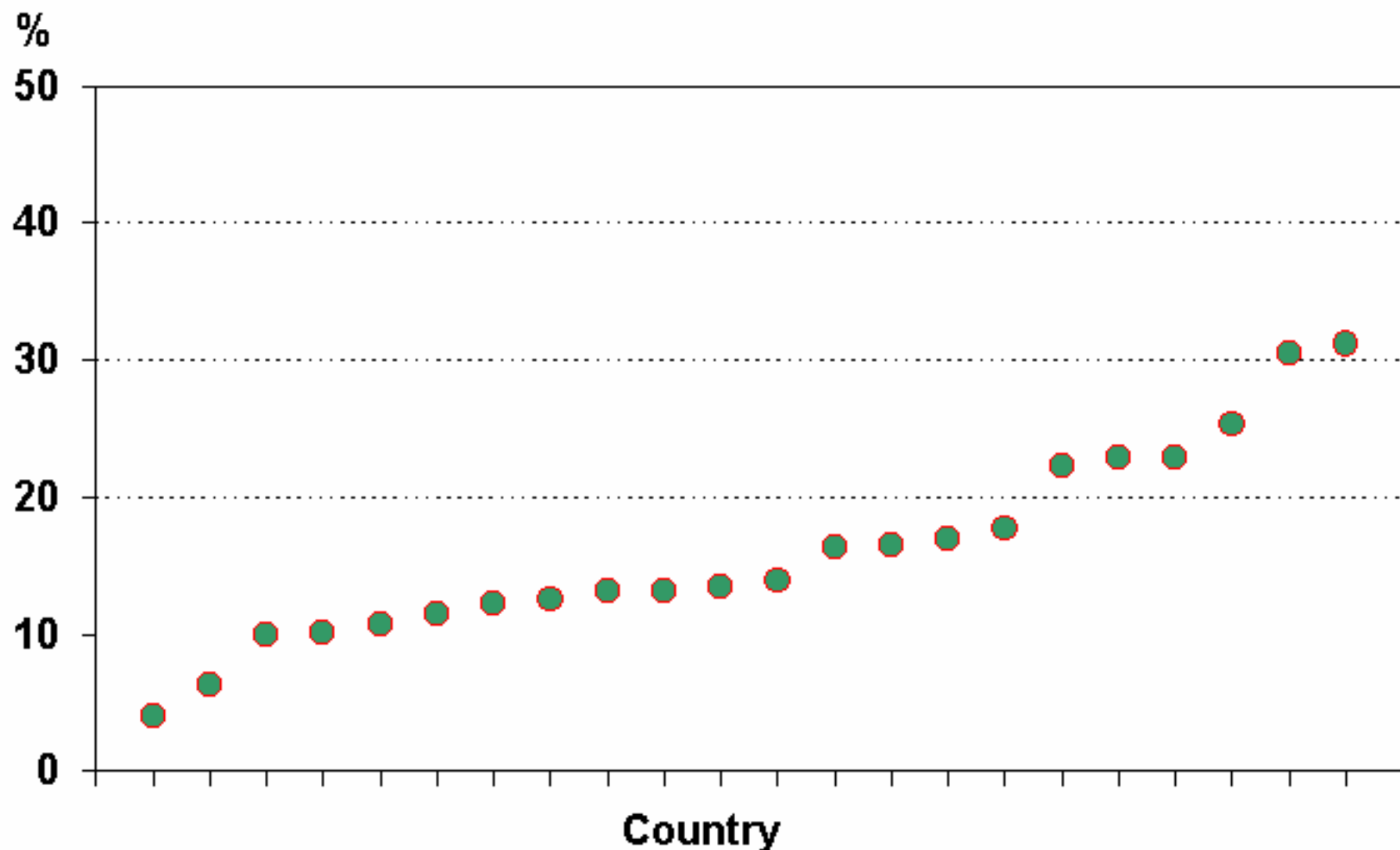
Beta-blocker therapy at hospital discharge in Acute Coronary Syndromes



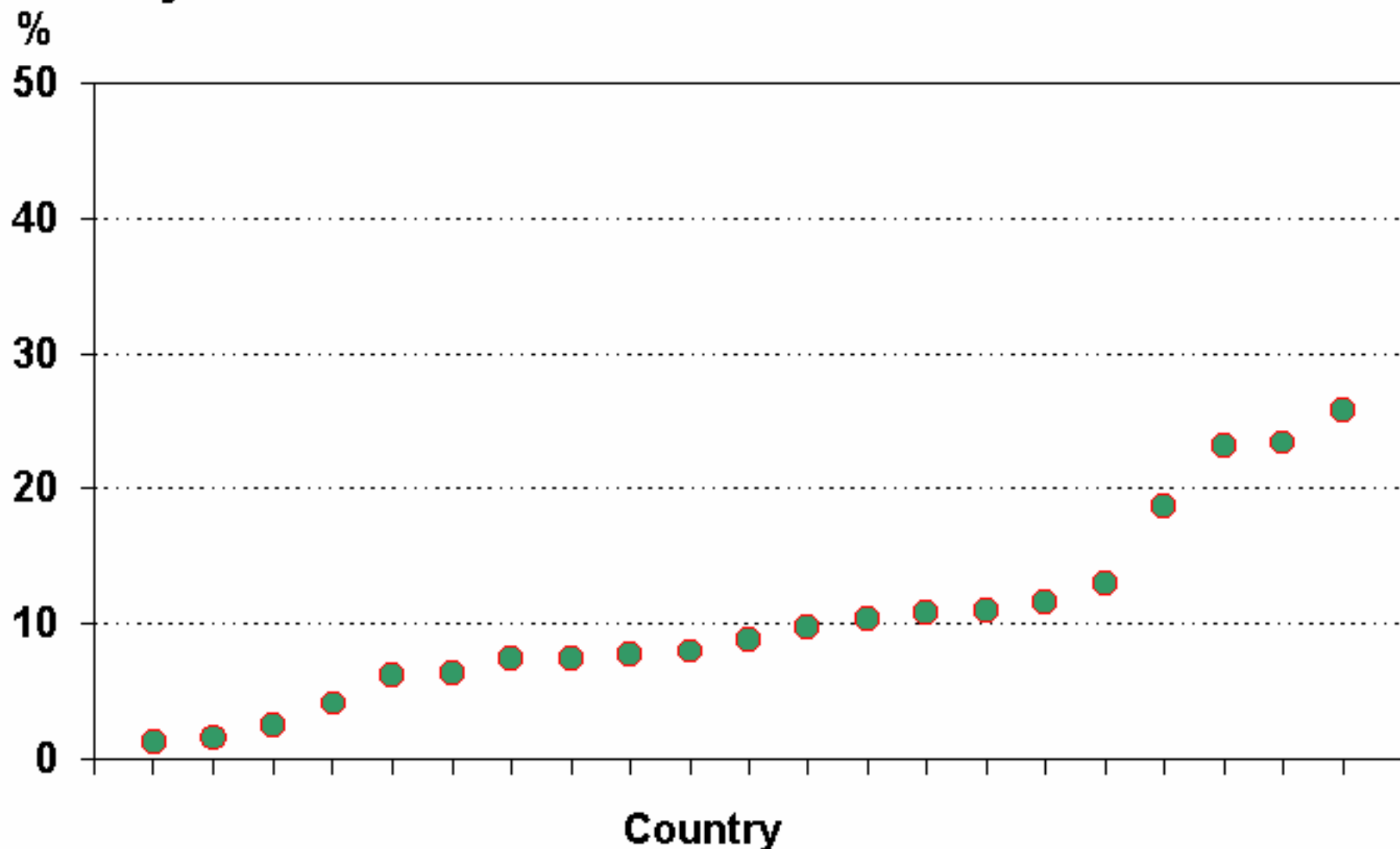
Lipid lowering therapy at hospital discharge in Acute Coronary Syndromes



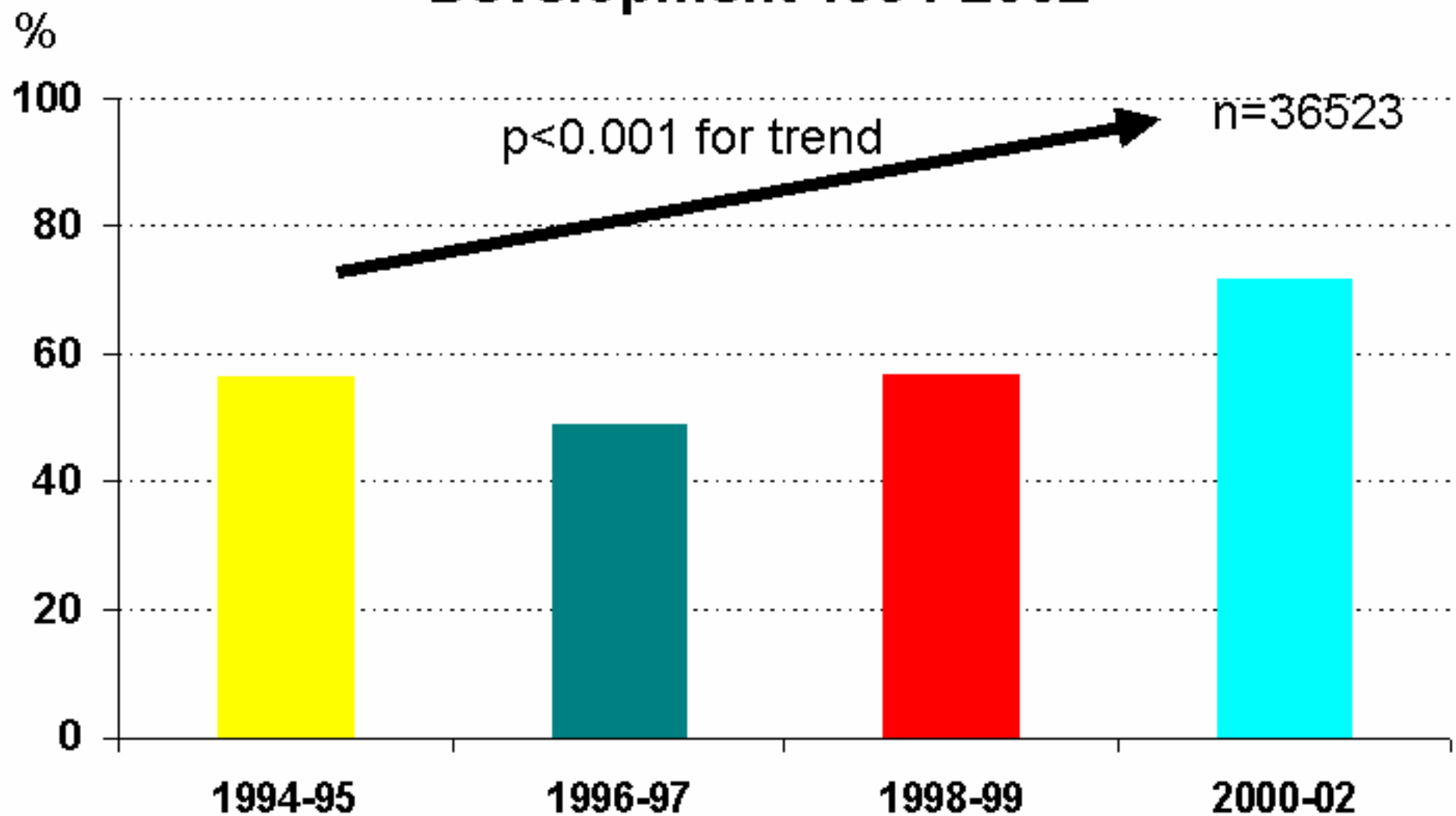
30-day mortality in myocardial infarction admitted with ST-elevation



30-day mortality in Acute Coronary Syndromes admitted without ST-elevation

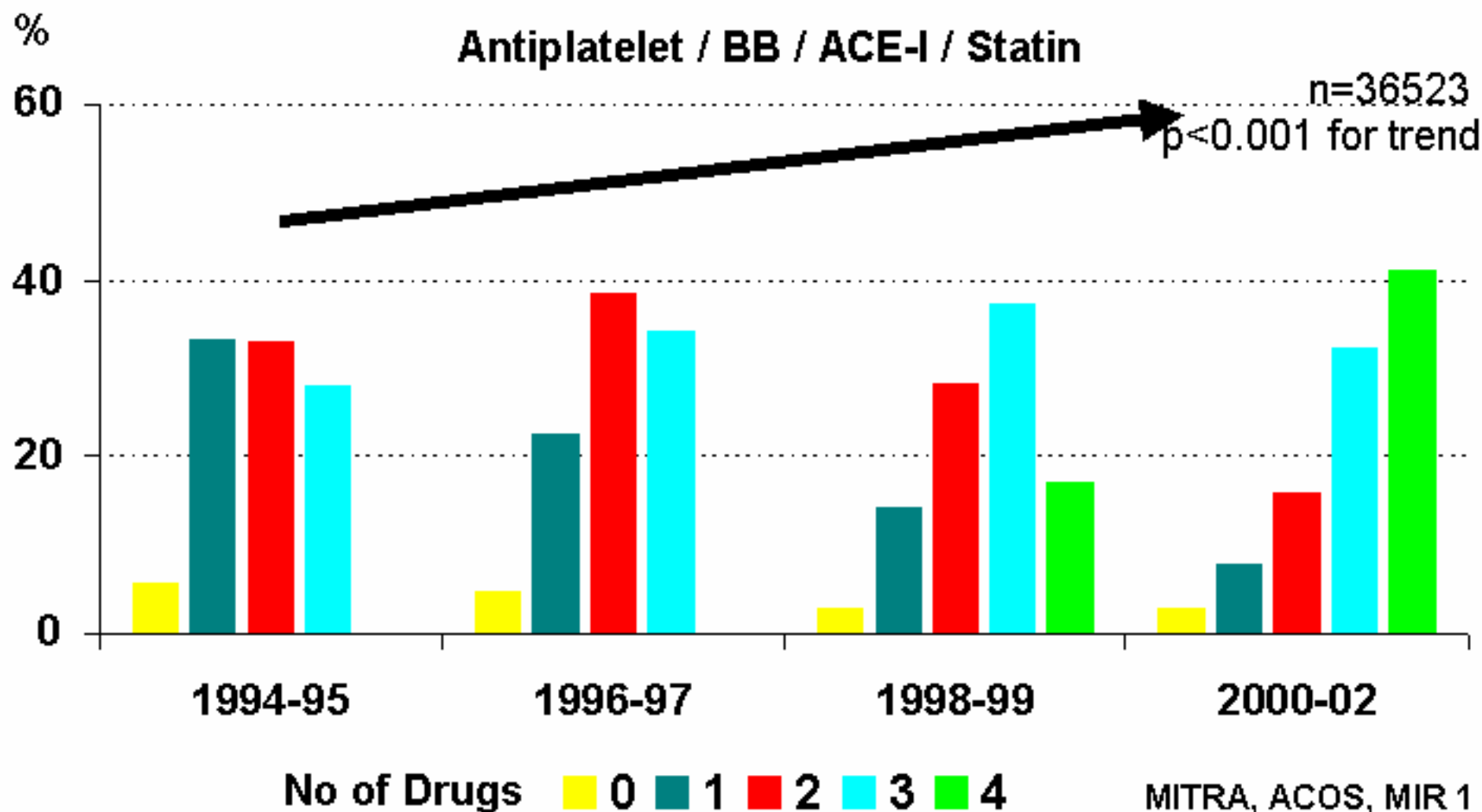


Acute Reperfusion of STEMI Development 1994-2002

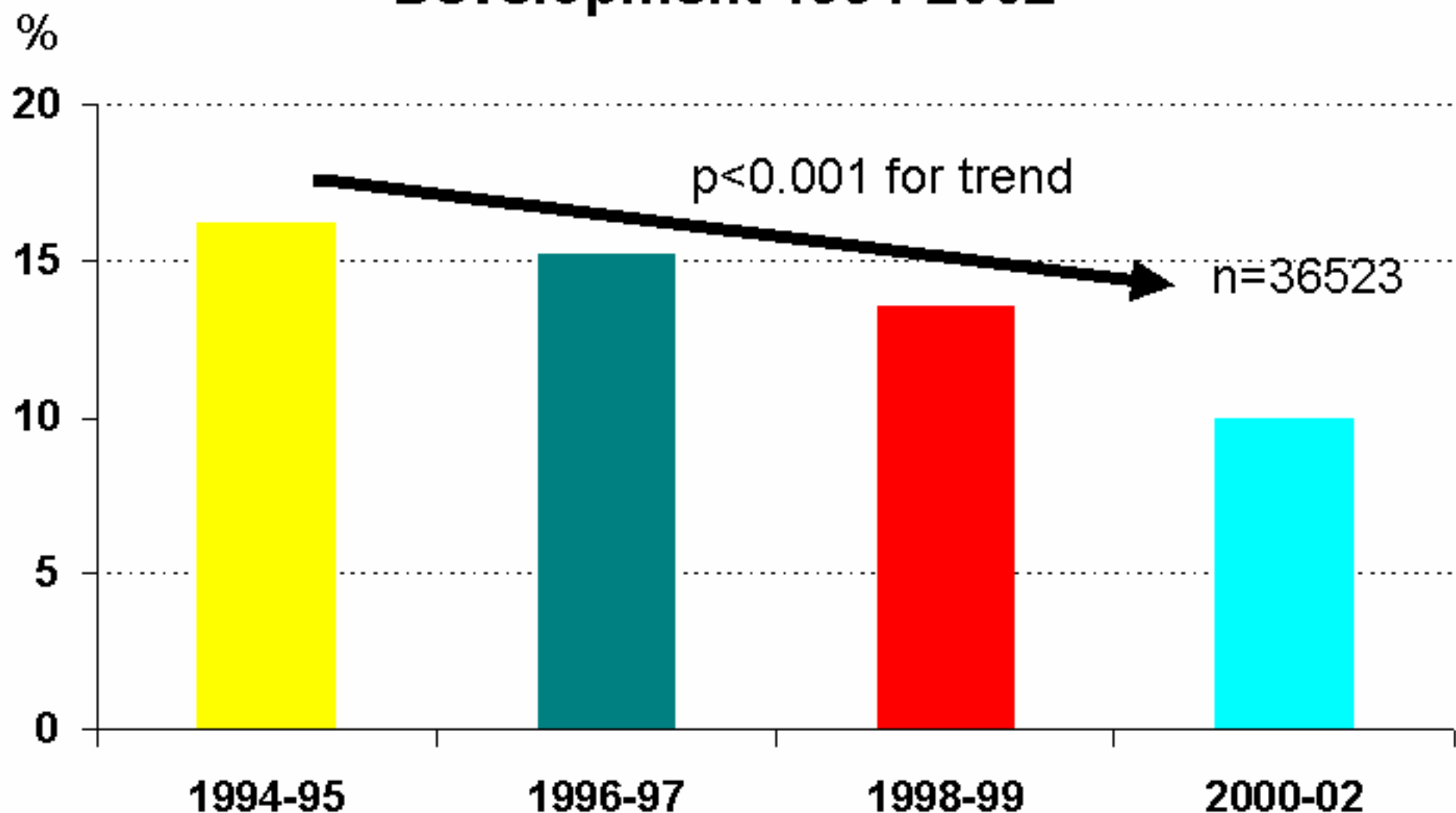


MITRA, ACOS, MIR 1

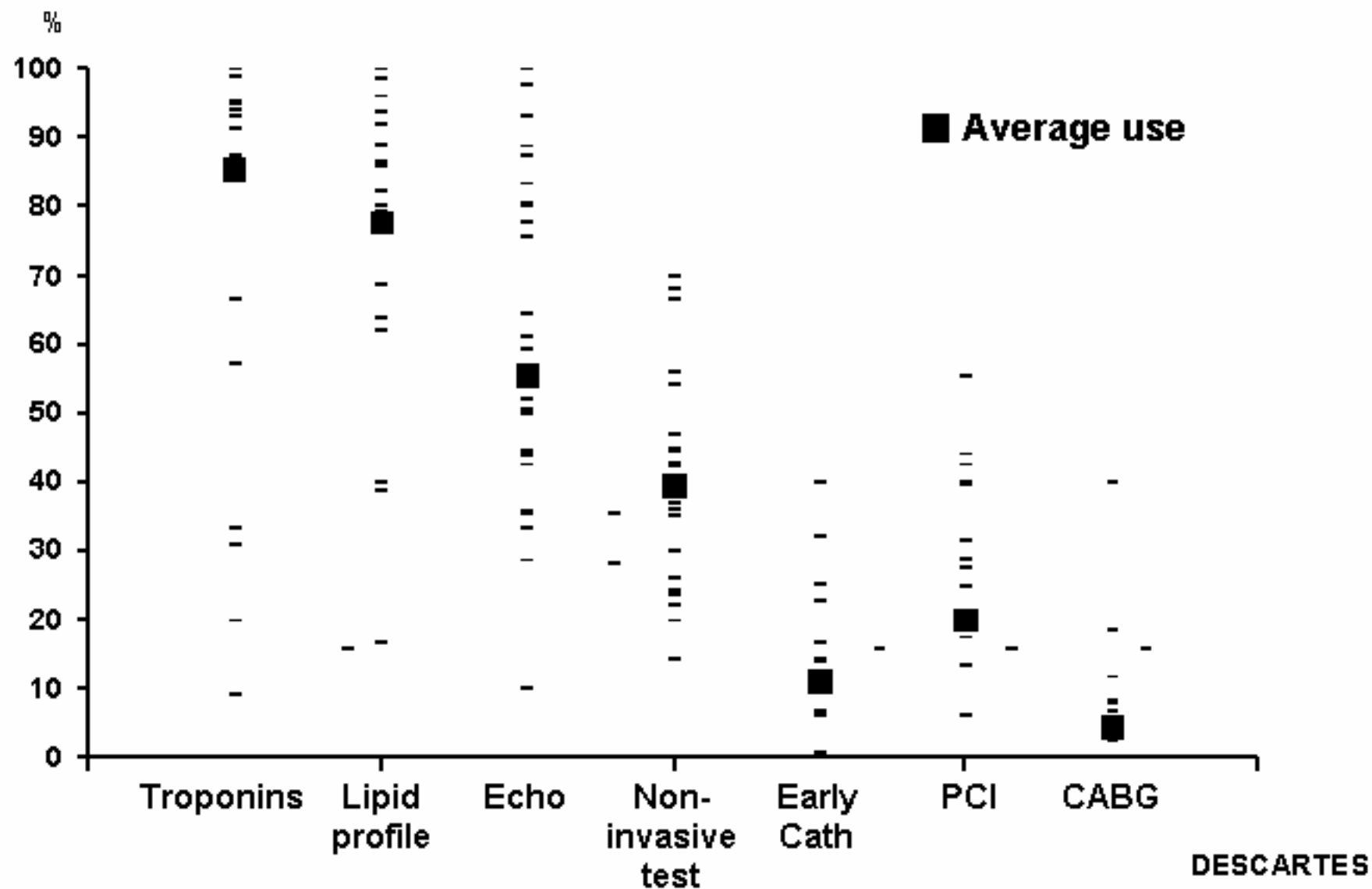
Adjunctive Tx for STEMI - Acute Phase - Combination Therapy (Number of Drugs)



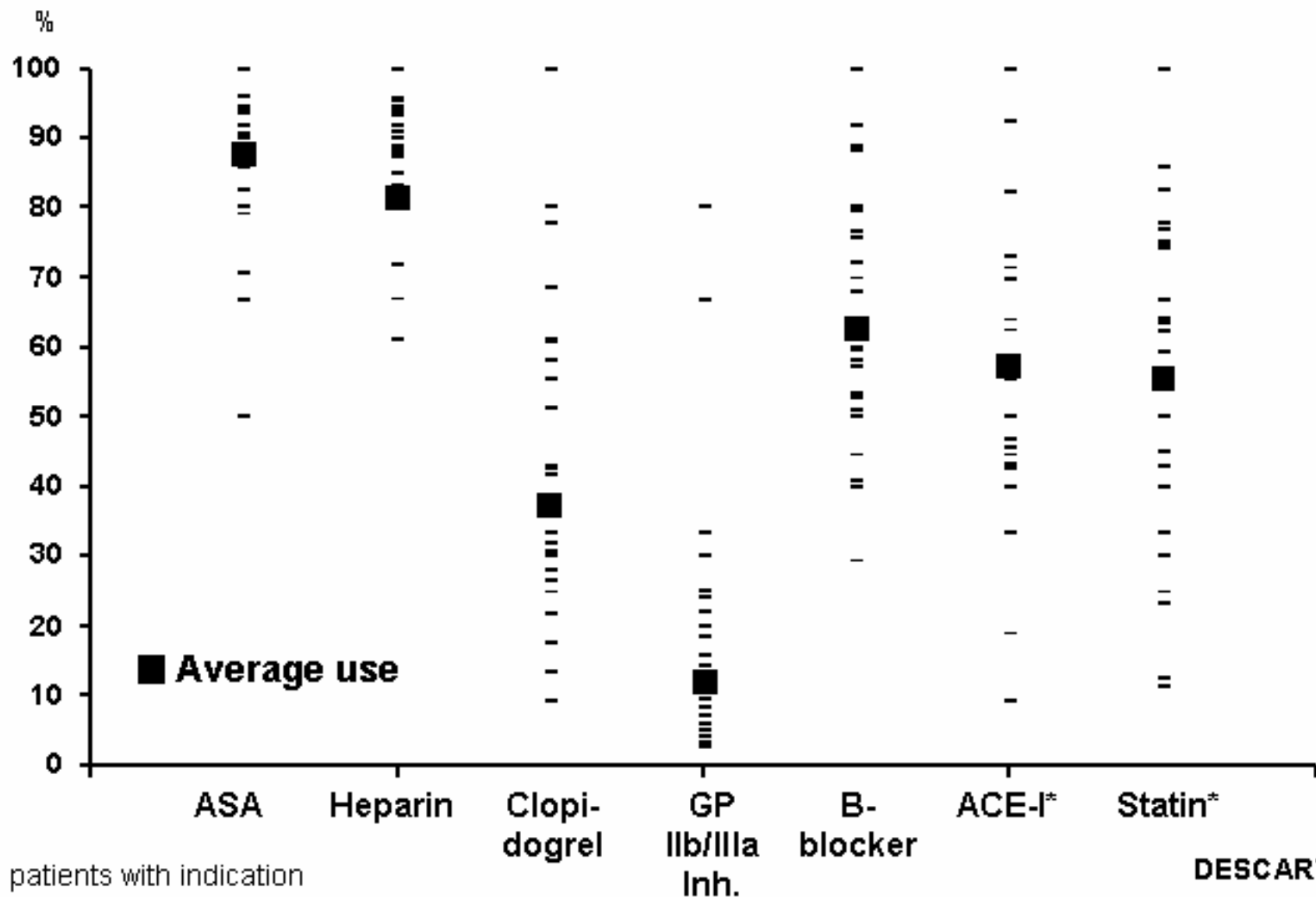
Hospital Mortality of STEMI Development 1994-2002



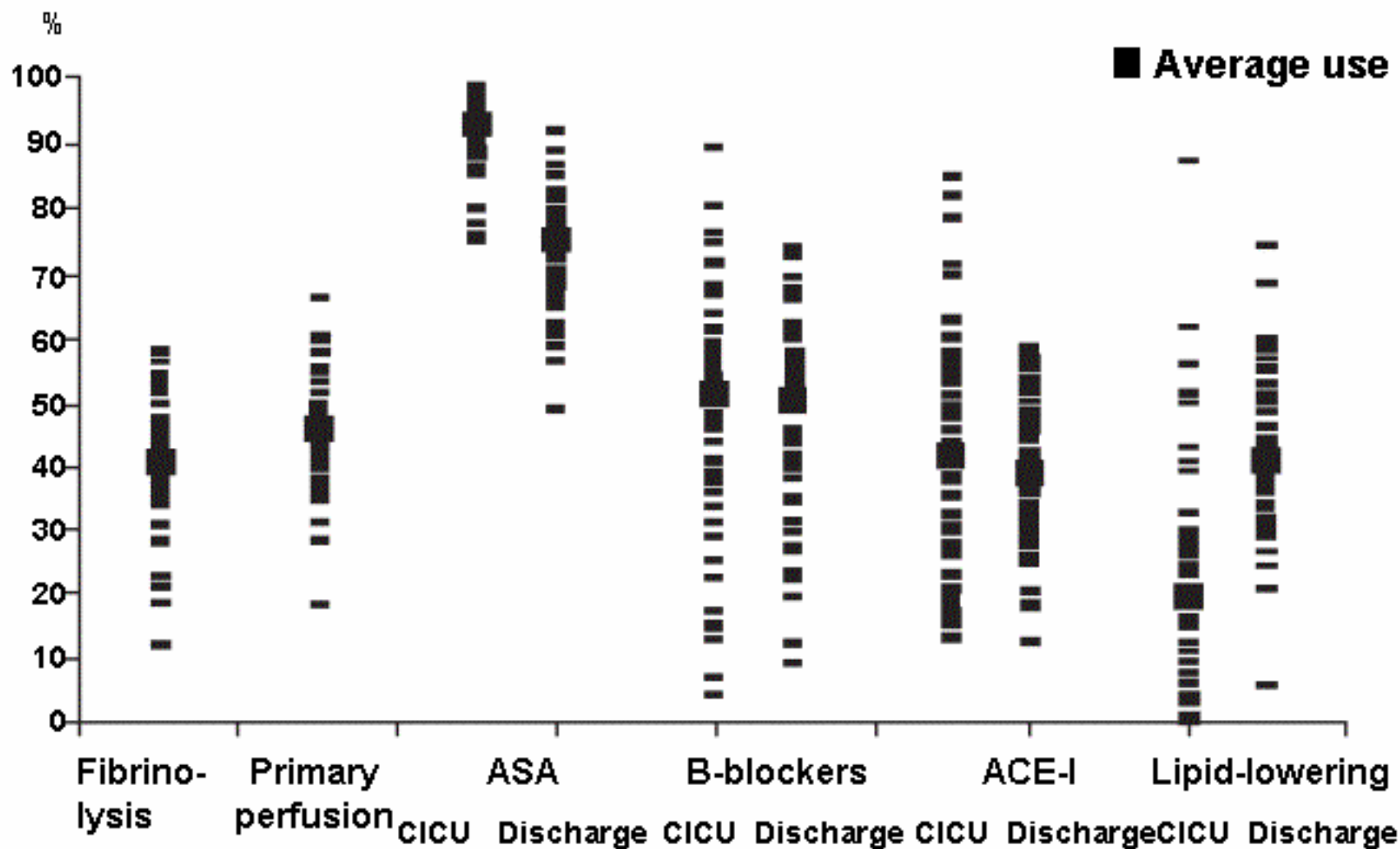
Variability in use of diagnostic studies in Non ST Elevation Acute Coronary Syndromes



Variability in treatment in Non ST Elevation Acute Coronary Syndromes

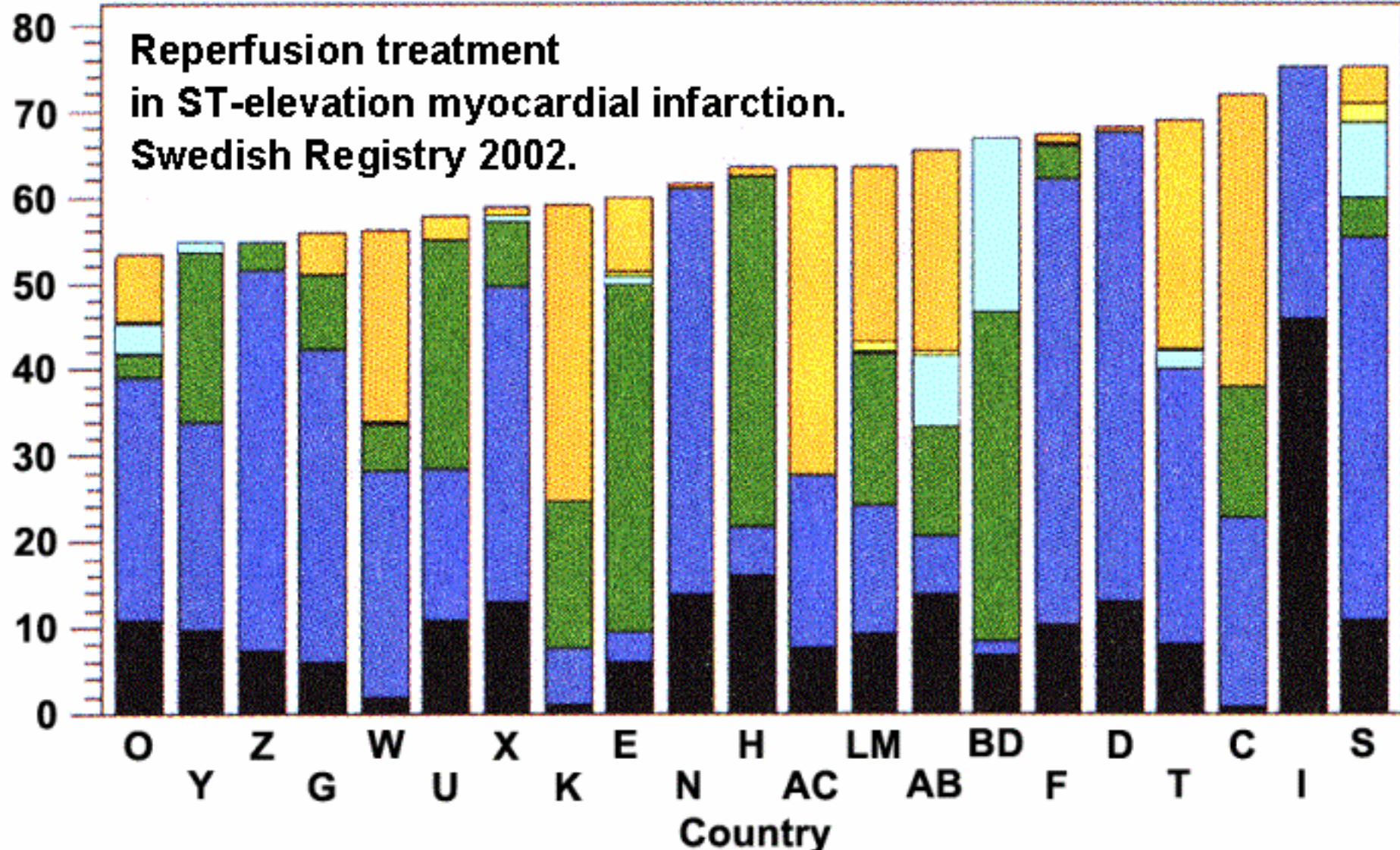


Variability in treatment in ST Elevation Myocardial Infarction



Proportion (%)

Reperfusion treatment
in ST-elevation myocardial infarction.
Swedish Registry 2002.



Minutes

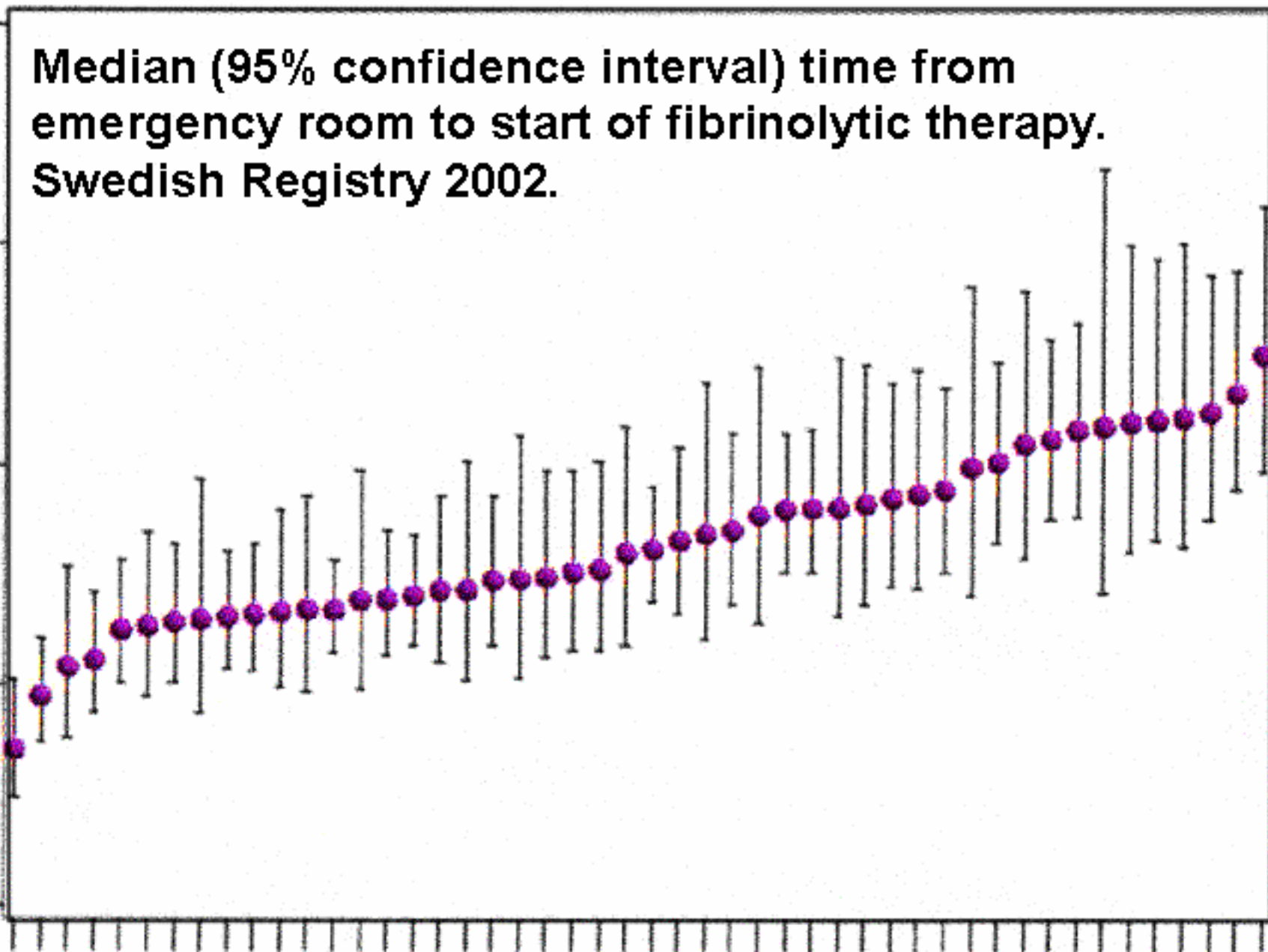
120

Median (95% confidence interval) time from emergency room to start of fibrinolytic therapy.
Swedish Registry 2002.

60

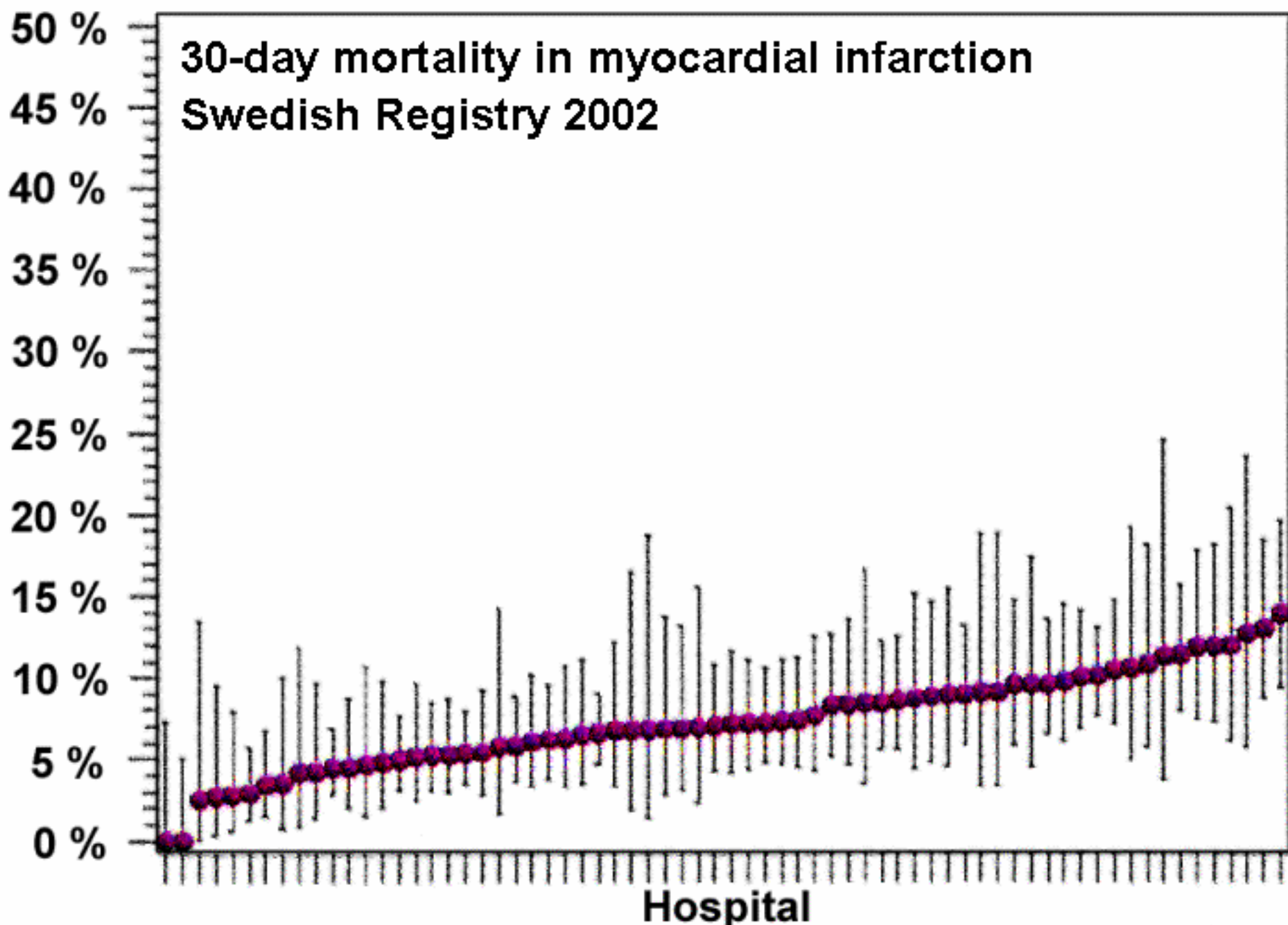
0

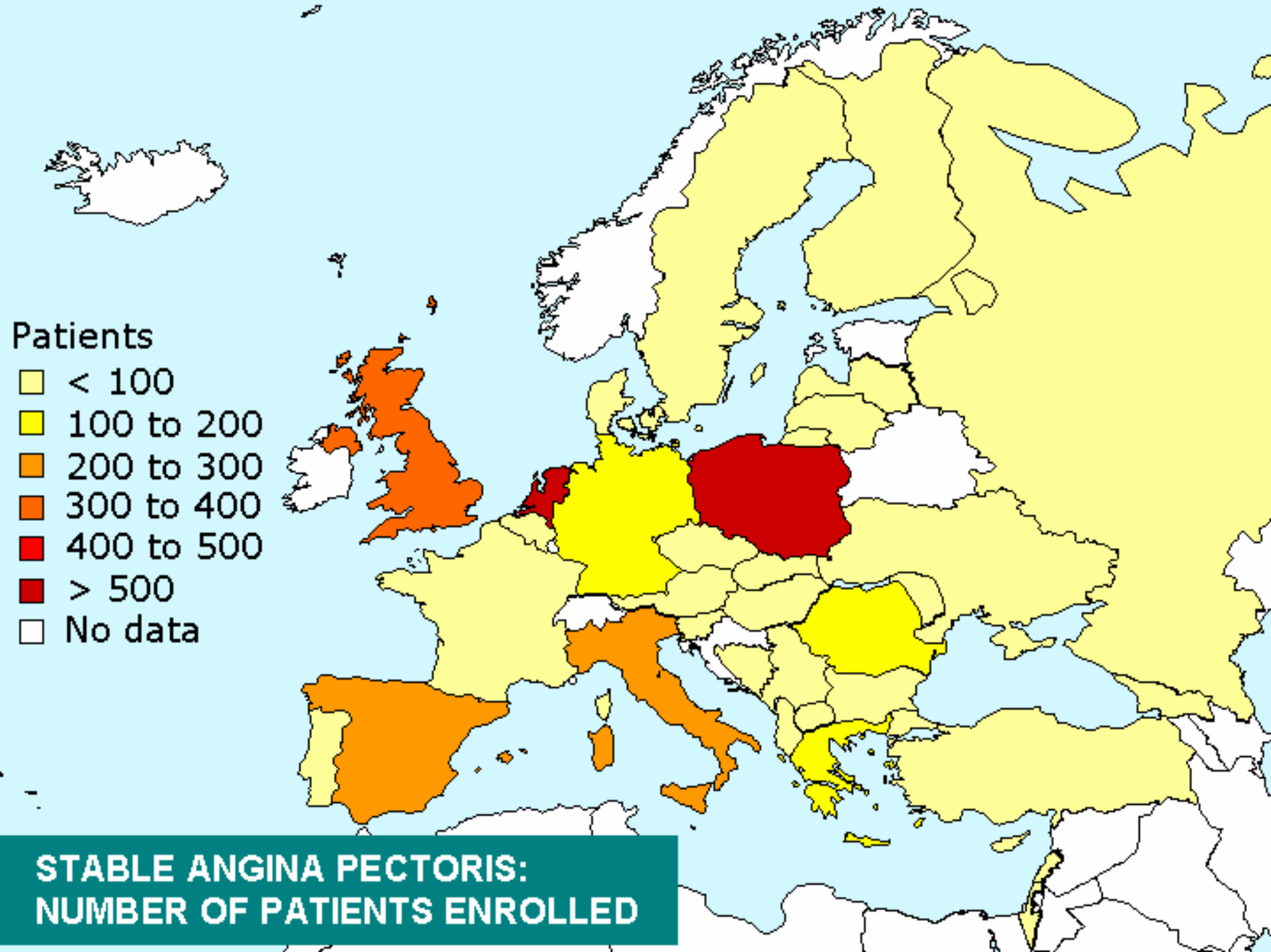
Hospital



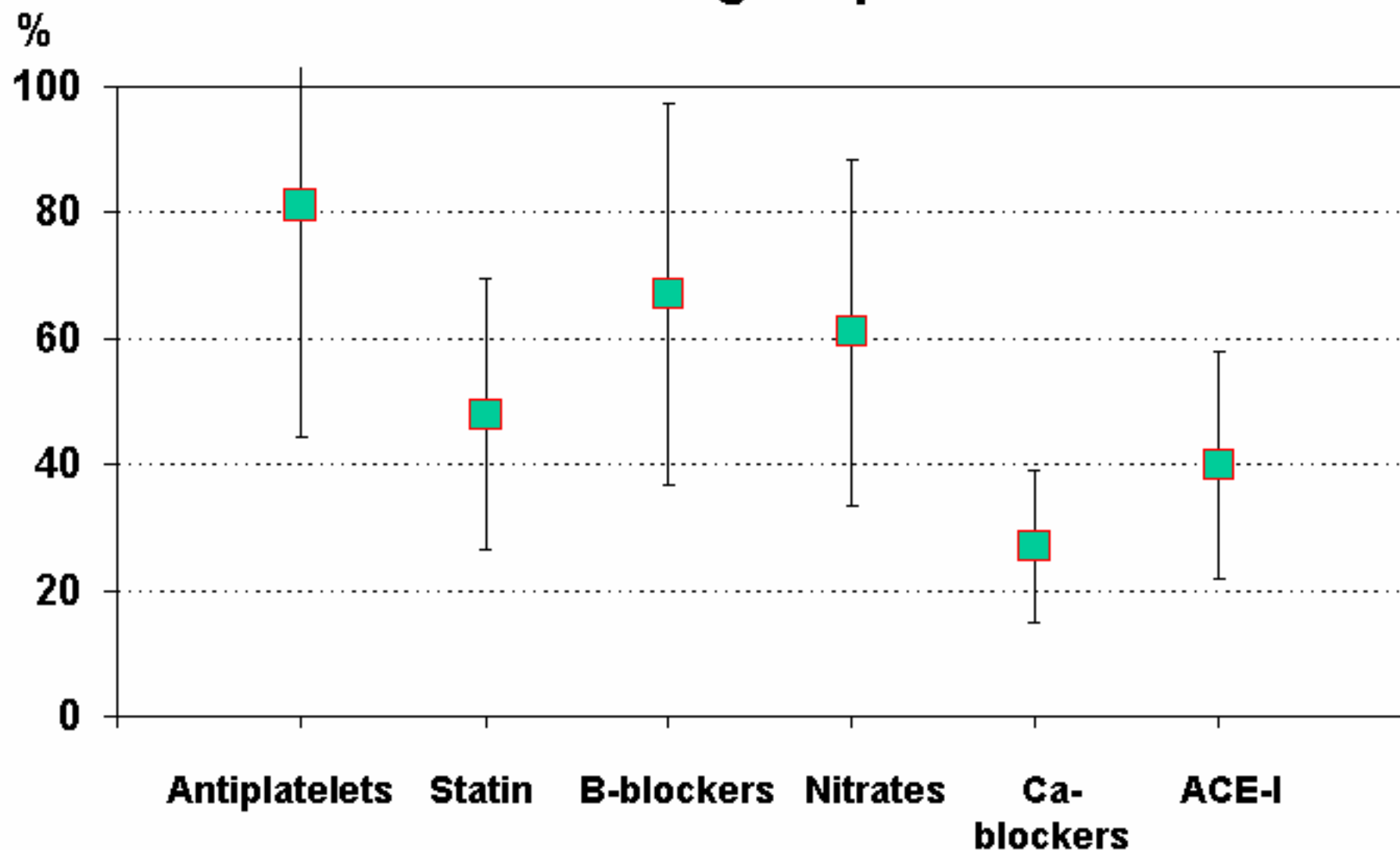
Proportion (%)

30-day mortality in myocardial infarction
Swedish Registry 2002

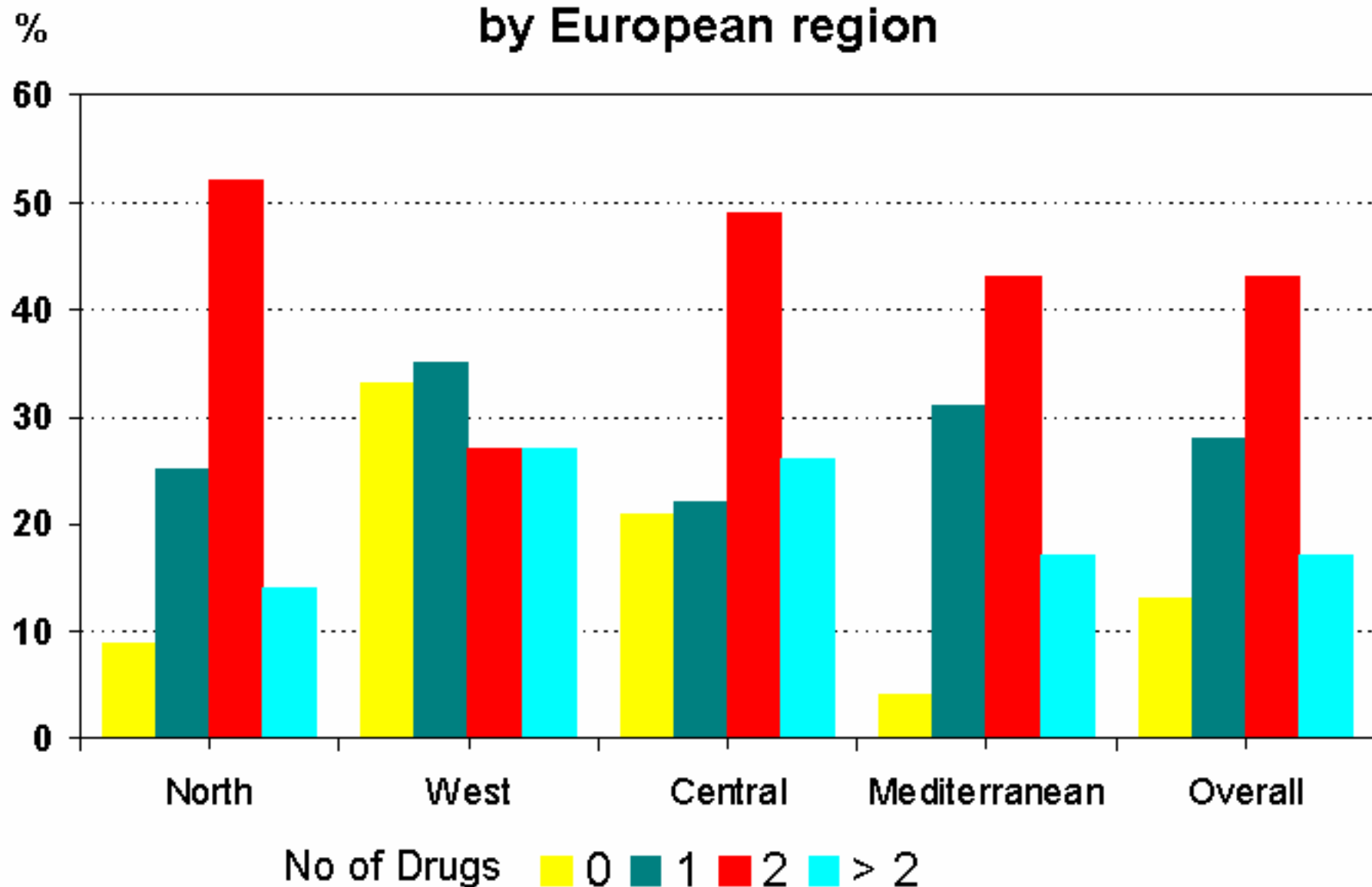


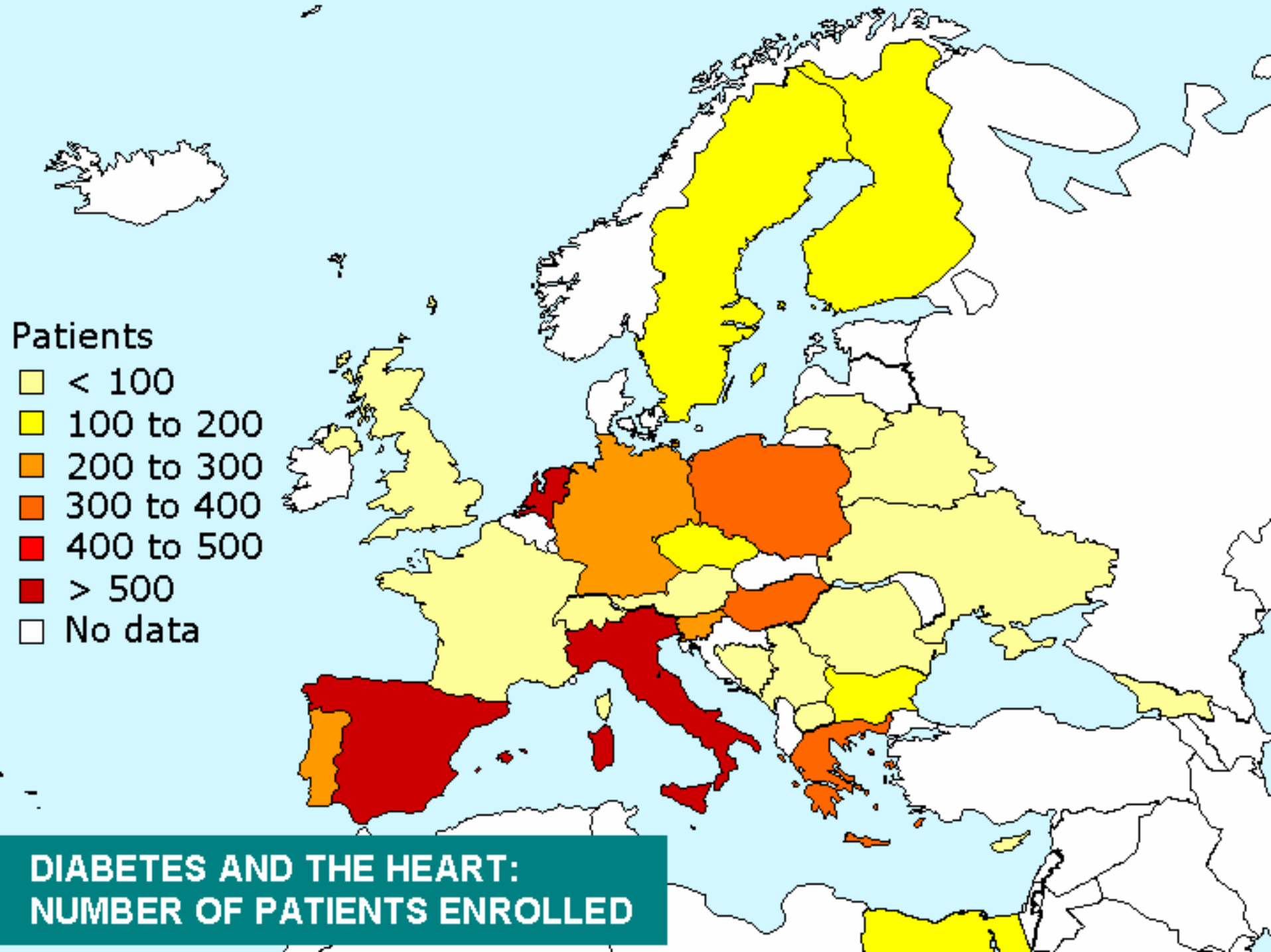


Medical therapy in patients newly presenting with stable angina pectoris



Anti-anginal drugs per patient in patients with newly presenting stable angina pectoris by European region



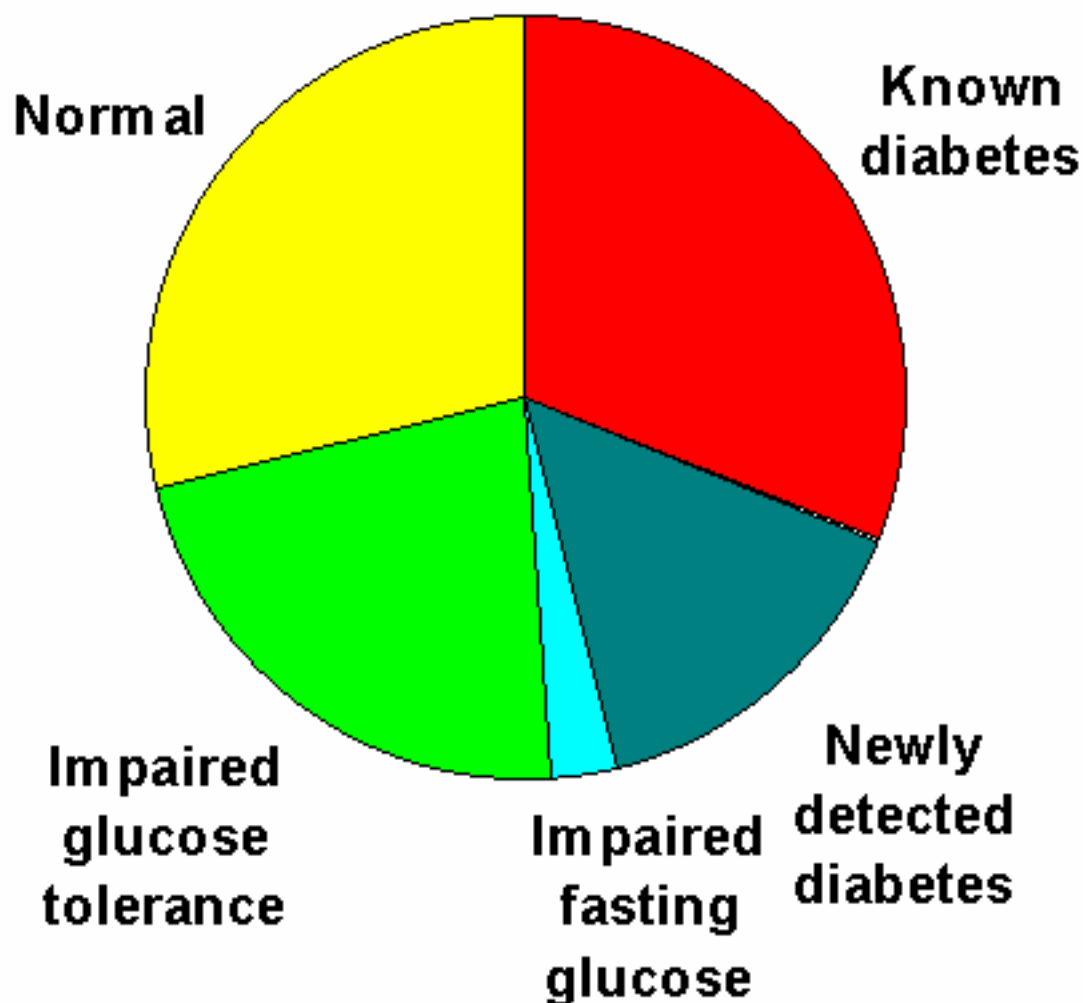


Patients

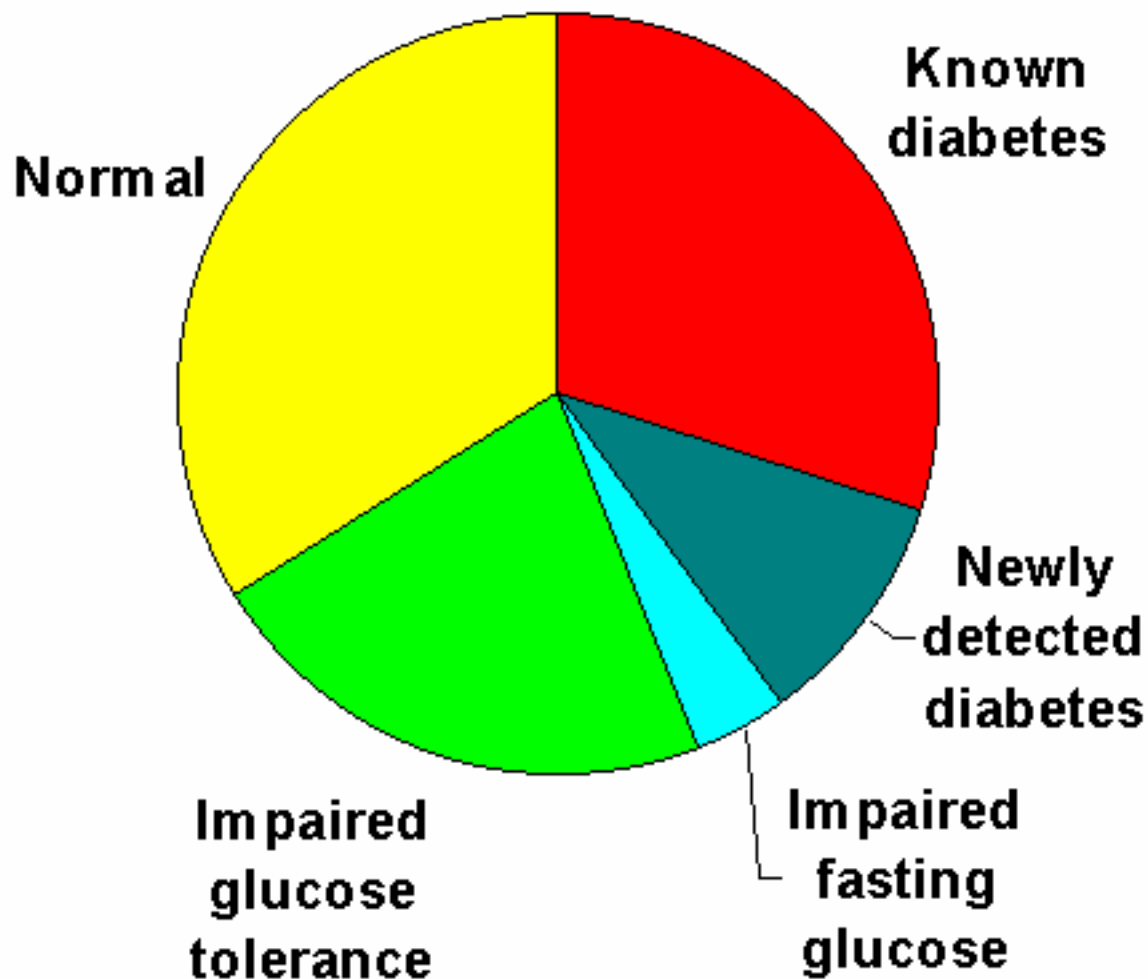
- < 100
- 100 to 200
- 200 to 300
- 300 to 400
- 400 to 500
- > 500
- No data

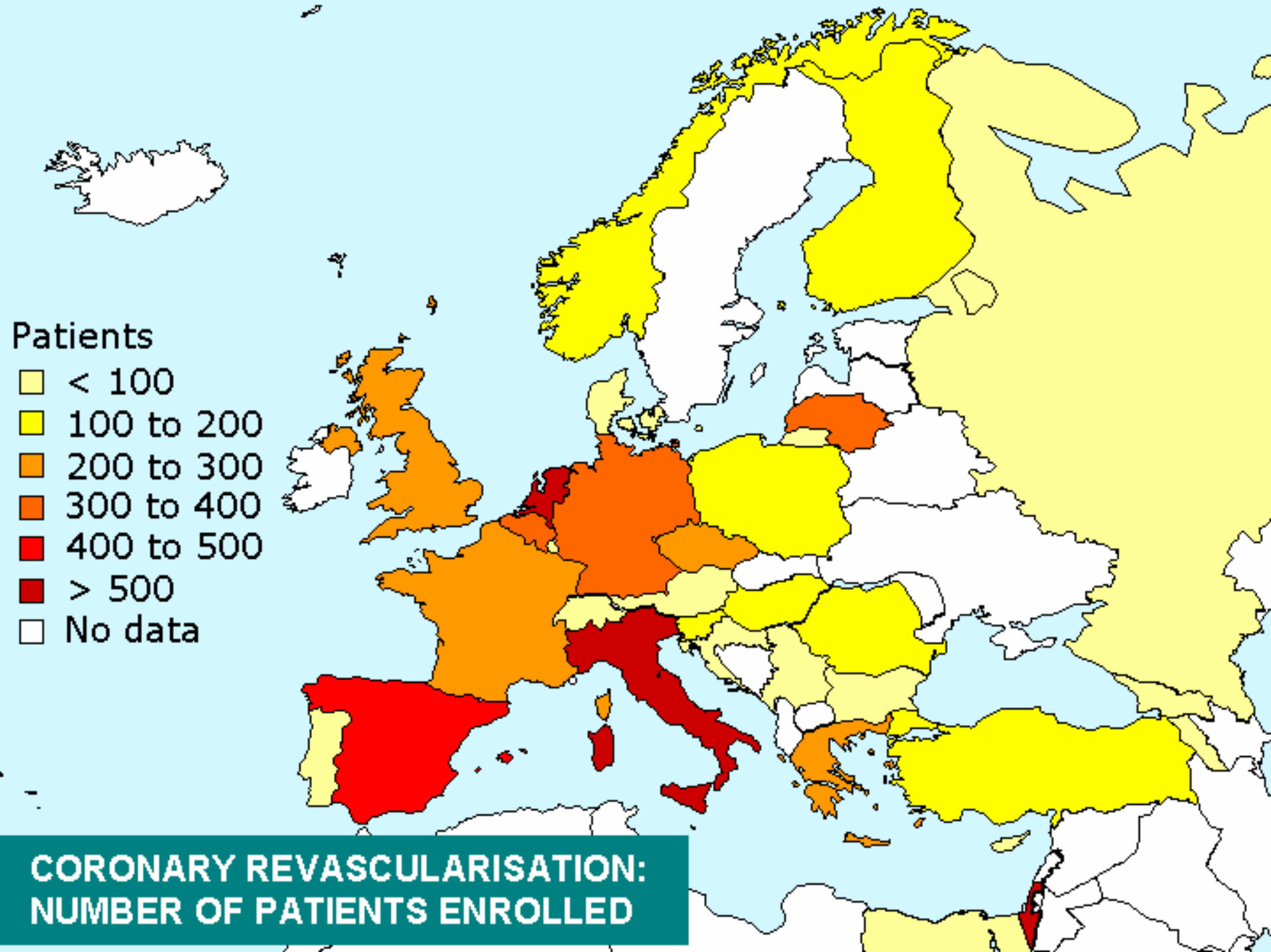
**DIABETES AND THE HEART:
NUMBER OF PATIENTS ENROLLED**

Prevalence of abnormal glucose regulation in patients with acute coronary artery disease



Prevalence of abnormal glucose regulation in patients with *stable* coronary artery disease



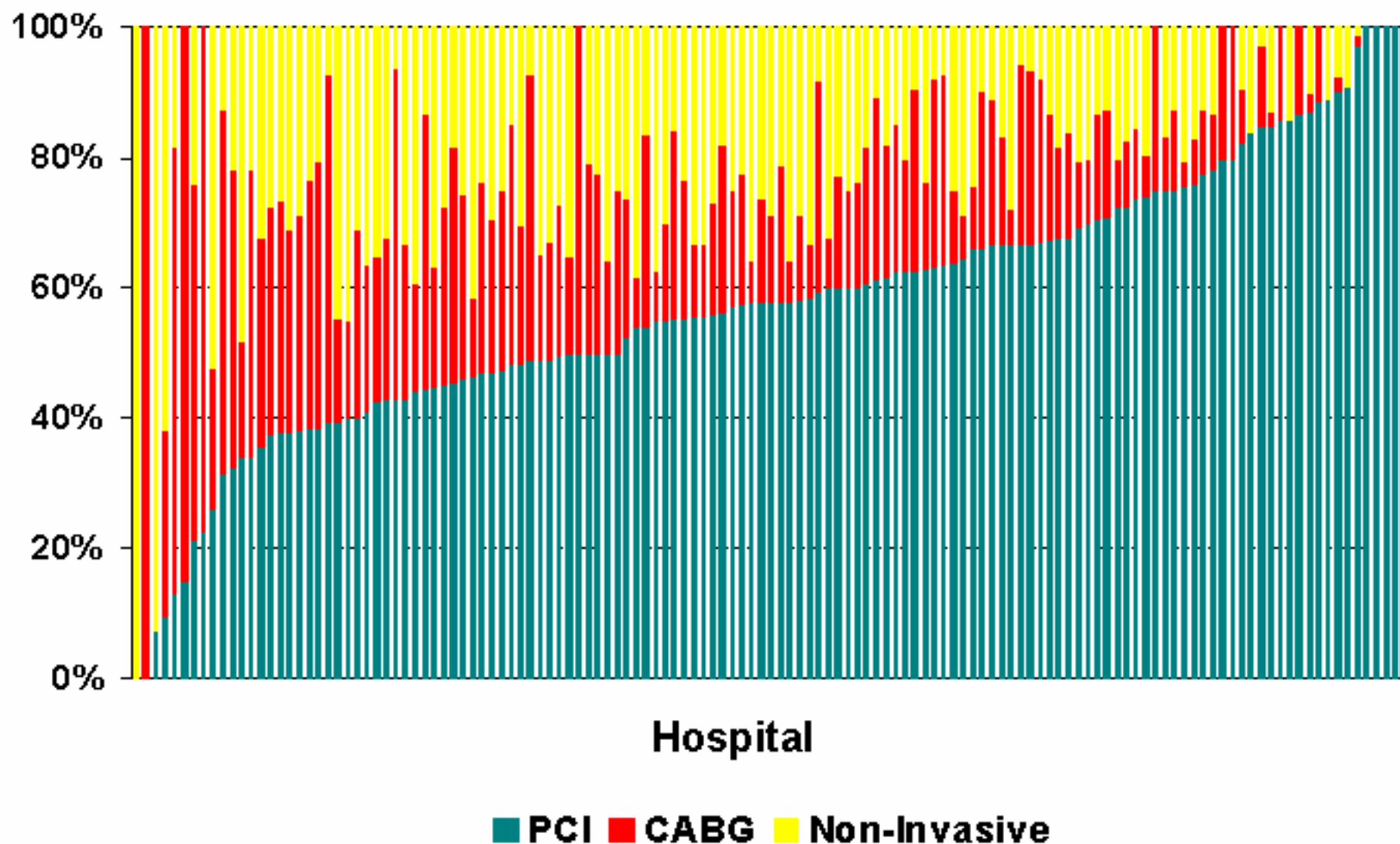


Patients

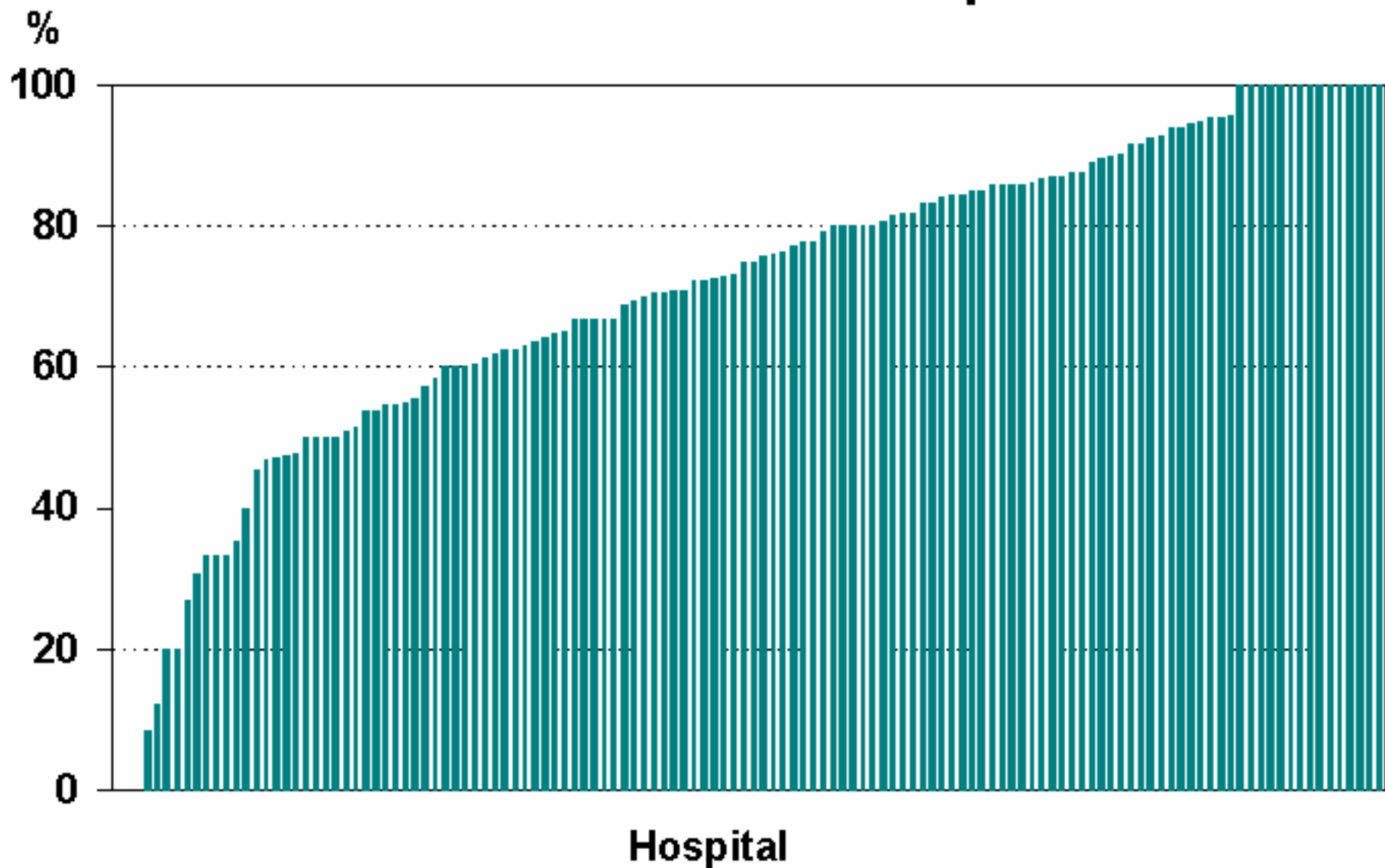
- < 100
- 100 to 200
- 200 to 300
- 300 to 400
- 400 to 500
- > 500
- No data

**CORONARY REVASCULARISATION:
NUMBER OF PATIENTS ENROLLED**

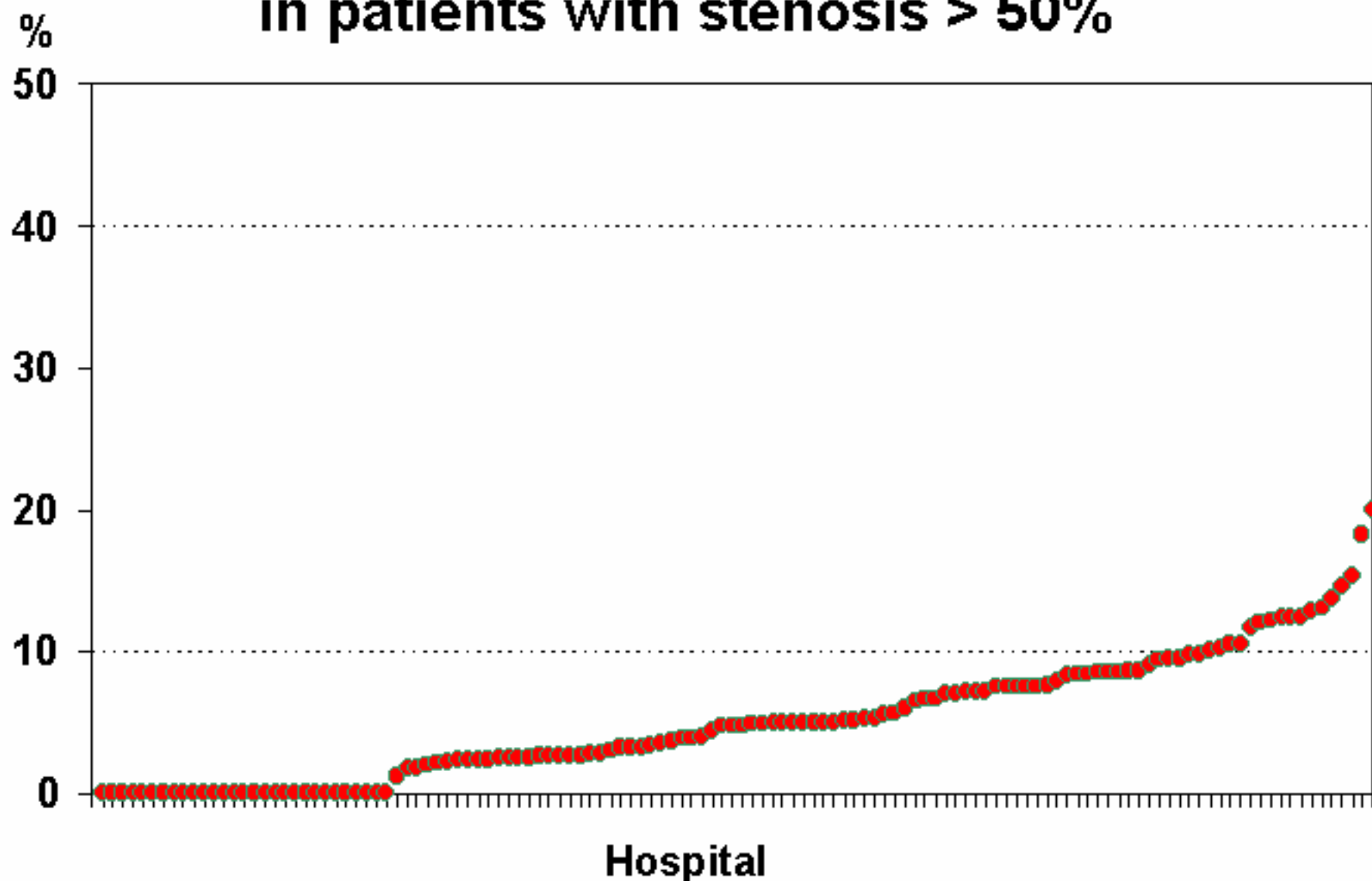
Treatment of patients with stenosis > 50%



GP IIb/IIIa inhibitors in PCI patients



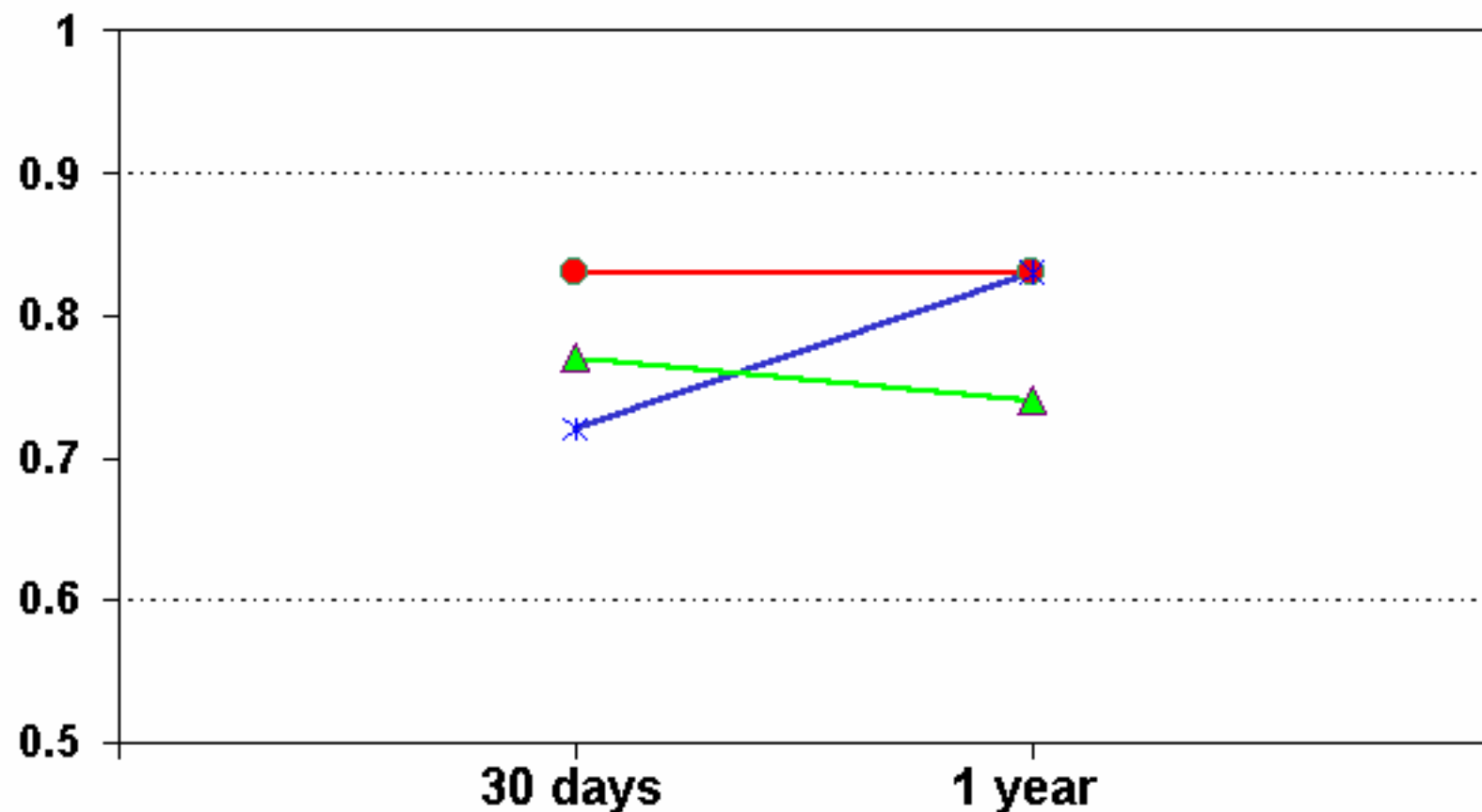
1-year mortality in patients with stenosis > 50%



Quality of life after 30 days and 1 year

Euroqol total score

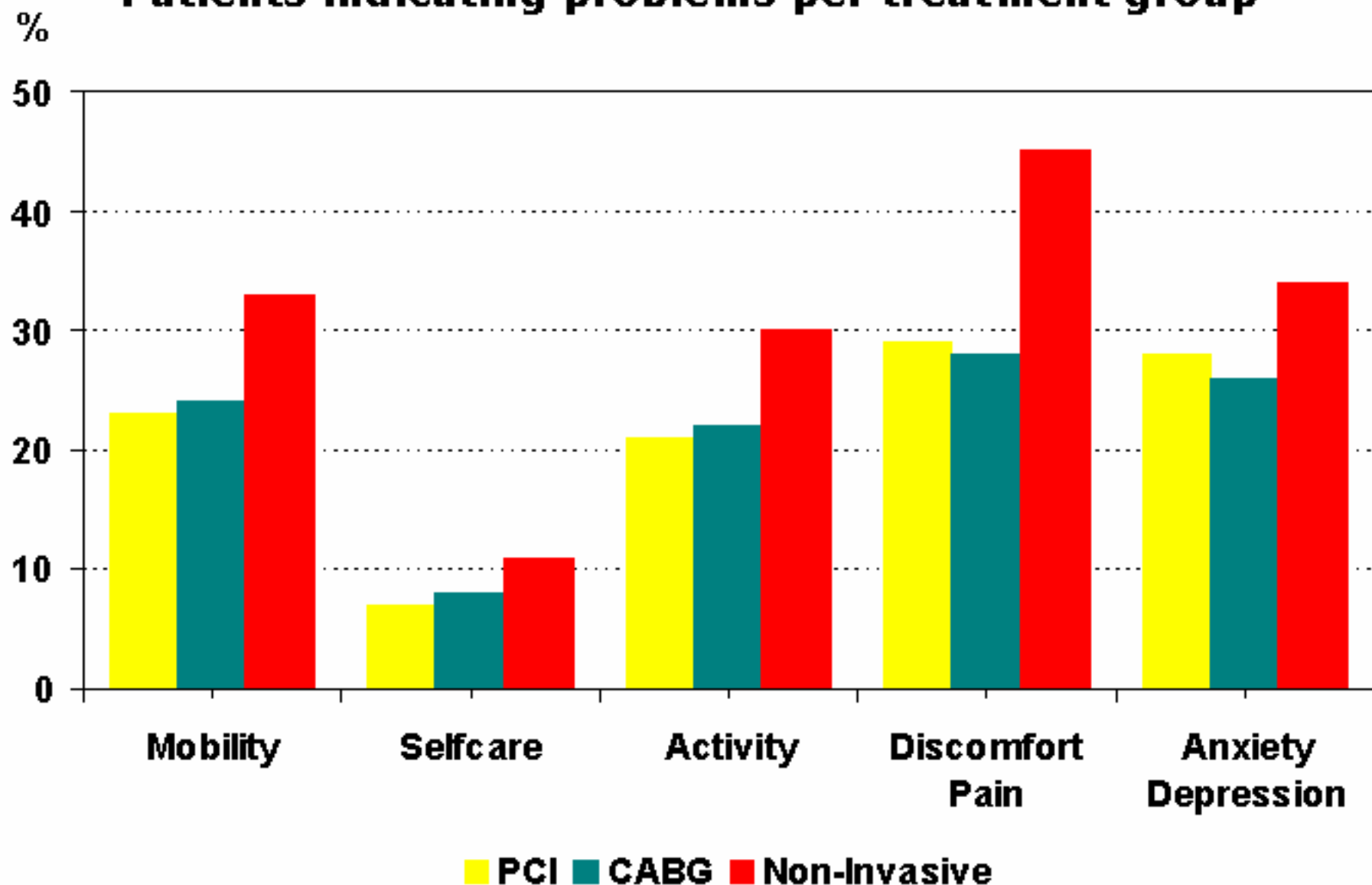
Best possible score



● PCI * CABG ▲ Non-Invasive

Quality of life after 1 year

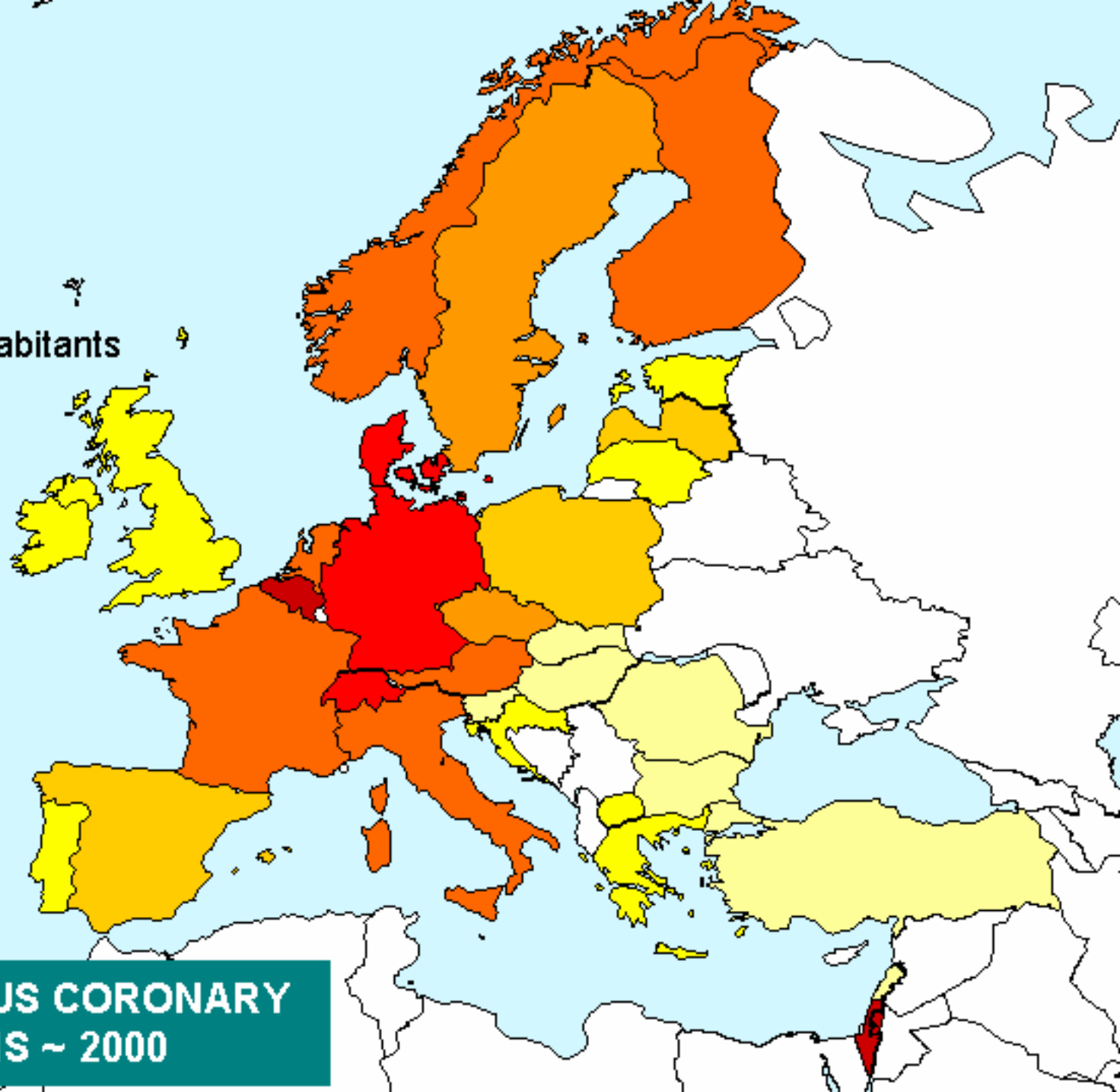
Patients indicating problems per treatment group



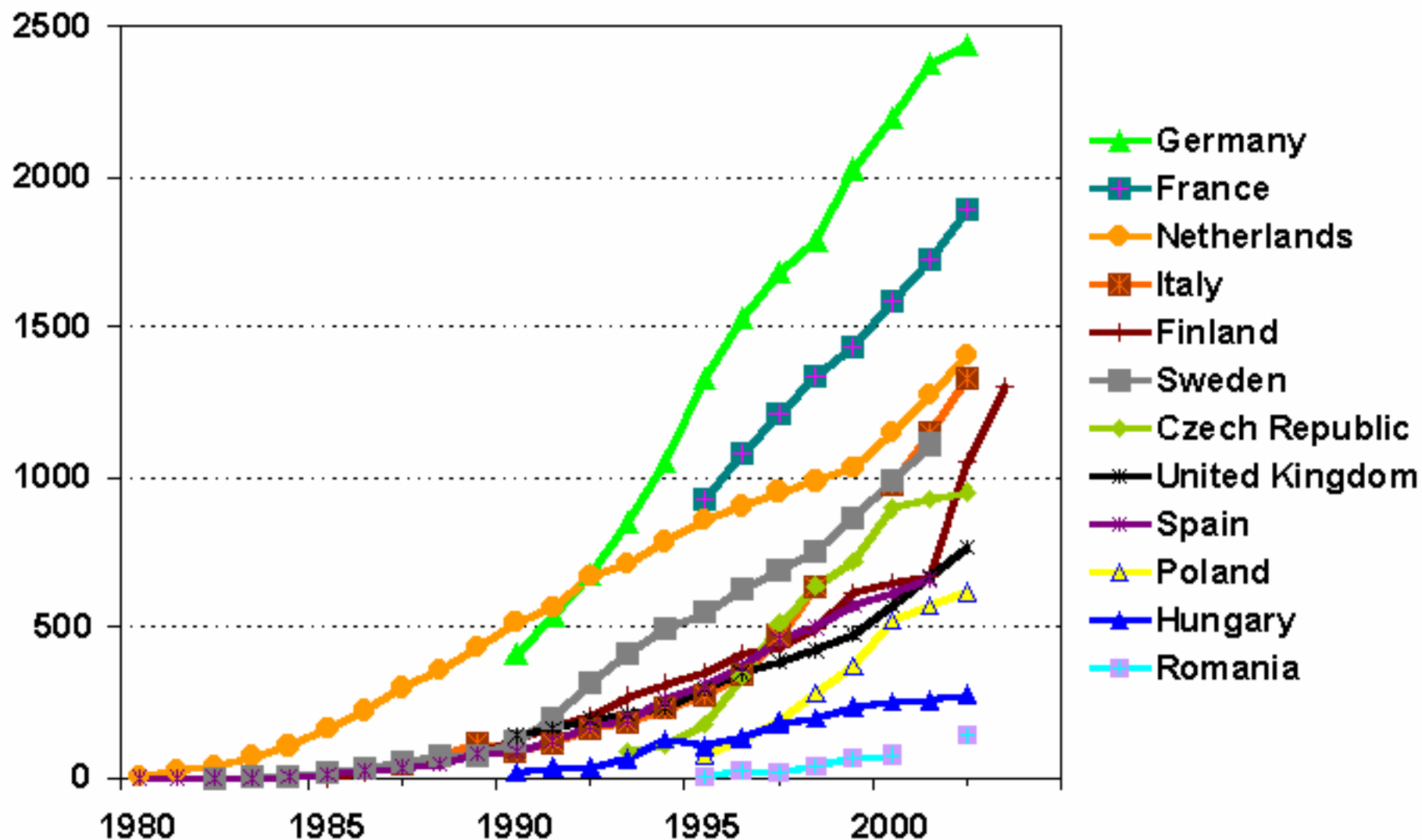
PCI per million inhabitants



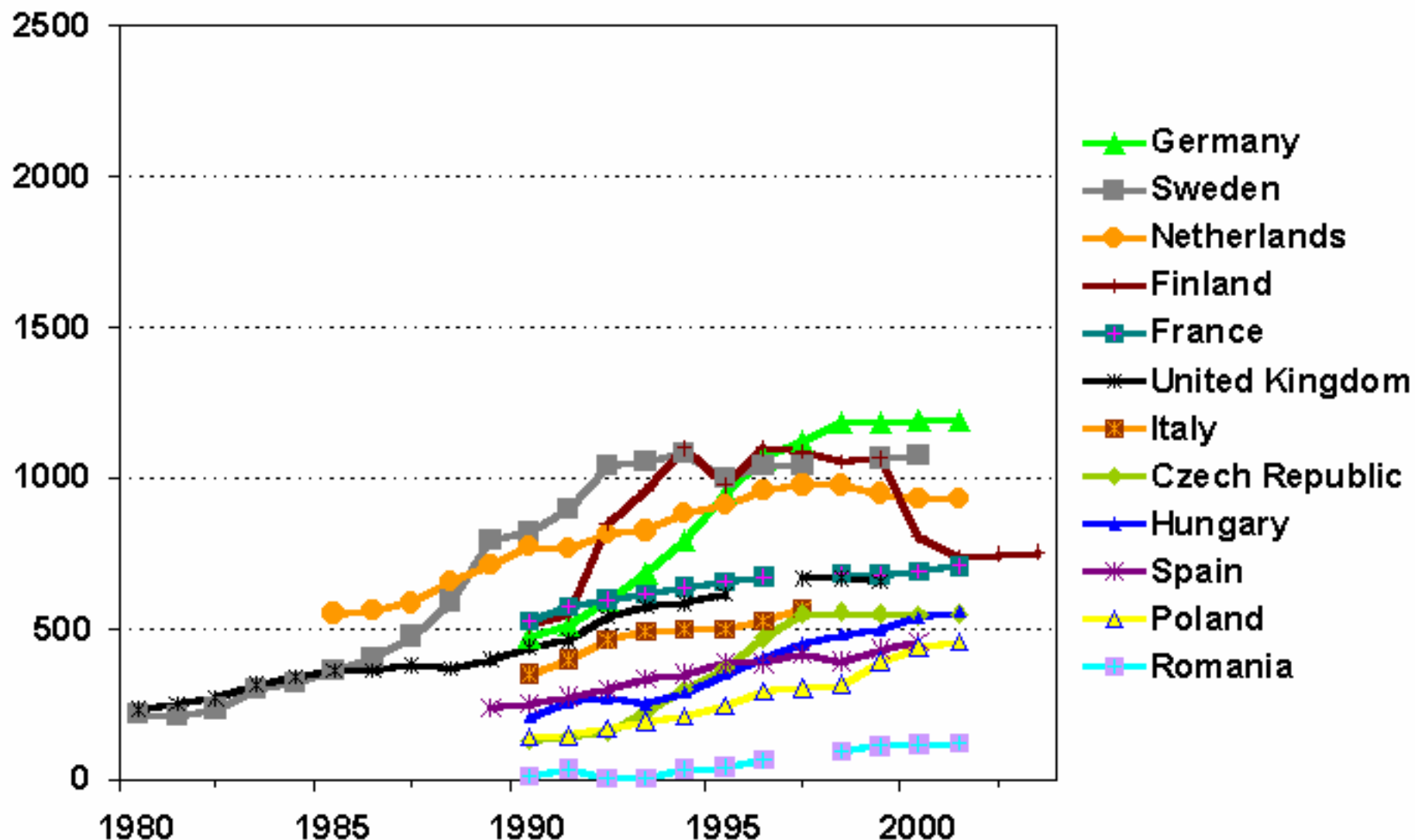
PERCUTANEOUS CORONARY INTERVENTIONS ~ 2000



Time trends in the annual use of PCI numbers per 1 million inhabitants

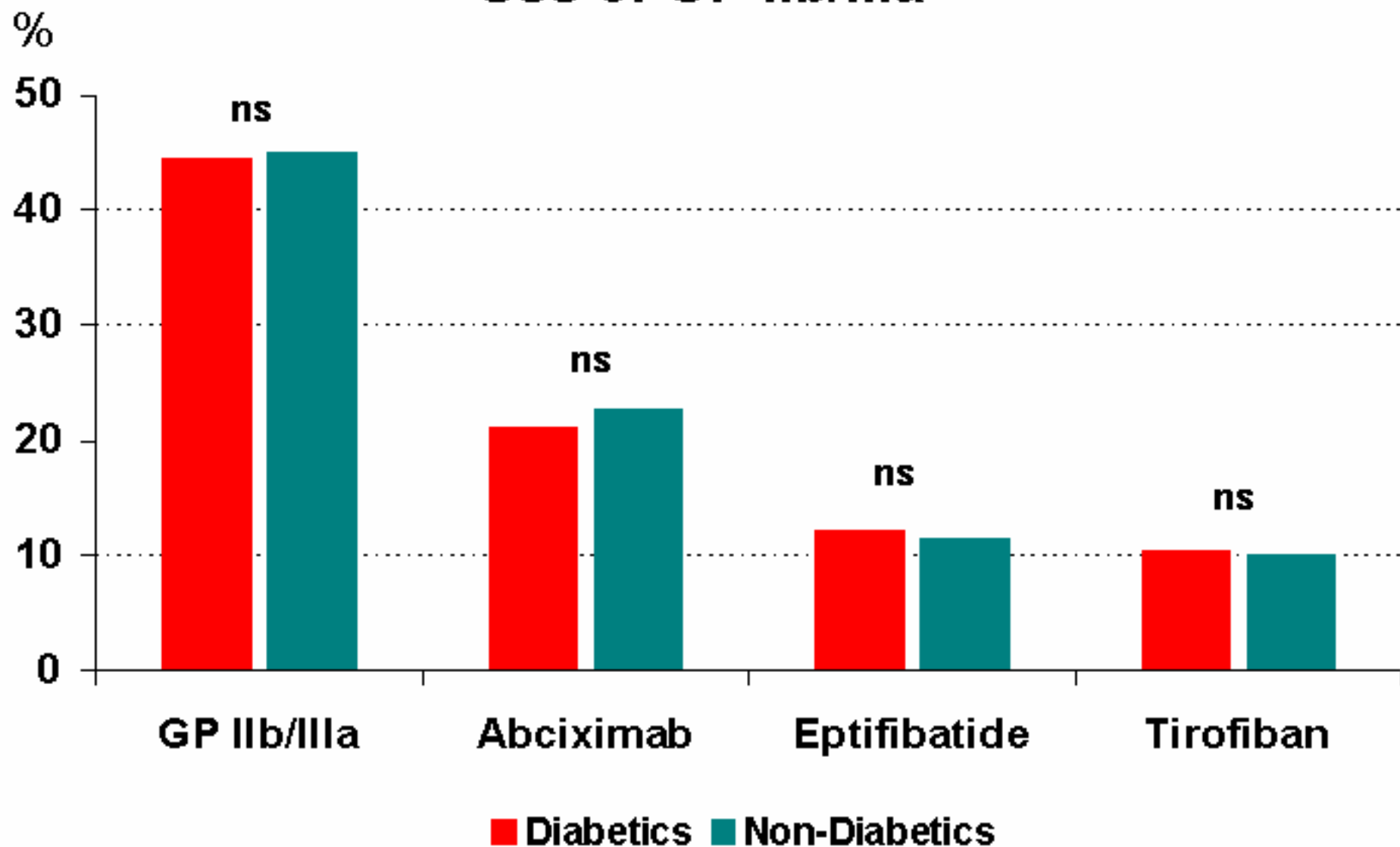


Time trends in the annual use of CABG numbers per 1 million inhabitants



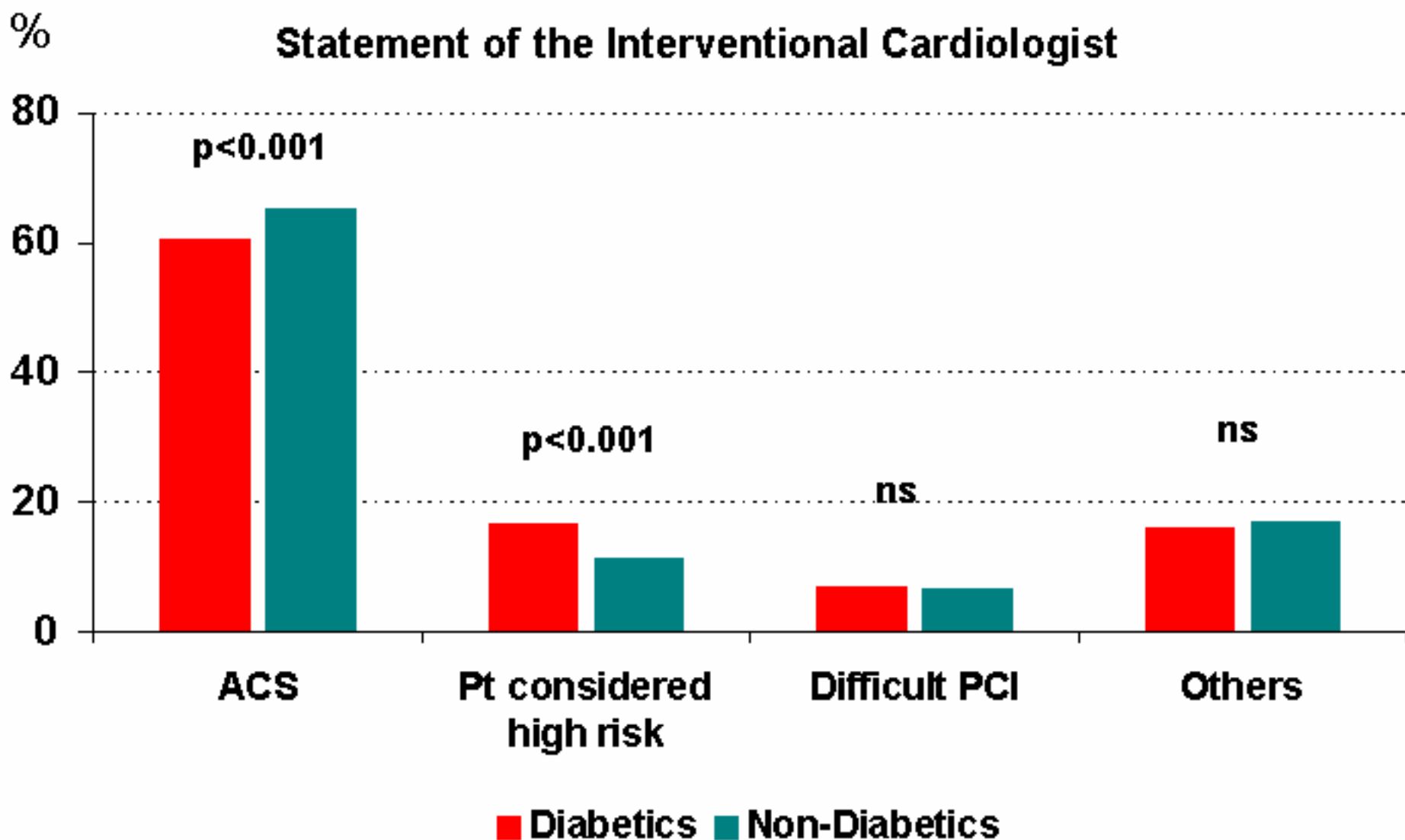
PCI for ACS

Use of GP IIb/IIIa



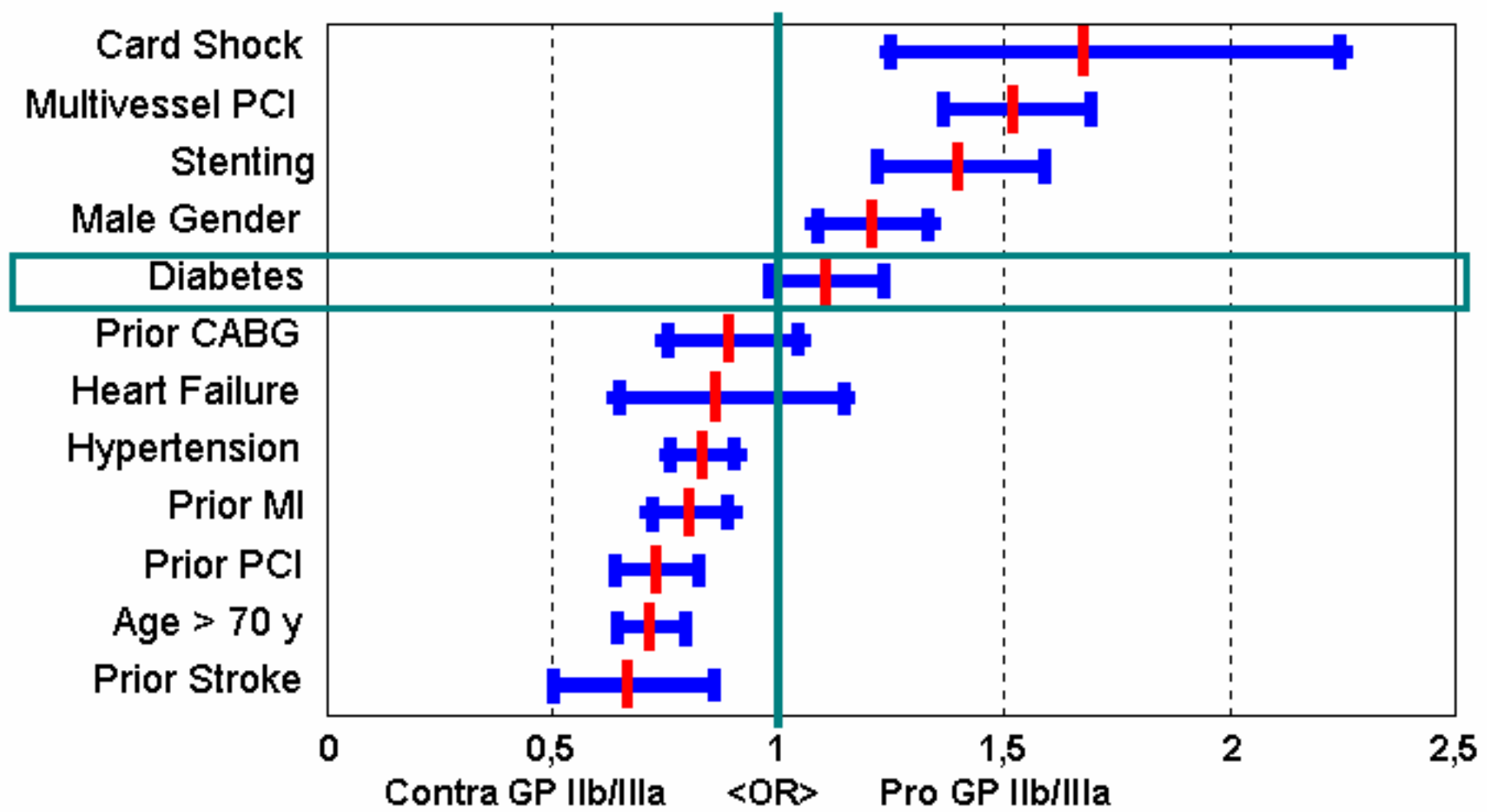
PCI for ACS

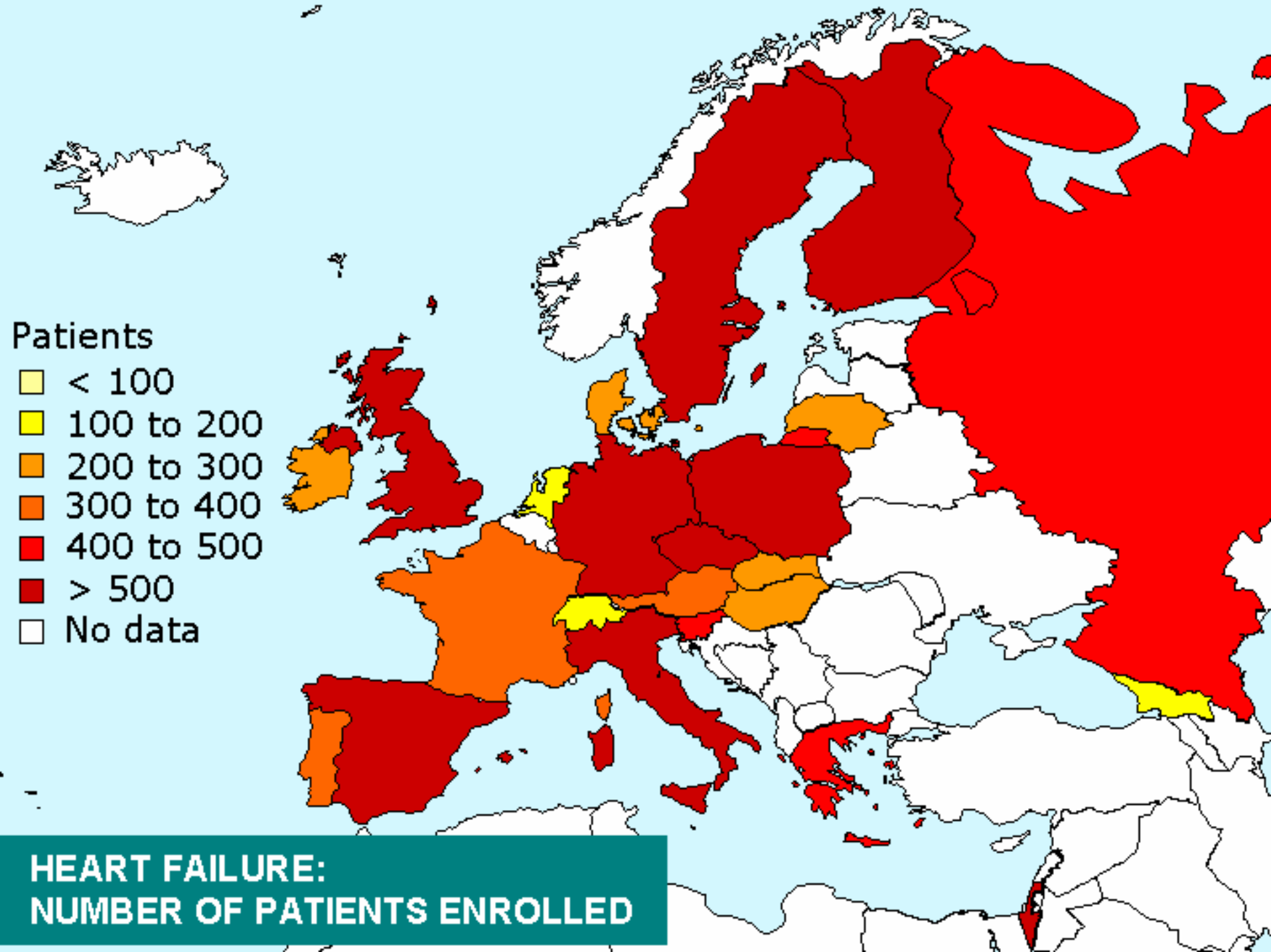
Reason for GP IIb/IIIa-Use



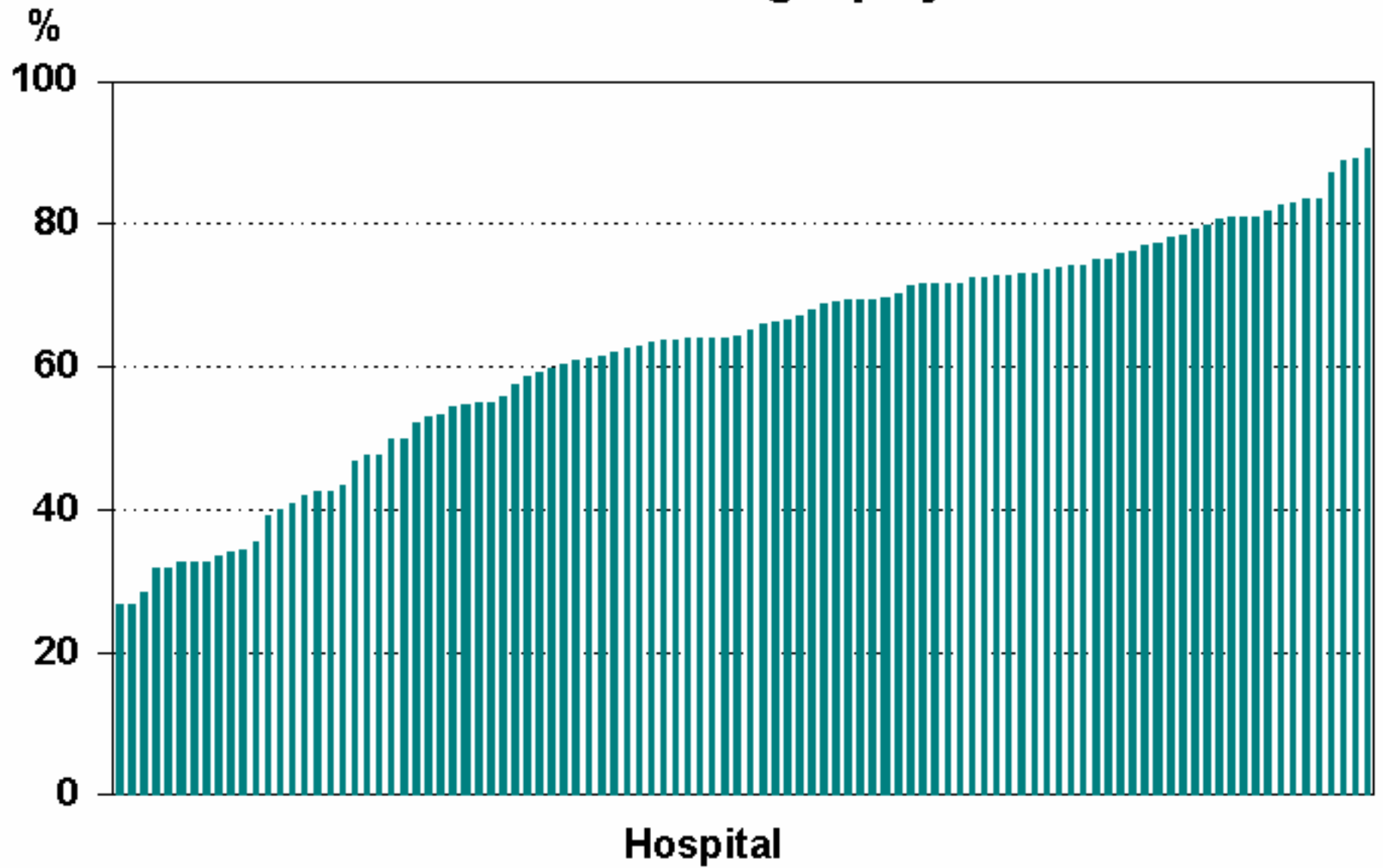
Determinants of GP IIb/IIIa in PCI for ACS

Multivariate Analysis

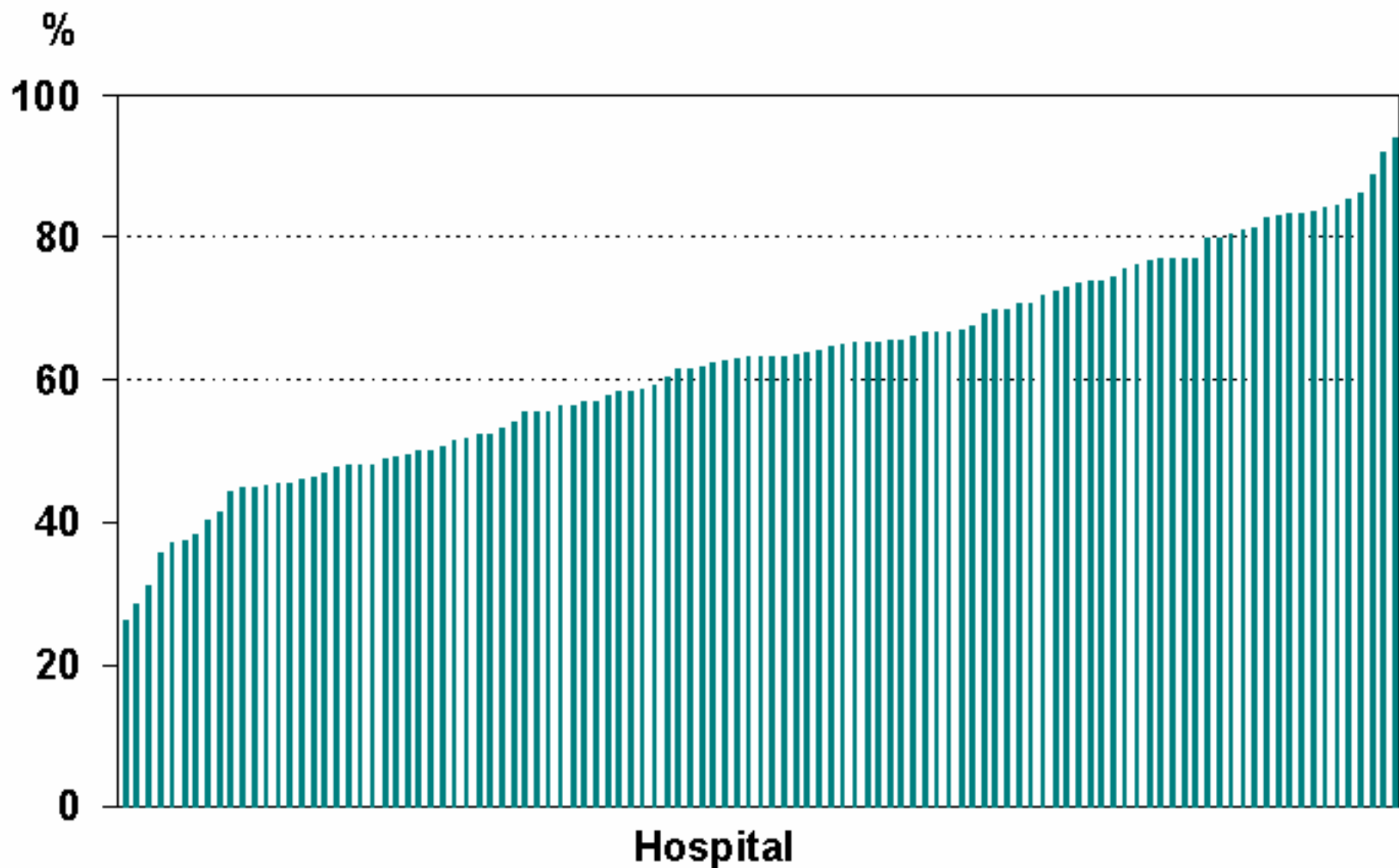




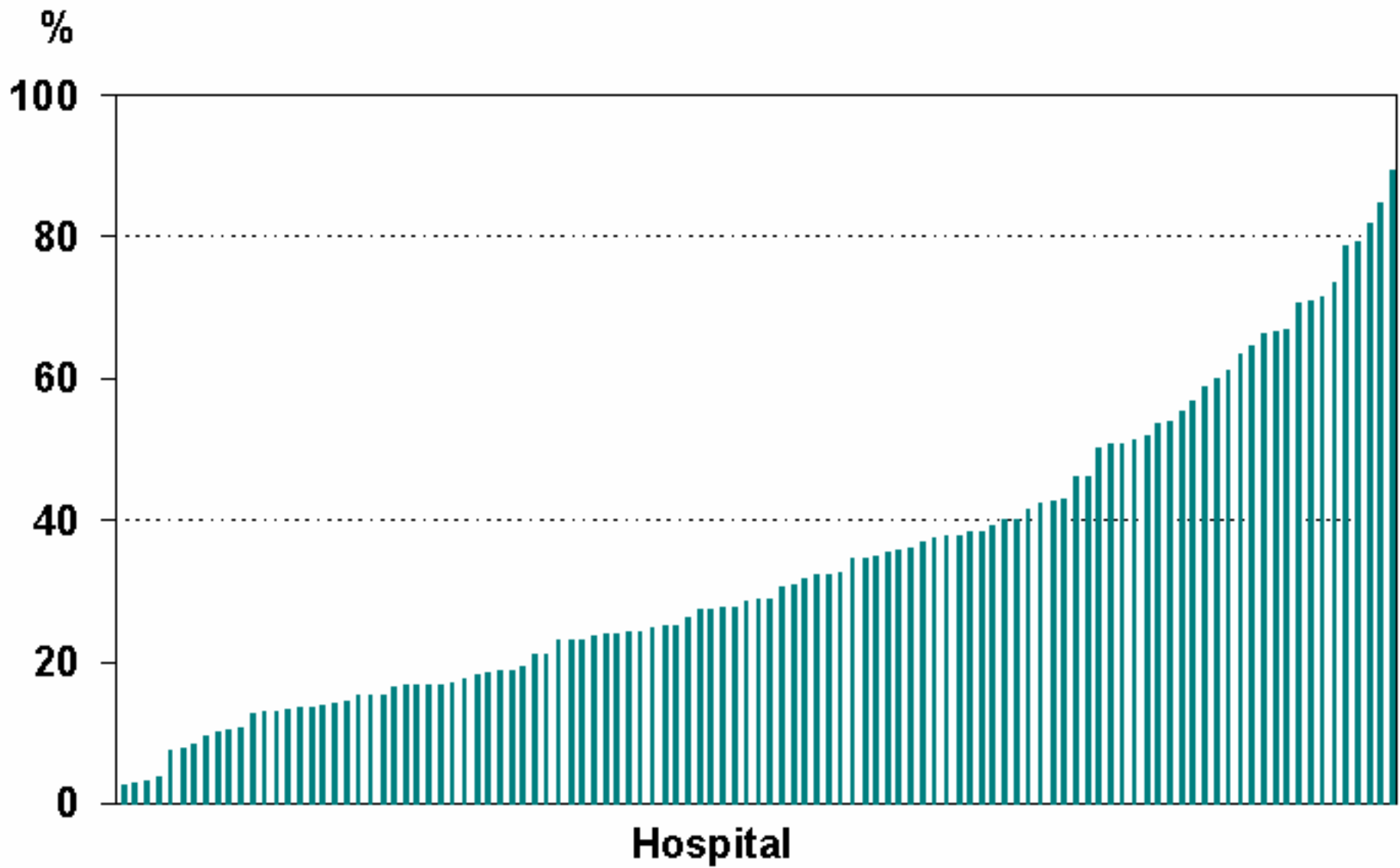
Echocardiography



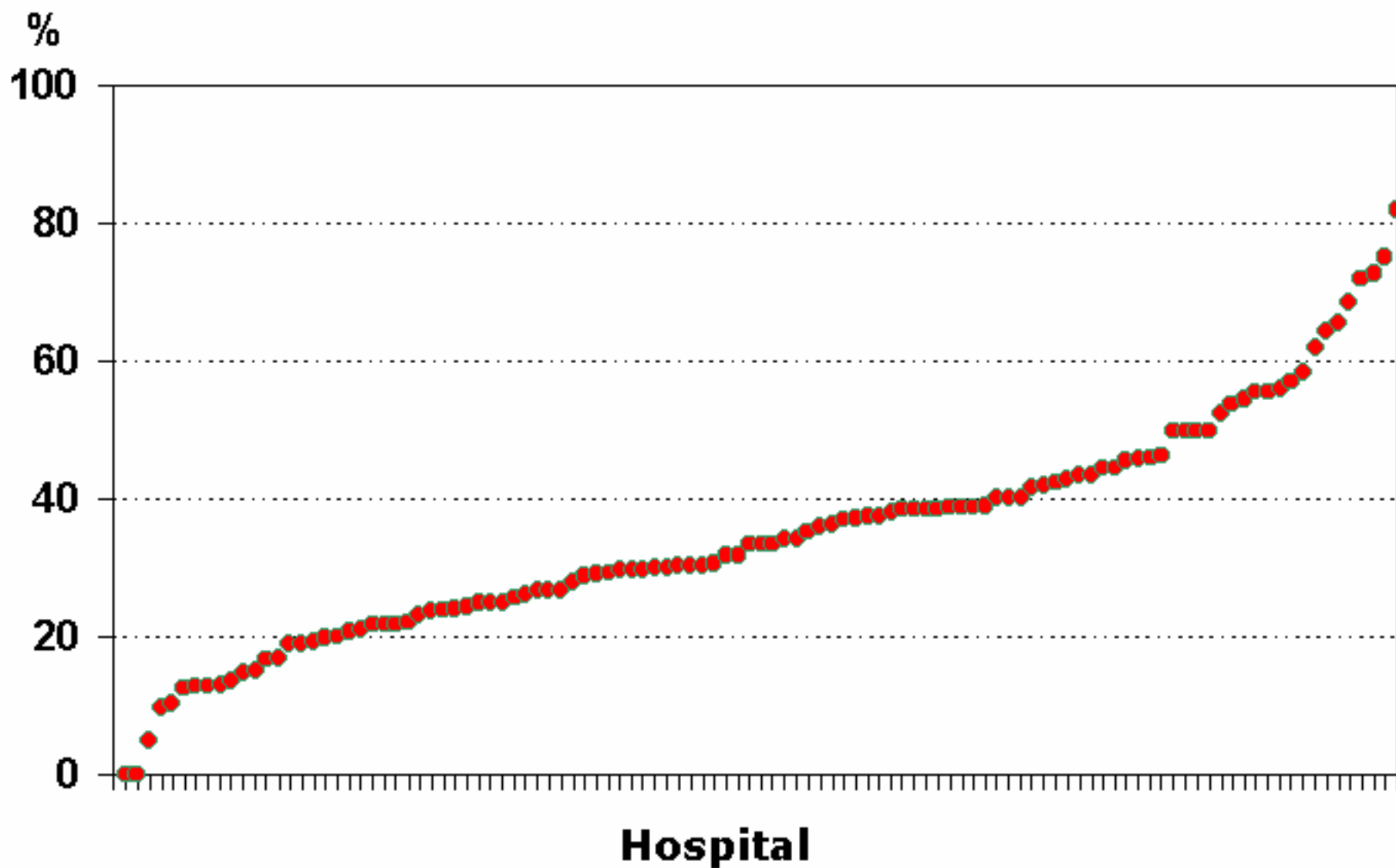
ACE-Inhibitor therapy at hospital discharge



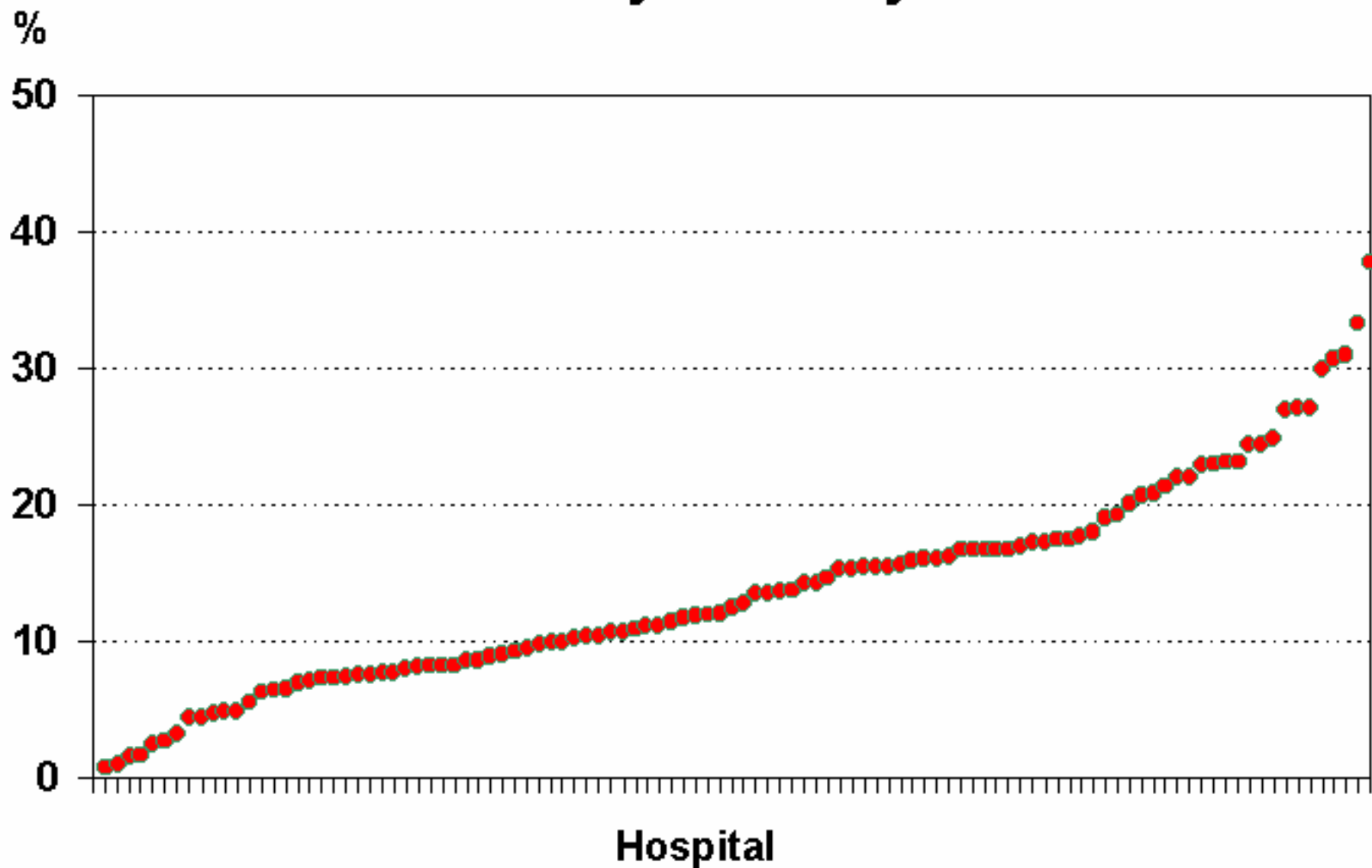
Beta-blocker therapy at hospital discharge

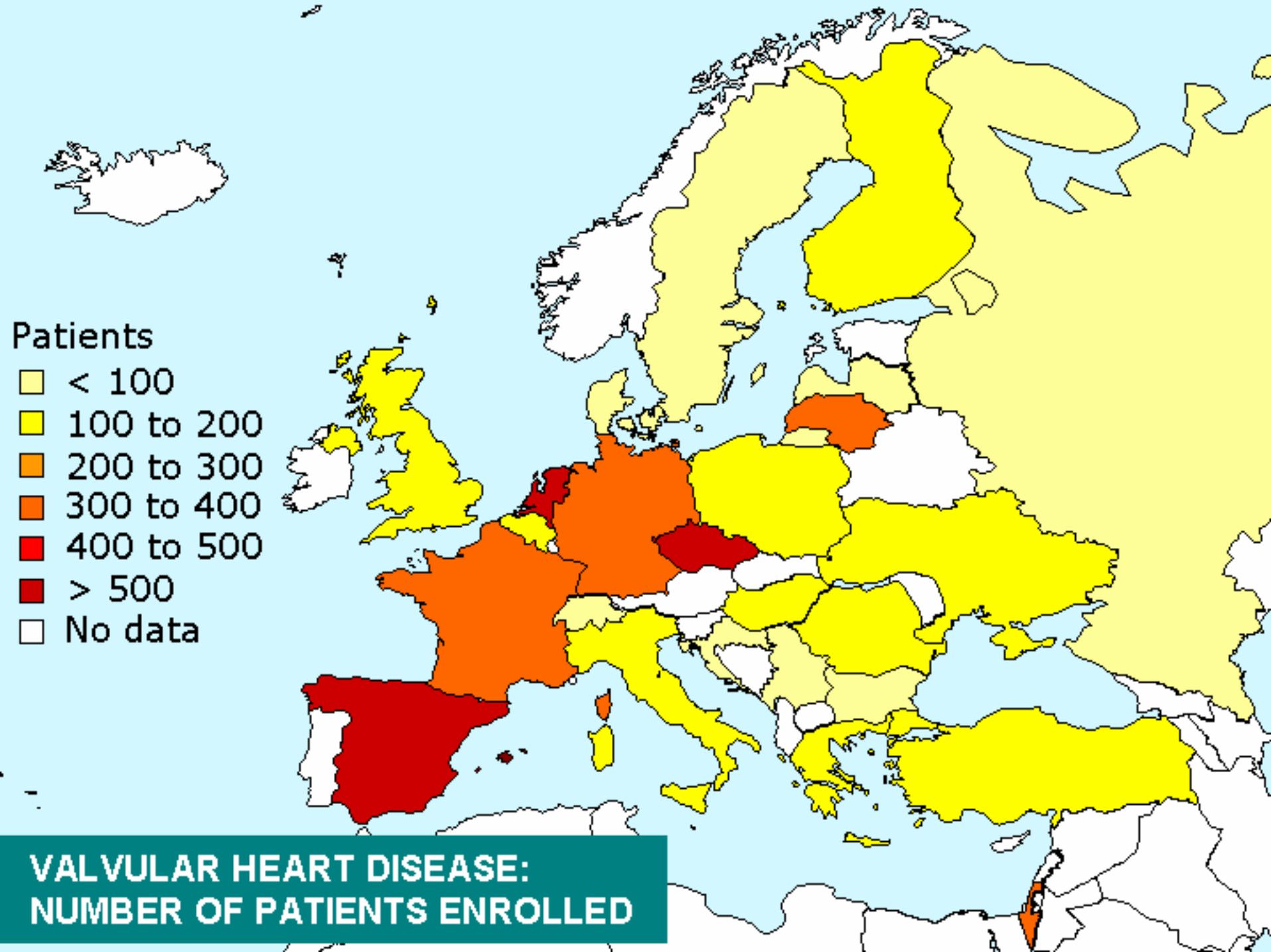


Preserved Left Ventricular Function



30-day mortality



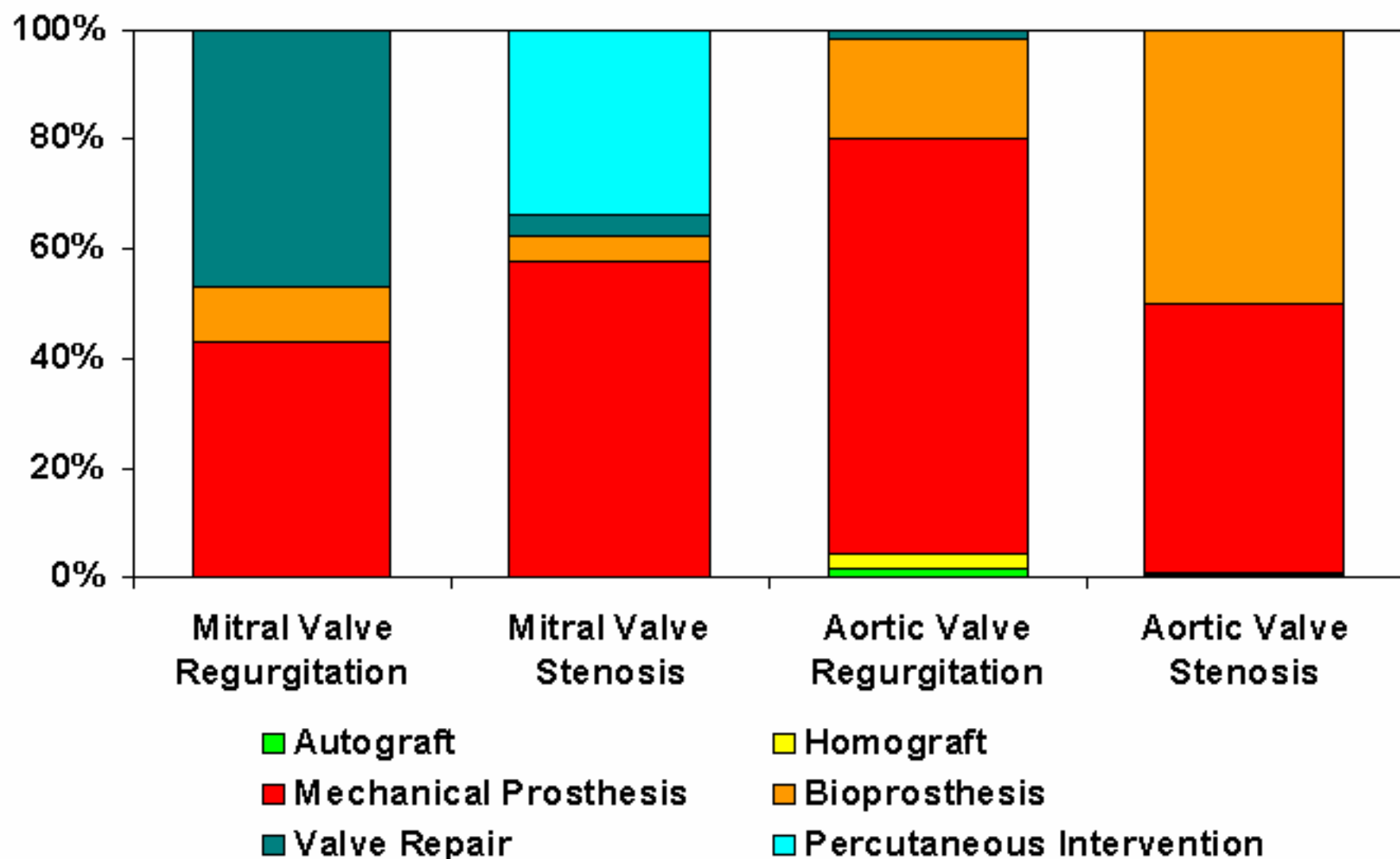


Patients

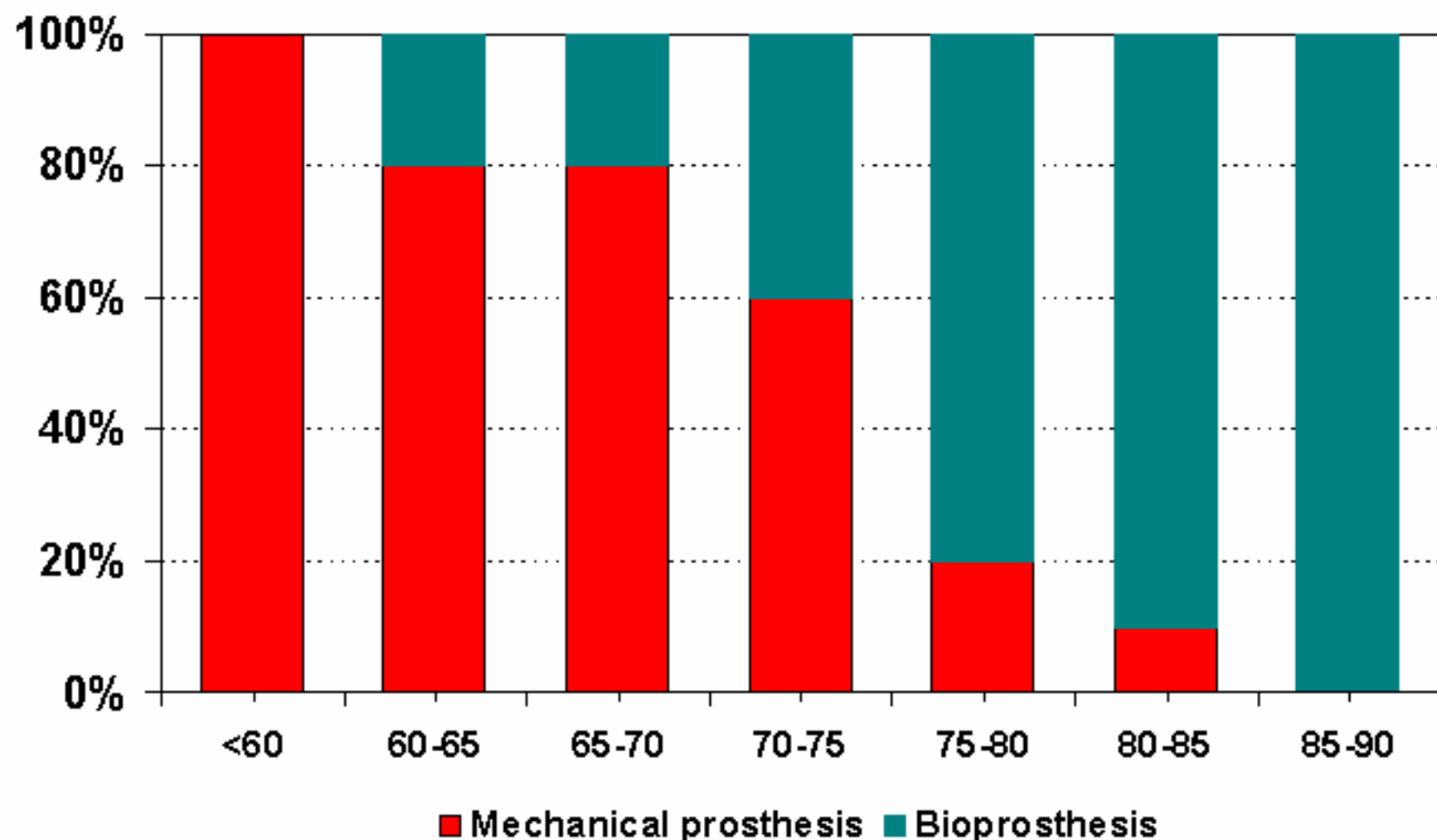
- < 100
- 100 to 200
- 200 to 300
- 300 to 400
- 400 to 500
- > 500
- No data

**VALVULAR HEART DISEASE:
NUMBER OF PATIENTS ENROLLED**

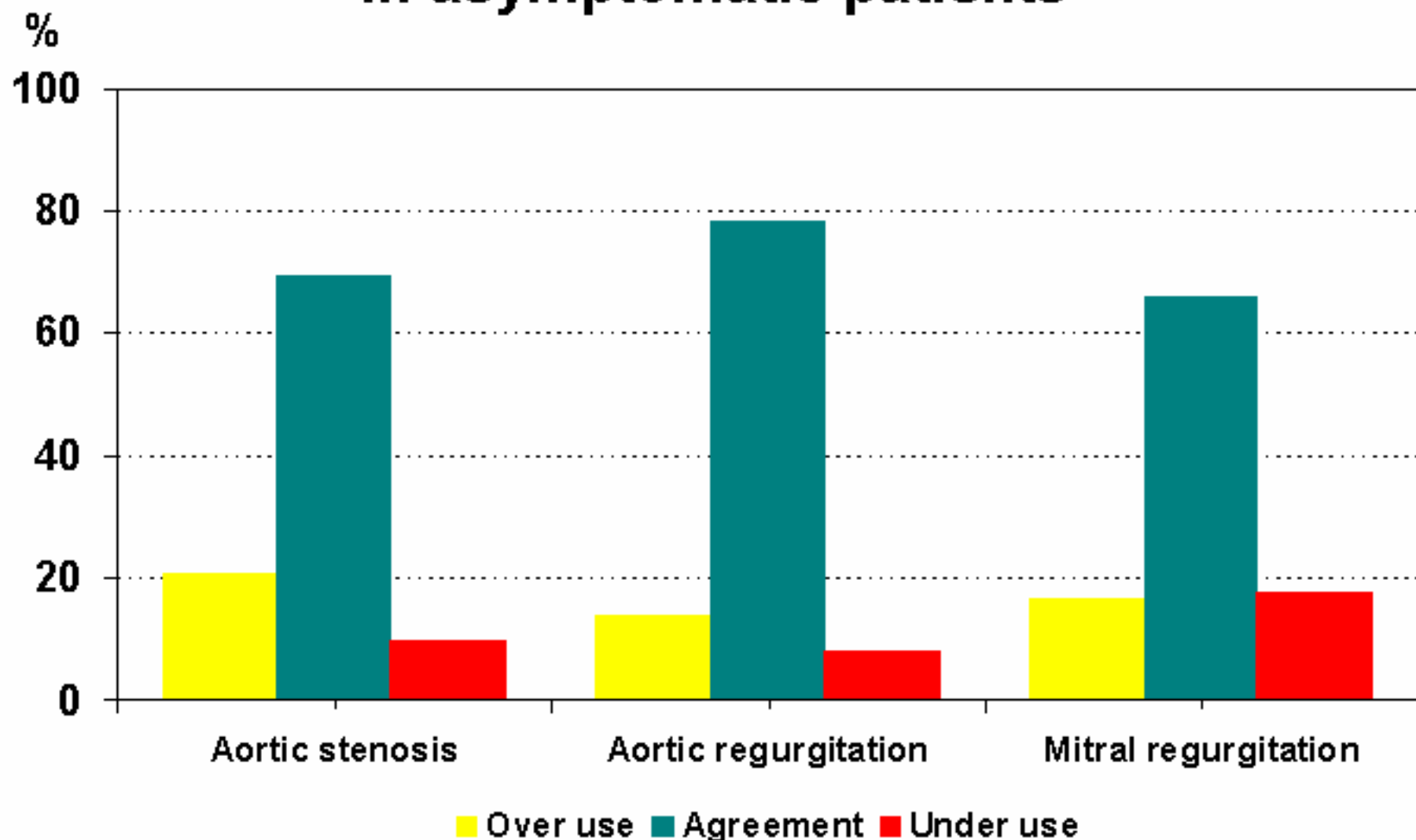
Interventions in native valve disease



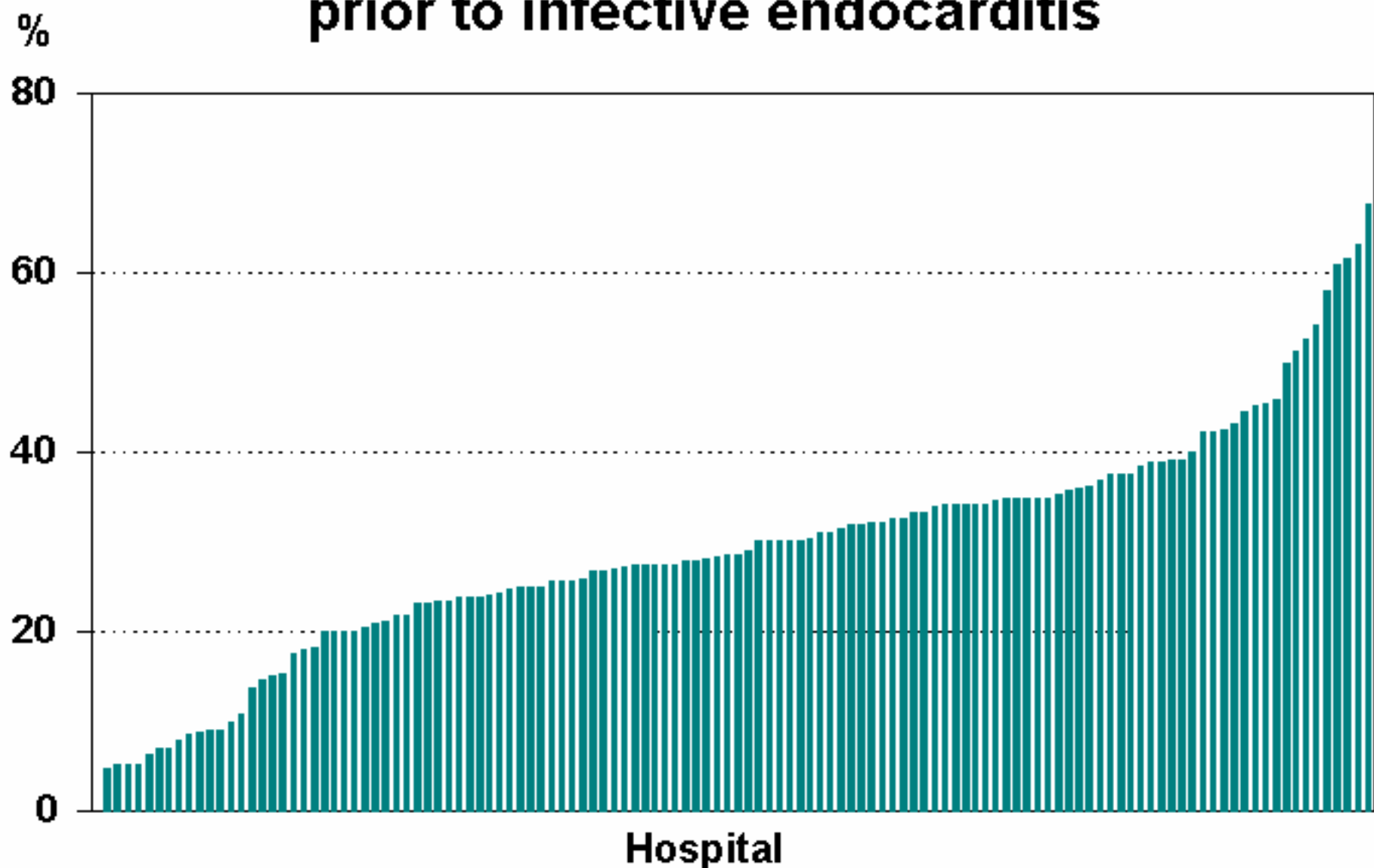
Distribution of mechanical and bioprosthesis according to age in patients operated on for aortic stenosis



Comparison of the indications retained for intervention and the current guidelines in asymptomatic patients

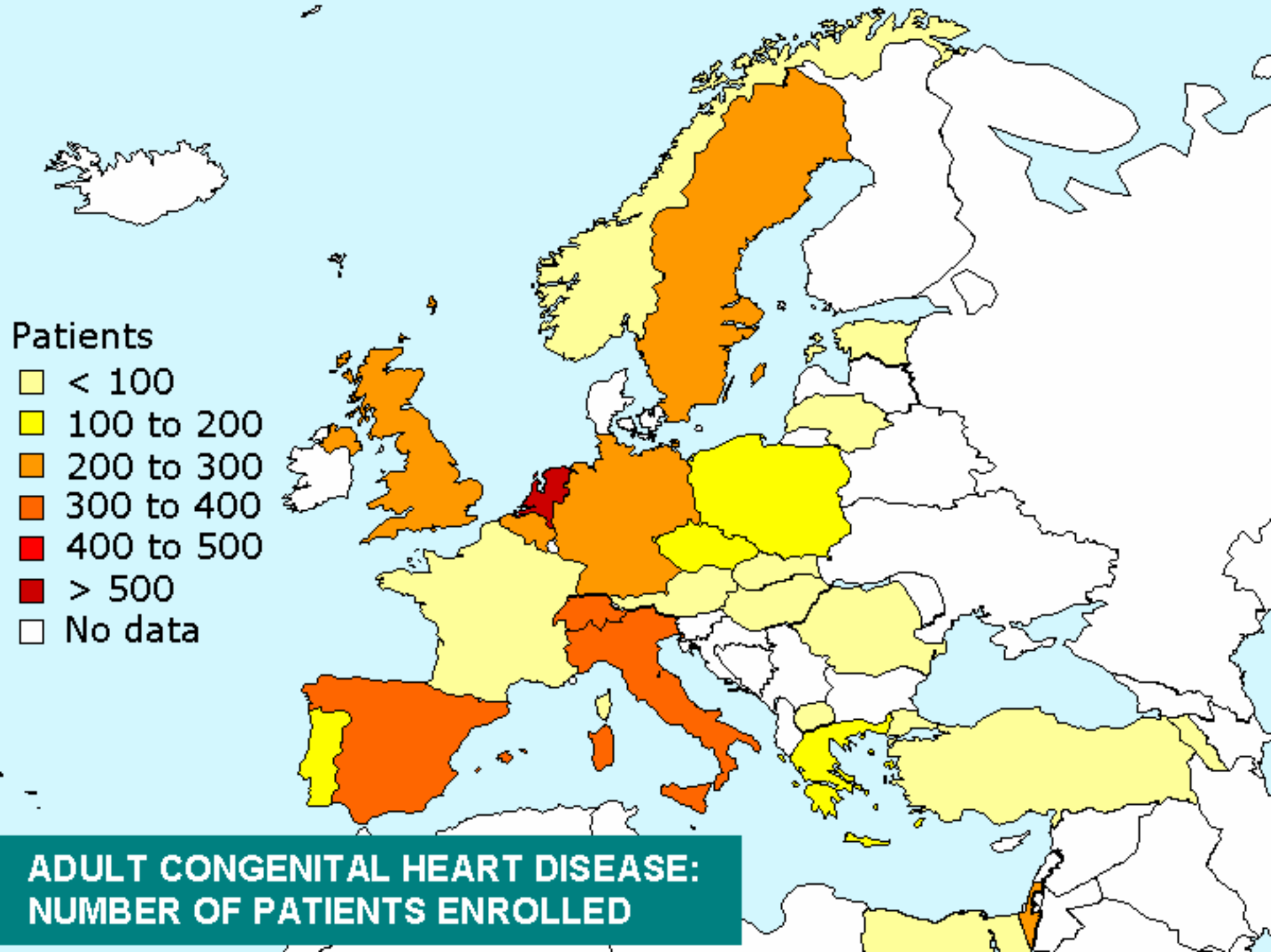


Antibiotic prophylaxis prior to infective endocarditis



Education on anti-coagulation





575 operated patients

Indication?

+ 208

- 367

**Angio-
graphy?**

+ 116

- 92

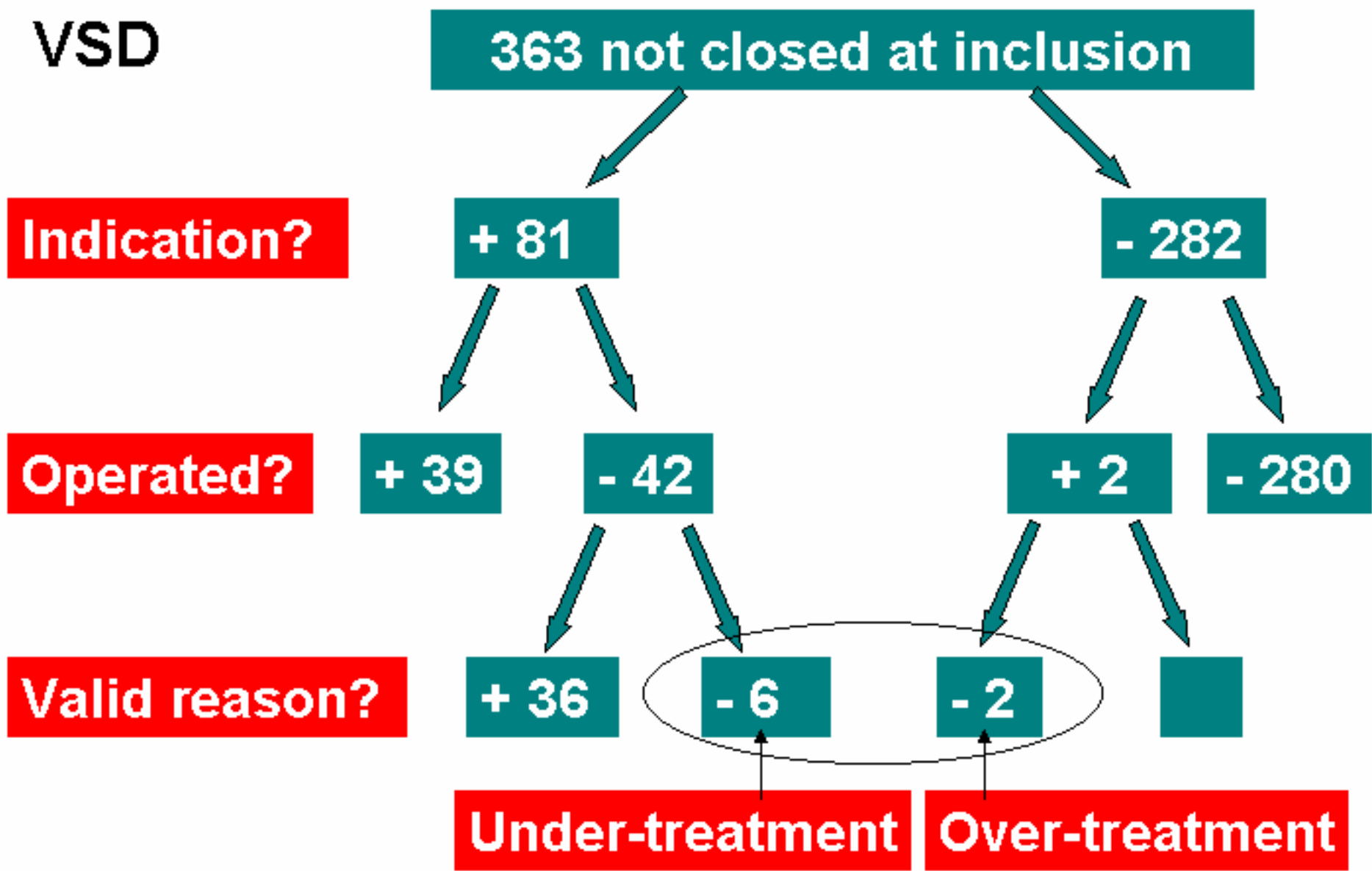
+ 55

- 312

**Under use
angio**

**Over use
angio?**

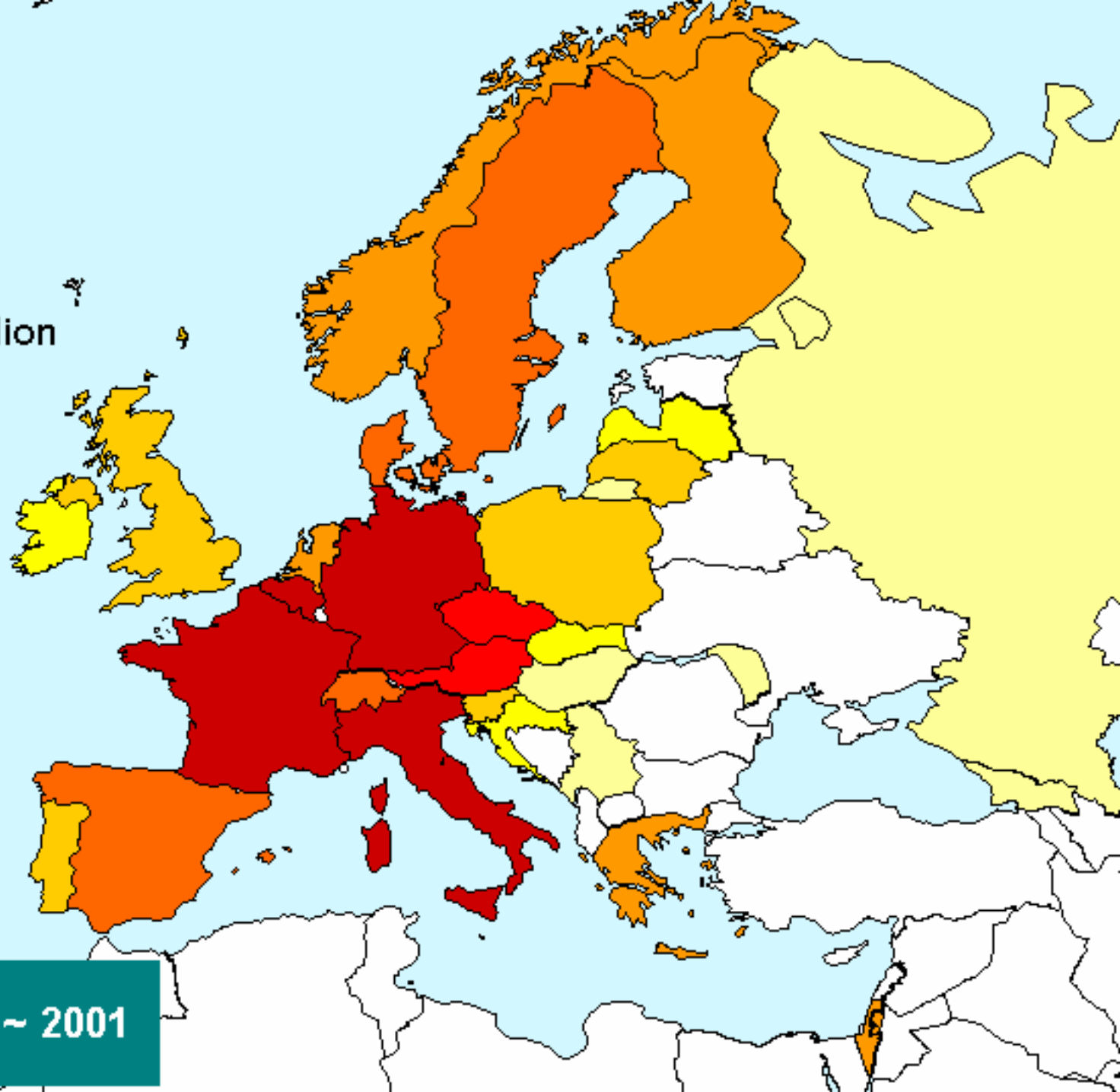
VSD



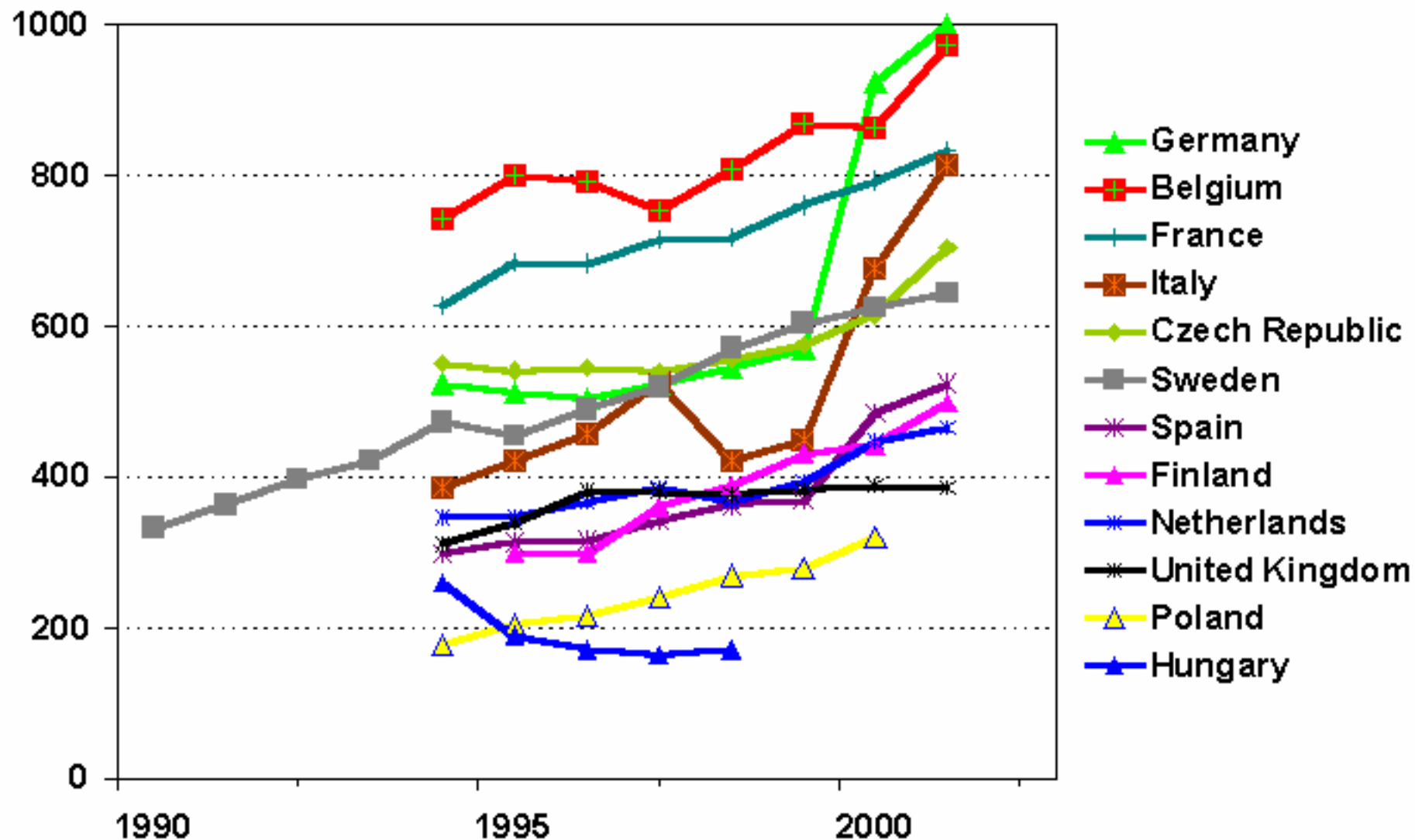
Pacemakers/million



PACEMAKERS ~ 2001

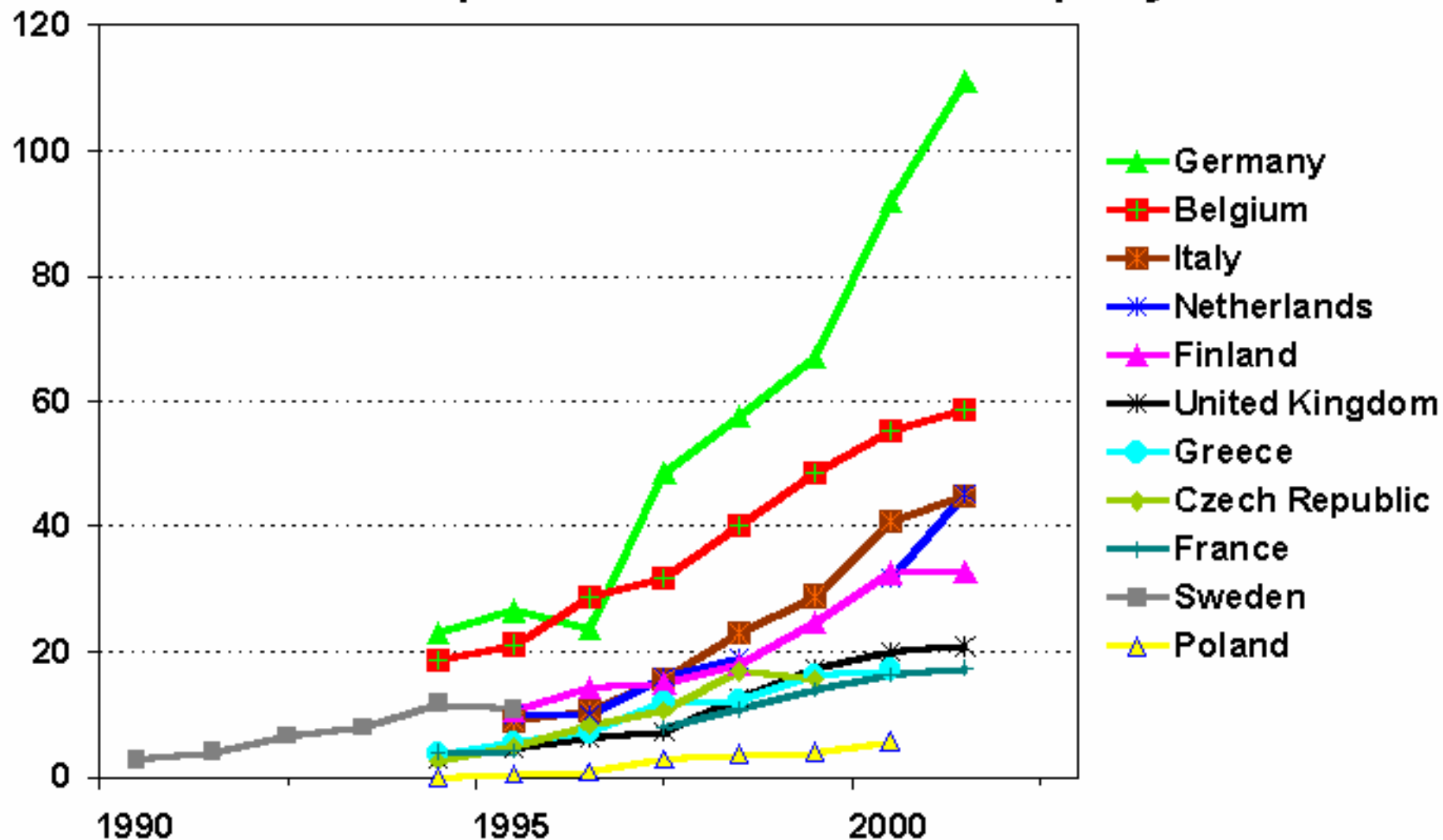


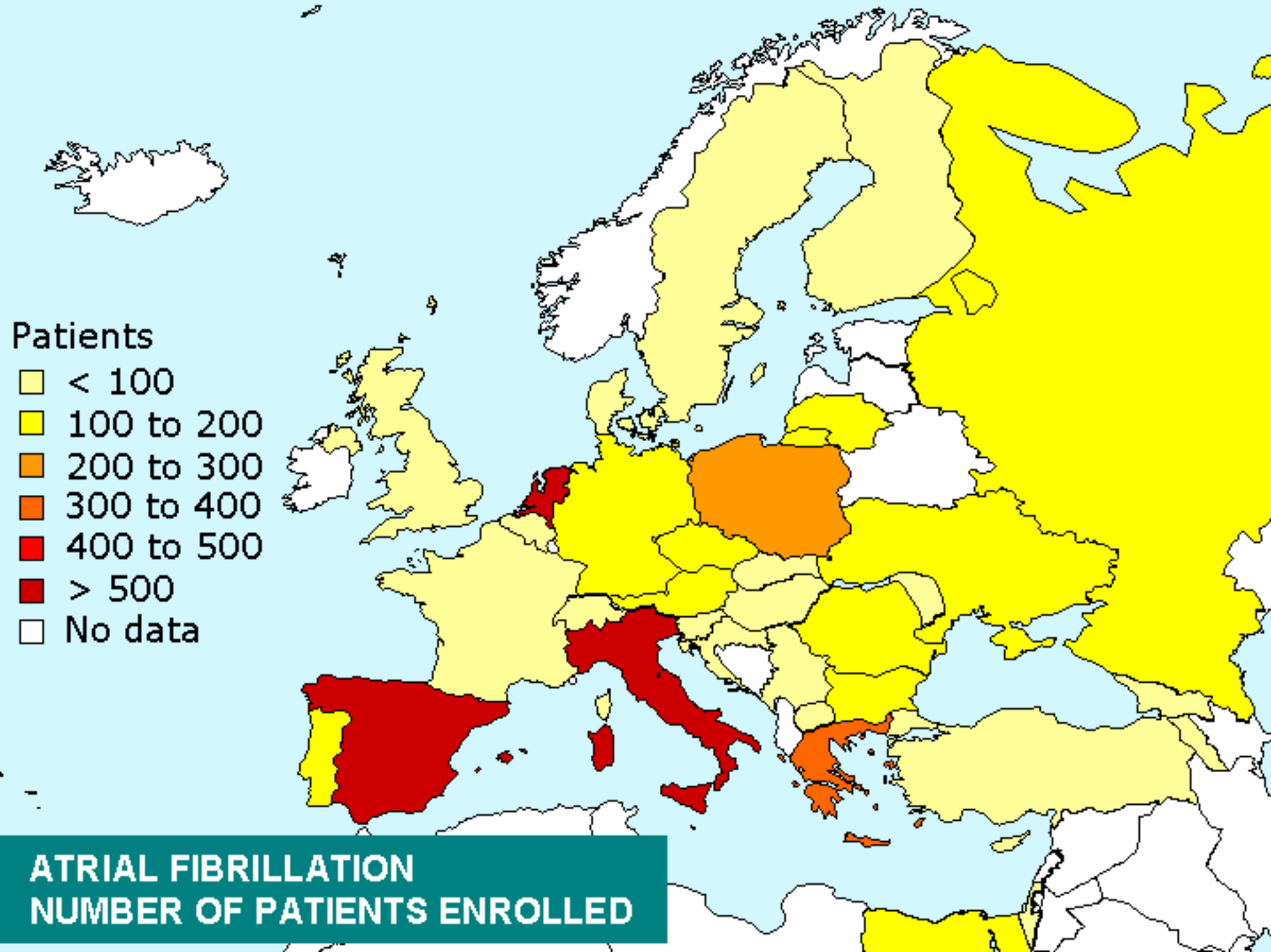
Time trends in the use of Pacemakers numbers per 1 million inhabitants per year



Time trends in the use of Implantable Cardioverter Defibrillators

numbers per 1 million inhabitants per year



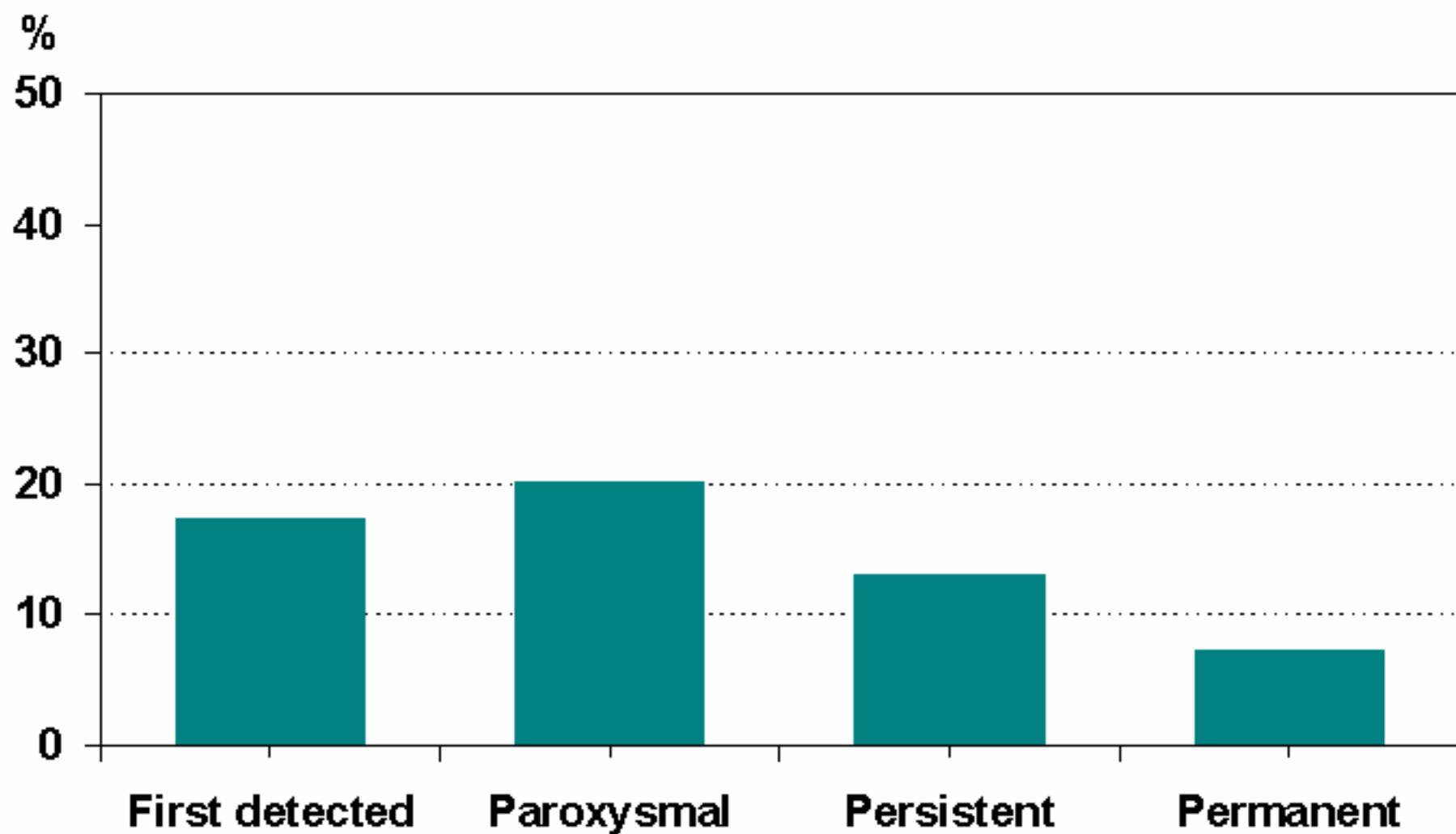


Patients

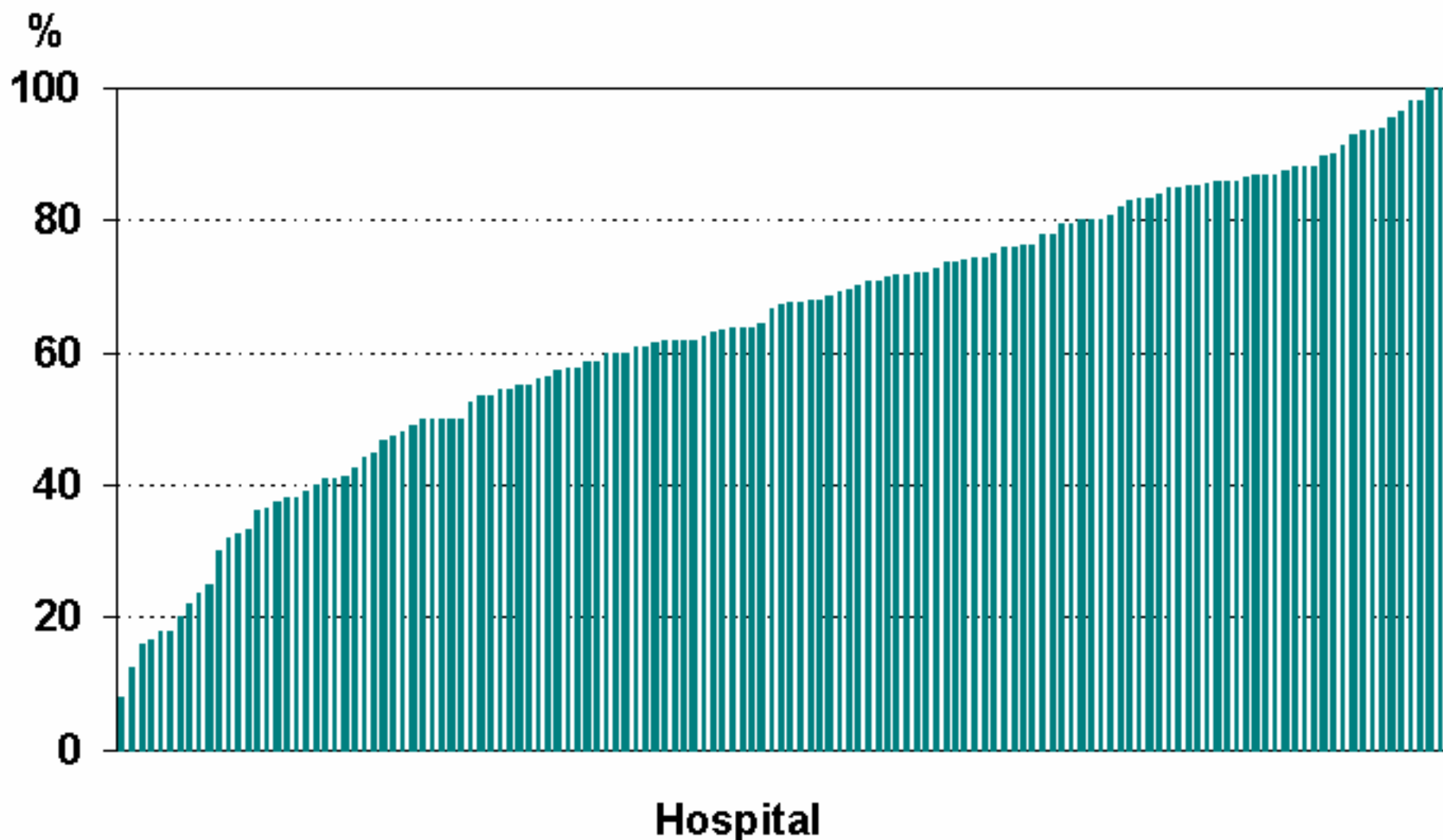
- < 100
- 100 to 200
- 200 to 300
- 300 to 400
- 400 to 500
- > 500
- No data

**ATRIAL FIBRILLATION
NUMBER OF PATIENTS ENROLLED**

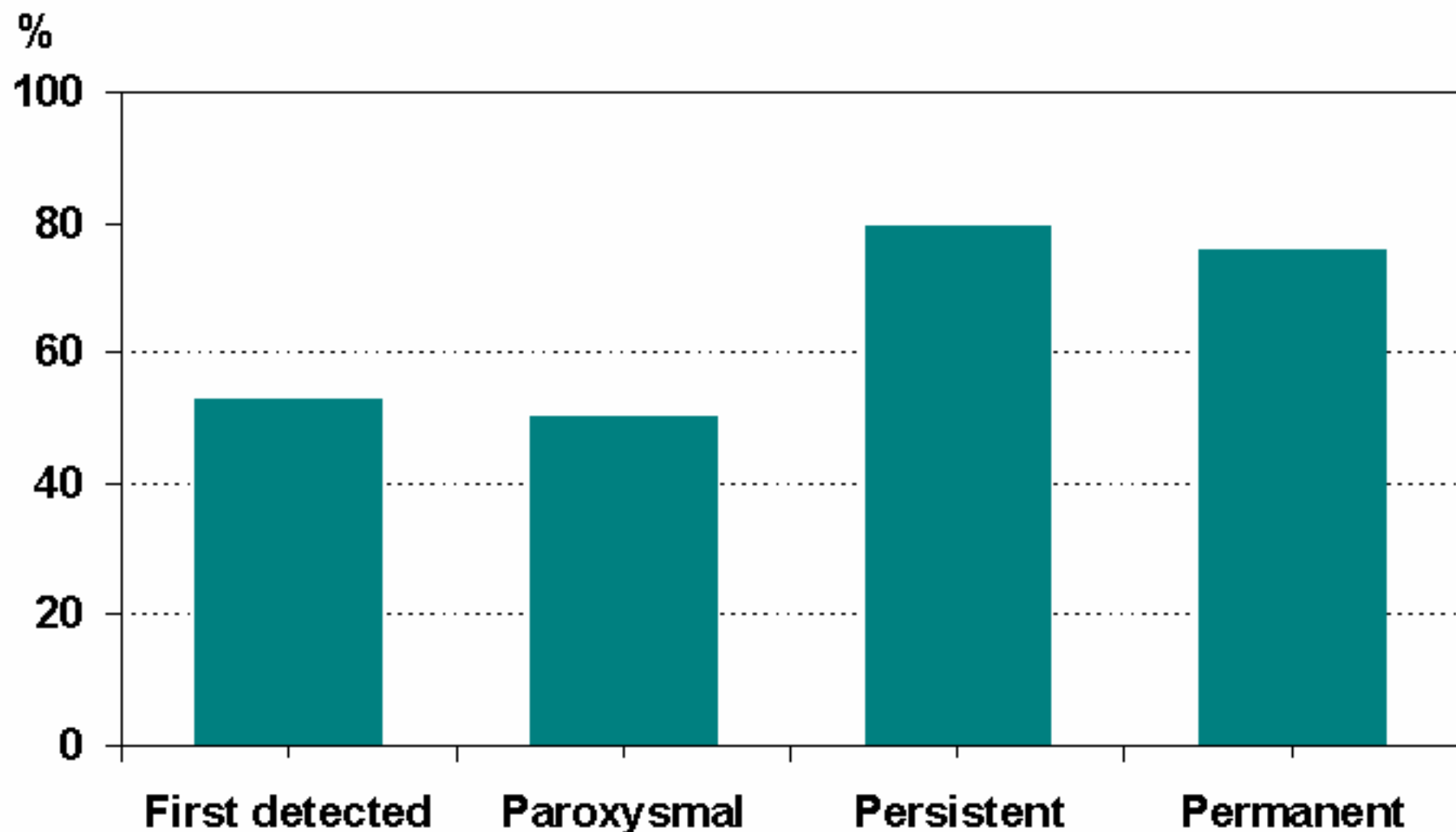
No other cardiovascular disease by type of atrial fibrillation



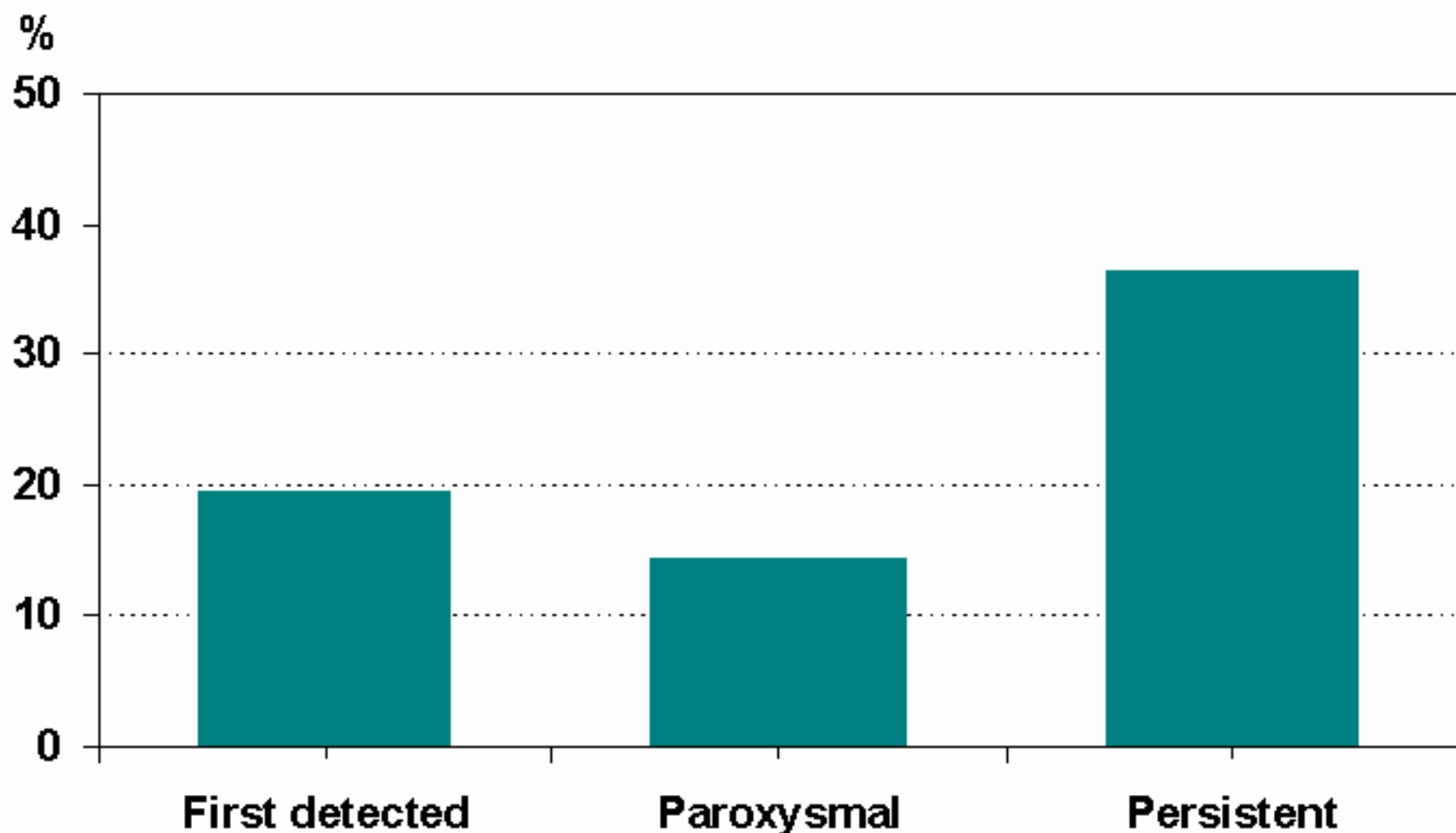
Anticoagulation therapy in atrial fibrillation



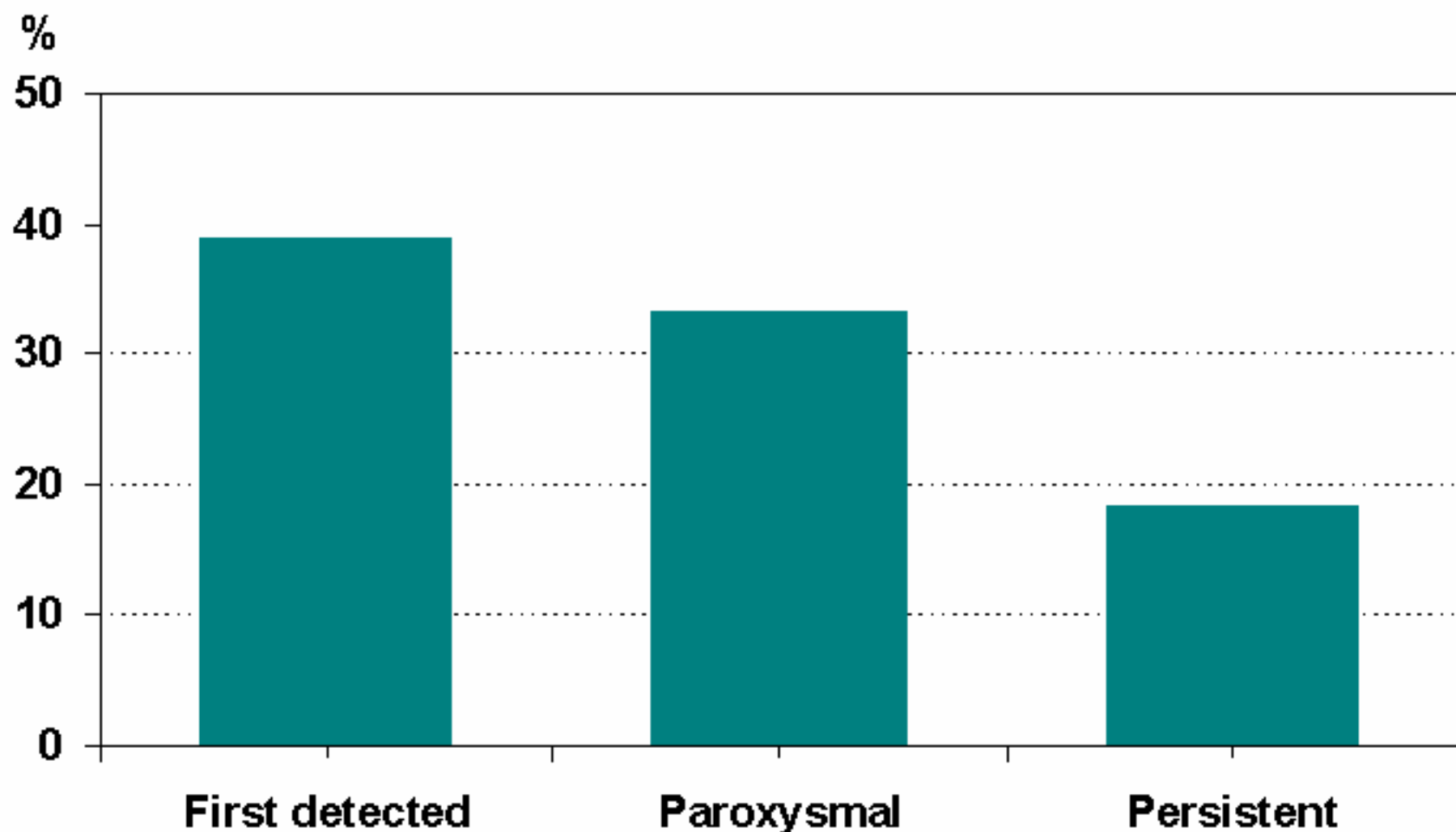
Anticoagulation therapy at discharge by type of atrial fibrillation



Electrical cardioversion by type of atrial fibrillation



Pharmacological conversion by type of atrial fibrillation



Secondary prevention evolution 1995-2002

