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Highlight...

3rd NCVD Annual Meeting during 13th ASM NHAM 2009

The 3rd National Cardiovascular Disease Database (NCVD) Annual Meeting was successfully held on the 19th of April 2009 during the 13th Annual Scientific Meeting of National Heart Association of Malaysia (NHAM) at KL Hilton. As a co-sponsor of NCVD, NHAM has sponsored 74 nurses and research officers from all active Source Data Providers (SDP) to attend the three days scientific meeting as a token of appreciation for their contribution in NCVD. The session was planned in two-way interactive approach whereby the first half were progress reports from NCVD management and the second part which involved presentations from users.

Dato’ Dr Azhari Rosman chaired the meeting on behalf of Prof Dr Sim Kui-Hian (NCVD co-chairman) with his welcoming speech and thanking everyone for their continuous support and contribution in NCVD. Dato’ Dr Rosli Mohd Ali, Chair of NCVD PCI Registry began the first half of the meeting by taking the audience into the PCI Registry progress. He was impressed by the large number of data that we have but there are still a lot of catching up needs to be done in terms of the Follow up management. Up until April 2009, there are about 7200 cases registered online in the PCI Registry.

Next is Prof Dr Wan Azman Wan Ahmad, Chair of NCVD writing committee, urged everyone to be involved in publications. He strongly encouraged everyone to write and publish papers as he has mentioned that “We have been planting the seed, waiting for the tree to grow, putting fertilizer and watering but not plucking the fruit. Publication is the fruit.”
Dato’ Dr Azhari, co-chair of NCVD ACS Registry has presented updates from ACS Registry in a more interactive way. Concurrently during the presentation, he discussed the data with the audience where it encourages everyone to think of the relevance of the data with clinical practice in Malaysia. Dato’ Dr Azhari mentioned that most of our data are in line with the world figures.

Second half of the session was continued with presentations of five representatives from different SDPs on their site management. The five SDPs presented were from National Heart Institute, Penang Hospital, Kuala Lumpur Hospital, Sarawak General Hospital and Sultanah Aminah Hospital. Generally, from this session, the following elements were shared across SDPs:

1. Delegation of tasks – from consultant down to staff nurse
2. Data quality measures at SDP level
3. Data collection, filing and tracking system
4. Ascertainment rate of the SDP
5. Commitment and enthusiasm of staffs in NCVD

The 3rd NCVD Annual Meeting was definitely a very fruitful event. It was very interactive whereby everyone were given equal chance to share their opinions. The importance of follow ups and data quality aspects were our overall concern. Suggestions for future plan are to come up with Standard Framework of NCVD Site Management and to have a special slot to present NCVD outputs during the upcoming NHAM ASM. Besides that, few important issues were picked such as financial, infrastructures and staffing for further discussion in NCVD top management meeting. These issues will also be brought up in NHAM council meeting. At the end of the day, the theme of the event, which is ‘Together Everyone Achieve More (TEAM)’, was heartfelt by everyone.

**Helpful Tips on...**

Data Quality Measures from SDPs:
1. Document in a log and use tagging system to tag for missing data in data collection
2. Tracking log to keep track of the next follow up (FU) is very useful for FU management
3. Monthly data download to clean the data and counter-check with statistics department

**Role of Site Coordinator**

Site coordinator plays important role at SDP level:

- To maintain communication line with RCC
- To update RCC on the registration of new users/ deactivation of users in the site
- To maintain the filing of registry documents
- To coordinate the submission of monthly census
- To verify the request to delete (by email/ call to RCC)
- To provide internal training for new users –unless requires RCC assistance
- To have access in data download & handle the on-site data request

*Requirement - Email address to ease the communication*
Key Figures extracted from ACS Registry (as of 9th April 2009, n=10,864)

No. of SDP = 18 (*15 active sites)

Key Figures extracted from ACS Registry
(as of 9th April 2009, n= 10,864)

22.17
11.58
10.93
7.62
0.97
2.12
4.8
2.07
0.5
1.79
7.78
1.95
0.11

AS cases registered online by Source Data Providers (SDP)

Percentage of Ischaemic status by ACS stratum (n=10,864)

26.25% STEMI
6.74% NSTEMI
43.31% UA
23.7% Missing
In-hospital Outcome of ACS Patients

<table>
<thead>
<tr>
<th>Outcome</th>
<th>(%)</th>
<th>(n= 10,864)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Discharged</td>
<td>85.65</td>
<td></td>
</tr>
<tr>
<td>Transferred</td>
<td>1.98</td>
<td></td>
</tr>
<tr>
<td>Died</td>
<td>6.91</td>
<td></td>
</tr>
<tr>
<td>NA</td>
<td>5.55</td>
<td></td>
</tr>
</tbody>
</table>

Overall Follow Up Management

<table>
<thead>
<tr>
<th>Type of FU</th>
<th>30days FU</th>
<th>1year FU</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>N</td>
<td>%</td>
</tr>
<tr>
<td>Expected visits</td>
<td>9650</td>
<td>7604</td>
</tr>
<tr>
<td>FU Done</td>
<td>6493</td>
<td>3352</td>
</tr>
<tr>
<td>Missed FU</td>
<td>3157</td>
<td>4252</td>
</tr>
</tbody>
</table>

Overall Follow Up Completed at 30days & 1year

Total 30days FU = 6,493 (as of 9th April 2009)
Total 1year FU = 3,352 (as of 9th April 2009)
Key Figures extracted from PCI Registry (as of 9th April 2009, n=8,236)

Number of PCI registered (online) by Source Data Providers (SDP)

- Total PCI = 8,236 as of 9th April 2009
Other stents refer to stents other than listed in the Reference Stent List. Total Stent, n=11,508 as of 9th April 2009

### Percentage of stent by total number of stent used (n = 11,508)

- DES, 56.67%
- BMS, 40.58%
- Antibody coated, 2.30%
- Bio absorbable stent, 0.03%
- Others, 0.41%

### PCI status

<table>
<thead>
<tr>
<th>PCI status</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Elective (n = 7,439)</td>
<td>90.32 %</td>
</tr>
<tr>
<td>Staged PCI</td>
<td>22.06 %</td>
</tr>
<tr>
<td>Cath-PCI in same setting (adhoc)</td>
<td>84.12 %</td>
</tr>
<tr>
<td>Urgent (NSTEMI/UA)</td>
<td>4.66 %</td>
</tr>
<tr>
<td>Rescue</td>
<td>2.09 %</td>
</tr>
<tr>
<td>Primary</td>
<td>2.48 %</td>
</tr>
<tr>
<td>Missing</td>
<td>0.45 %</td>
</tr>
</tbody>
</table>

### In-hospital Outcome of PCI Patients

<table>
<thead>
<tr>
<th>Outcome (n=8236)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alive</td>
<td>98.14 %</td>
</tr>
<tr>
<td>Death</td>
<td>1.03 %</td>
</tr>
<tr>
<td>Transferred</td>
<td>0.04 %</td>
</tr>
<tr>
<td>Missing</td>
<td>0.79 %</td>
</tr>
</tbody>
</table>

Total PCI = 8,236 as of 9th April 2009
Total PCI = 8,236 as of 9th April 2009
Total 30 days FU = 2,337 as of 9th April 2009
Total 6 months FU = 786 as of 9th April 2009
Total 1 year FU = 427 as of 9th April 2009
THANK YOU

Photos from the 3rd Annual NCVD Meeting

THOUGHT of the DAY

“If everyone is moving forward together, then success takes care of itself.”
(Henry Ford)