Immediate Reduction in Acute Myocardial Infarctions After Implementation of a Comprehensive Smokefree Ordinance

> Richard P. Sargent, Presenter American College of Cardiology 52nd Annual Scientific Sessions March 30-April 2, 2003 Chicago, IL

Immediate Reduction in Acute Myocardial Infarctions After Implementation of a Comprehensive Smokefree Ordinance

AUTHORS

Richard P. Sargent, MD Robert M. Shepard, MD HealthCare Quality Performance Council St. Peter's Community Hospital 2475 Broadway Helena, Montana 59601

Stanton A. Glantz, PhD **Division of Cardiology** Department of Medicine University of California San Francisco, CA 94143

The following relationships exist related to this presentation:

Dr. Sargent's travel expenses to ACC Scientific Session supported by ProtectMontanaKids, a project of the American Cancer Society, American Heart Association, and American Lung Association of the Northern Rockies, with support from the Robert Wood Johnson Foundation.

Dr. Glantz' work was supported by National Cancer Institute Grant CA-61021 and the American Legacy Foundation. 2

Passive and Active Smoking Cause Heart Disease

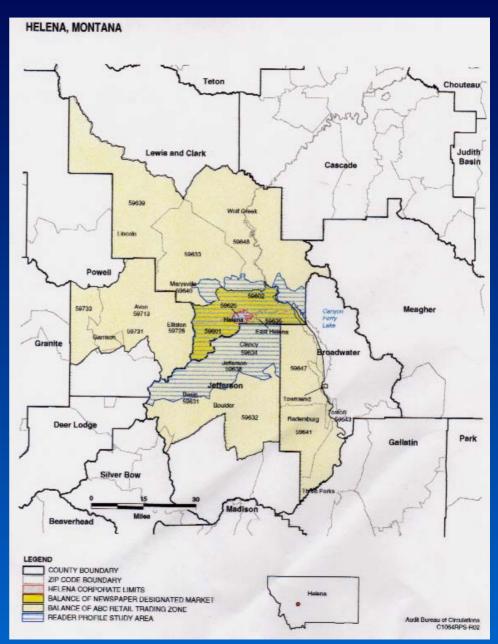
- SHS increases risk of cardiac event by 30%
- Effects on platelets
- Effects on endothelium
- Effects on heart rate variability
- Smokefree workplaces are associated with a 29% drop in cigarette consumption

Helena, Montana

Population of city: 28,306 Population of Helena Zip Codes: 46,943 Total Population of Study area: 65,913 Geographically isolated population Next nearest cardiologist: 60 miles







Area Hospitals

- St.Peters Community Hospital, Helena, MT
 99 Beds, Two cardiologists
- Broadwater Health Center, Townsend, MT
 - 9 beds, Two Family Practitioners
 - 30 Miles SE of Helena
- Ft. Harrison VAMC, Helena, Montana
 - No After hours admissions

JUNE 4, 2002 ORDINANCE PASSES

62% vote for ordinance

- Smokefree
 Workplaces
 Restaurants
 Bars
 Casinos
- Ordinance took effect June 5
- Widespread compliance
- Enforcement Suspended by court December 2

HOSPITAL COMPUTERIZED MEDICAL RECORD

Collect data for 4 years before ordinance to establish time trends and seasonal variation

Compare AMI's in Helena Zip Codes v. AMI's in Zip Codes Not in Helena

STUDY DESIGN

- COMPUTER SEARCH FOR ALL RECORDS WITH PRIMARY OR SECONDARY DIAGNOSIS OF AMI
- CHART REVIEW OF ALL SECONDARY DIAGNOSES AND ALL PATIENTS WITH OUT OF AREA ZIP CODES TO ASSIGN TO THE STUDY GROUP
- SORT CASES BY ZIP CODE

INCLUSION CRITERIA

Discharge Diagnosis: Acute Myocardial Infarction

- Resident of the Area <u>OR</u>
- Spent the Night Preceding the MI in the Study Area <u>OR</u>
- Ate at Least One Meal in the Area Prior to the onset of Symptoms. <u>AND</u>
- Symptoms Began Prior to Hospitalization
- No Complicating Condition or Surgery

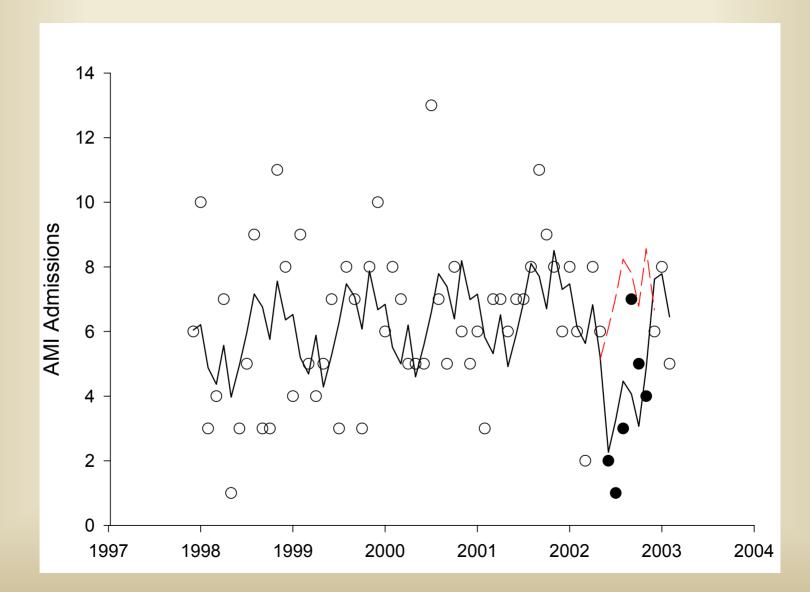
STATISTICAL ANALYSIS

Multiple Linear Regression

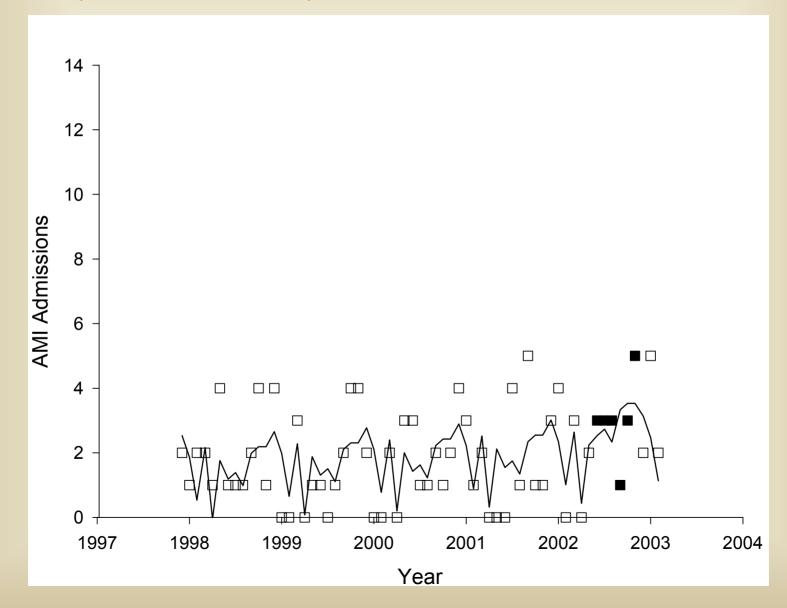
Dependent Variable: AMI admissions for month

Independent variables: Time Month Presence of Ordinance 0,1 dummy variable

In Helena: Significant fall of -4.0 ± 1.2 AMI admissions per month (P=.002) while ordinance is in force



Outside Helena: No significant change in AMI admissions per month ($+0.9\pm0.7$; P=0.22) while ordinance is in force



CONCLUSIONS

- Helena, Montana's Clean Indoor Air Ordinance Decreased Acute Myocardial Infarction by 60% compared to the same time period in the previous four years.
- Result is biologically plausible
- Suggests that 100% smokefree ordinances have an important and immediate effect on cardiac risks