

For Immediate Release

Landmark report the largest study of its kind to examine influence of geography on heart disease patients across Canada

TORONTO, (July 4, 2006) – Today, the Canadian Cardiovascular Outcomes Research Team (CCORT) released the collective findings of the *Canadian Cardiovascular Atlas*, the largest and most advanced report of its kind to examine the influence of geography on the burden, risk factors, treatments, and outcomes of heart disease for the more than 1.2 million Canadians suffering from the condition.

“We found a consistent ‘East to West’ gradient across Canada throughout the Atlas, with Atlantic Canadians having the highest levels of risk factors for heart disease and the highest cardiovascular disease mortality rates in the country,” said Dr. Jack Tu, CCORT Atlas Editor and Senior Scientist at the Institute for Clinical Evaluative Sciences (ICES), the national coordinating centre for the CCORT initiative.

“Although Western Canada had lower rates than the East, we also found that patients in British Columbia were the least likely to receive evidence-based therapies such as beta-blockers following hospital admission for a heart attack. The Atlas findings suggest there are opportunities for all provinces and regions of Canada to improve the health profiles of their citizens and the outcomes of those who suffer from heart disease.

“The Atlas also demonstrates that all Canadians do not have similar levels of access to quality cardiac care, and that where one lives can determine the type of treatment received. We believe there is a need for a coordinated pan-Canadian approach to measuring and improving the quality of cardiac care. We hope that the results from our research can serve as an important aid for policy makers and clinicians towards achieving this objective.”

The 24 chapters of the Atlas were each originally published as articles in the *Canadian Journal of Cardiology*. Here is an overview of key findings from the Atlas:

- Cardiovascular disease continues to be the leading cause of death in Canada, responsible for 37% of all deaths in the country.
- Much of the variation in cardiovascular death rates across Canada can be explained by regional variations in traditional cardiovascular risk factors, such as smoking and obesity levels in communities.
- There is sub-optimal treatment of heart attack patients across the country in certain areas of acute hospital care, and also variations in the proportion of people who are treated by a cardiologist.
- There is significant variation in the rates of cardiac procedures and cardiac drug spending across Canada that do not appear to reflect differences in clinical need, but rather other factors such as policy differences, physician practice styles, and possibly patient preferences.

“The Canadian Institutes of Health Research (CIHR) is helping to build teams like CCORT to address current gaps in the system and improve access to health care,” said Dr. Peter Liu, Scientific Director of CIHR’s Institute for Circulatory and Respiratory Health. “With this type of strategy we can continue to decrease death in cardiovascular disease across the country.”

“As part of its commitment to improving the heart health of Canadians, the Heart and Stroke Foundation of Canada is proud to have played a key role in supporting the development of the CCORT Atlas through the HSF Research Fund,” said Sally Brown, CEO of the Heart and Stroke Foundation of Canada. “We believe the data in the Atlas will be of great use to policy makers and clinicians for heart disease prevention and health system planning.”

“Based on these findings, and as we continue our research into these topics, we have several recommendations to help improve heart disease care in Canada and for future research,” said Dr. Tu.

“Provinces and health regions should use the Atlas data to guide appropriate health promotion and health system improvements. A national cardiovascular surveillance system should be established to permit CCORT Atlas-type studies to be conducted and updated in a regular manner. Funding should be made available to improve the quality and quantity of clinical databases available to study trends in health system performance. And finally, federal and provincial governments should work together to ensure all Canadians have similar levels of access to current cardiovascular treatments.”

Copies of the Atlas can be downloaded free of charge on the CCORT website at www.ccort.ca/atlas.asp. The report is also available as a hard copy book or CD-ROM, which can be ordered free of charge on the CCORT website.

ICES is an independent, non-profit organization that uses population-based health information to produce knowledge on a broad range of health care issues. Our unbiased evidence provides measures of health system performance, a clearer understanding of the shifting health care needs of Ontarians, and a stimulus for discussion of practical solutions to optimize scarce resources. ICES knowledge is highly regarded in Canada and abroad, and is widely used by government, hospitals, planners, and practitioners to make decisions about care delivery and to develop policy.

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(Des entrevues sont disponibles en français)