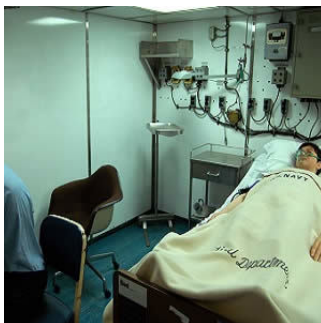

Study: Heart Patients Fare Worse in ICUs



A new study suggests that patients who have heart attacks or flareups of CHF fare worse in hospitals that rely on intensive care units to care for such patients. The findings are published in *CHEST*.

Findings show that these patients may be half as likely to get proven tests and treatments and are less likely to survive a month after hospital stay. This is the first time a study has demonstrated that hospitals with a high ICU usage measure worse on health care quality in heart patients.

During the study, the authors examined Medicare records from more than 570,000 hospital stays in 2010. Out of 150,000 hospitalisations for acute MI, 46 percent included care in an ICU. 16 percent of the 400,000 hospitalisations for heart failure also included an ICU stay.

See Also: [Multidisciplinary Care in the ICU: Who's in Charge?](#)

The results showed that hospitals with the highest percentage of patients admitted to the ICU tended to be those with the smallest number of heart attacks and heart failure patients. They were also more likely to be for-profit hospitals with patients more likely from low-income areas.

Findings also suggest that high-ICU patients were less likely to give heart attack patients aspirin or other drugs to improve outcomes. Similarly, in heart failure high-ICU hospitals were less likely to give important medications, perform key tests and advise patients to stop smoking.

The biggest difference was in the risk of dying within 30 days of discharge. Heart attack patients were 6 percent more likely to die in high-ICU hospitals as compared to those admitted to low-ICU hospitals and 8 percent more for heart failure patients. No significant differences were observed in the odds of being hospitalised again or in total spending on care.

"These studies suggest that hospitals using the ICU frequently could be targets for improvement. If we find out why hospitals are using ICU beds more often for these patients, we could intervene to improve care overall," says Thomas Valley, MD, MSc, a critical care specialist who takes care of patients in the U-M Health System's Critical Care Medicine Unit.

Source: [CHEST](#)

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