



**Licking Memorial  
Health Systems**

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this month's report on patient  
care quality. You'll soon discover  
why Licking Memorial Hospital  
is measurably different  
for your health!  
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**Licking Memorial  
Health Systems**

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**Heart  
Care**

measurably  
**different**  
for your  
**health!**

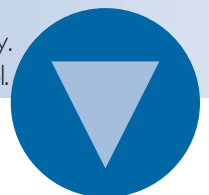


**HEALTH TIPS**

Not all risk factors for heart disease can be controlled. Take control of those you can control, since having multiple risk factors greatly increases your chance of developing heart disease.

- If you smoke, quit.
- Maintain a healthy weight. If you are overweight, consult your physician for safe weight loss tips.
- Aim to get 30 minutes of physical activity daily.
- Monitor your blood pressure and blood cholesterol.

**...a community report on patient care quality.**



# Heart Care: How do we compare?

At Licking Memorial Hospital, we take pride in the care we provide. To monitor the quality of that care, we track specific quality measures and compare them to benchmark measures. Then we publish them so you can draw your own conclusions regarding your health care choices.

**1** The first step in heart attack treatment is to confirm that the patient is truly experiencing the symptoms of an attack. An electrocardiogram, or EKG, measures the electrical activity of the heart and can determine if a heart attack is occurring.

	LMH 2002	LMH 1/03-11/03	National Standard <sup>(1)</sup>
Median time to EKG	<b>10 minutes</b>	<b>11 minutes</b>	<b>less than 10 minutes</b>

**2** Fibrinolytic, or “clot-busting,” medications can stop a heart attack in progress, which helps prevent heart damage and save lives. Therefore, the sooner a patient arrives at the hospital and receives the drug, the more effective the treatment will be.

	LMH 2002	LMH 1/03-11/03	National Benchmark <sup>(2)</sup>
Median time to drug	<b>25 minutes</b>	<b>16 minutes</b>	<b>36 minutes</b>

**3** LMH's cardiac catheterization lab performs low-risk diagnostic testing on patients suspected of having blockage in their arteries. A measure of quality during the procedure is the rate of unexpected events.

Unexpected Event	LMH 2002	LMH 1/03-11/03	State Benchmark <sup>(3)</sup>
Mortality	<b>0%</b>	<b>0%</b>	<b>0.10%</b>
Heart attack	<b>0%</b>	<b>0%</b>	<b>0.03%</b>
Cardiac arrest	<b>0%</b>	<b>0%</b>	<b>0.10%</b>
Stroke	<b>0%</b>	<b>0%</b>	<b>0.01%</b>
Vascular complications	<b>0%</b>	<b>0%</b>	<b>0.23%</b>

**4** Cardiac rehabilitation programs aid people who have experienced heart attacks. LMH's program provides medical oversight and heart monitoring for individuals as they exercise and strengthen their hearts. LMH also measures participants' progress in improving certain indicators of heart health.

Health Indicator	LMH 2002	LMH 1/03-9/03
% Who stopped smoking	<b>69%</b>	<b>63%</b>
% Improved weight	<b>54%</b>	<b>41%</b>
% Increased exercise time	<b>100%</b>	<b>100%</b>
% Improved quality of life – physical	<b>82%</b>	<b>83%</b>
% Improved quality of life – mental	<b>63%</b>	<b>71%</b>

**5**

During a heart attack, the heart tries to compensate for its weakened pumping action by beating faster, which puts more strain on it. Beta blockers reduce the heart's tendency to beat faster. Additionally, aspirin has been shown to prevent further blood clotting in heart attack patients.

## Aspirin within 24 hours of patient arrival

LMH 2002	LMH 1/03-11/03	National Benchmark <sup>(2)</sup>
<b>99%</b>	<b>98%</b>	<b>95%</b>

## Aspirin at hospital discharge

LMH 2002	LMH 1/03-11/03	National Benchmark <sup>(2)</sup>
<b>88%</b>	<b>93%</b>	<b>93%</b>

## Beta blocker within 24 hours of patient arrival

LMH 2002	LMH 1/03-11/03	National Benchmark <sup>(2)</sup>
<b>89%</b>	<b>95%</b>	<b>87%</b>

## Beta blocker at hospital discharge

LMH 2002	LMH 1/03-11/03	National Benchmark <sup>(2)</sup>
<b>92%</b>	<b>94%</b>	<b>88%</b>

**6**

ACE inhibitors reduce the risk for mortality in patients with LVSD after heart attack. LVSD refers to the reduced squeezing ability of the left ventricle that can occur after heart attack. Additionally, the likelihood of the patients having another heart attack can be reduced if an ACE is administered.

## ACE at discharge for LVSD

LMH 2002	LMH 1/03-11/03	National Benchmark <sup>(2)</sup>
<b>97%</b>	<b>88%</b>	<b>74%</b>

**7**

As part of its quality program, LMH measures mortality rate for specific illnesses.

## Heart attack inpatient mortality

LMH 2002	LMH 1/03-11/03	National Benchmark <sup>(2)</sup>
<b>6.3%</b>	<b>9.2%</b>	<b>8.8%</b>

### Data Footnotes:

(1) ACC/AHA Guidelines for the Management of Patients with Acute Myocardial Infarction, 1999.

(2) Comparative data from second quarter 2003 from the Midas clinical database, representing more than 12,800 patients. In past years, data reported was limited to patients older than age 69. Now it includes all heart attack patients, regardless of age.

(3) Ohio Department of Health, Adult Cardiac Catheterization Reports using 2002 Ohio data for low-risk laboratories.

# Facing Heart Attack aftermath Together

## PATIENTS' STORY

**M**others and daughters often have common mannerisms and physical characteristics. Jean Miller and Jamie Ford wish their similarities stopped there, but the two also share a history of heart disease.

Jean had a heart attack in June 1992 and heart triple bypass surgery the following year. Her daughter, Jamie, had a heart attack in January 1994. "I told Jamie when she was in the hospital, 'You know, you don't have to do everything I do,'" Jean joked.

Mother and daughter both attended the Cardiac Rehabilitation program at Licking Memorial Hospital (LMH) and regularly schedule appointments with their cardiologist, Debra Heldman, M.D., for the same time. "Dr. Heldman always calls us the Cardiac Twins," Jean said.

### June 1992

Jean's personal history with heart disease began on a sunny day in June 1992 when the then 69-year-old was gardening in her back yard.

"All of a sudden, I didn't feel well," she said. "I went in the house to rest, but I felt worse and worse." Jean was taken to Licking Memorial Hospital (LMH), where she was treated for a heart attack. "I was in and out of it for the next seven days," she said. "They called 'code blue' on me twice."

Although Jean's mother had died of a heart attack at age 46,

Jean didn't think she had inherited heart disease. "I had never really thought about having a heart attack," Jean said. "I was always healthy." Her daughter also was caught off guard by heart disease.

### January 1994

"It was just such a shock," Jamie said about having a heart attack at age 45. "I didn't have a clue it was going to happen." Jamie had just finished carrying her groceries into her kitchen when her daughter called. "I kidded with her that I was having a heart attack," Jamie said. "I think I hit the nail right on the head but didn't know it."

Earlier, Jamie had experienced a "weird burning and tightening" that started in her chest and reached around to her back. Because the sensation was periodic, Jamie wasn't concerned. At 3 o'clock the following morning, she awoke to the same feeling. Again, it went away quickly. But, at 4 a.m., the pain had intensified and spread to both of her arms. She broke into a cold sweat. "We never think it's going to happen to us," Jamie said. "My mom told me the symptoms she had had, and I knew what was happening to me." Her husband rushed her to LMH.

Jamie was treated by cardiologist Bryce Morrice, M.D., who had also provided care for Jean.

continued on next page ...



*Jamie Ford and Jean Miller are heart attack survivors. The mother-daughter duo participates in a water exercise class three days a week at ORS Wellness Center in Newark to improve their health. Jamie (pictured in the water) instructs the class.*

**“We never think it’s going to happen to us. My mom told me the symptoms she had had, and I knew what was happening to me.”**

**Jamie Ford**

## Together (continued)

"It was like déjà vu," Jamie said. "Less than two years earlier, I had gone through the heart attack care process with my mom. Now, I was the one in the bed."

### Follow-up Care

After her heart attack, Jamie completed the same Cardiac Rehabilitation program at LMH that her mother had been through twice – first after her heart attack and again after heart bypass surgery in Columbus. "After the heart attack, I was weak and couldn't do much," Jamie said, "but after going to cardiac rehab, I felt much stronger and had more energy." Jean liked being around other people facing similar struggles. "It was like a second family," she said. "We encouraged each other."

Cardiac rehab involves exercise, lifestyle changes, and goal-setting. Jamie said it helped her focus on the future – not dwell on the past. "I was exercising regularly for eight months before my heart attack," Jamie said. "Had I started exercising in my late 20s and kept with it, maybe I wouldn't have had a heart attack. Then again, you don't know. Sometimes you have to change your thoughts on why something happened and just go forward."

### Friendly Advice

Jamie and Jean advise others to: pay attention to their family health history, get regular exercise, eat healthily, and laugh often. "The good thing about our family is that we make jokes about everything," Jamie said. "Life is too short to be so serious. If you can't change it and you can't control it, forget it. Worry doesn't do anything for anybody."

## Think You Know The Heart Truth?

THE HEART TRUTH IS A NATIONAL CAMPAIGN FOCUSED ON ALERTING WOMEN TO THE SERIOUSNESS OF HEART DISEASE. SPONSORED BY THE NATIONAL HEART, LUNG, AND BLOOD INSTITUTE, THE HEART TRUTH IS PRESENTED IN PARTNERSHIP WITH THE AMERICAN HEART ASSOCIATION AND OTHER ORGANIZATIONS COMMITTED TO PROMOTING WOMEN'S HEALTH AND WELLNESS.

Test your knowledge of heart disease and women by taking the following quiz. For more information, talk to your primary health care provider, or visit The Heart Truth online at [www.nhlbi.nih.gov/health/hearttruth](http://www.nhlbi.nih.gov/health/hearttruth).

### Q: What is coronary heart disease?

**A:** Coronary heart disease is the main form of heart disease. Developing over a period of years, it damages the blood vessels of the heart and can result in heart attack, disability, and even death.

### Q: What causes a heart attack?

**A:** A heart attack is the result of a lack of oxygen and nutrients to the heart when an artery is blocked.

### Q: True or False: Women do not need to be concerned about their heart health until at least age 50.

**A:** False. A woman's risk of heart disease begins to increase between the ages of 40 and 60. In fact, heart disease develops over time and can start as early as the teen years.

### Q: Rank in order the following leading causes of death for American women: breast cancer, stroke, heart disease, lung cancer, chronic obstructive pulmonary disease.

**A:** Heart disease is the No. 1, followed by stroke, lung disease, chronic obstructive pulmonary disease and breast cancer. One in every three American women dies from heart disease.

### Q: True or False: Although heart disease is the leading cause of death for American women, stroke is a close second.

**A:** False. In 2000, approximately 366,000 American women died from heart disease, while stroke claimed 103,000 American women's lives. Other totals are: lung cancer – 65,000, chronic obstructive disease – 62,000, and breast cancer – 42,000.

### Q: Name three risk factors for heart disease.

**A:** Risk factors include: smoking, high blood pressure, high blood cholesterol, being overweight/obesity, physical inactivity, diabetes, family history of early coronary heart disease, age (for women, 55 and older).

