

THE PAUL COVERDELL NATIONAL ACUTE STROKE REGISTRY

WHAT IS THE PUBLIC HEALTH ISSUE?

- Stroke is a leading cause of serious, long-term disability in the United States.
- An estimated 4.8 million Americans and their families live with the disabling effects of stroke.
- Only 3% to 10% of eligible stroke victims get the emergency therapy that can lead to recovery.
- Only a fraction of stroke patients are getting to the hospital in time to receive a treatment that may make the difference between disability and full recovery.

WHAT HAS CDC ACCOMPLISHED?

With funds from CDC's Chronic Disease Prevention and Health Promotion appropriations, CDC's Paul Coverdell National Acute Stroke Registry measures and improves hospital delivery of emergency care for stroke victims in order to reduce death and disabilities from stroke. The registry was launched through university-based prototypes which tested methods in eight states between 2001 and 2003. CDC will begin funding state health departments to establish registries in 2004.

CDC worked closely with representatives from the Brain Attack Coalition, the National Stroke Association, the American Heart Association/American Stroke Association, the National Institute for Neurologic Disorders and Stroke, and the Centers for Medicare and Medicaid Services to identify what quality improvement data should be collected by the Paul Coverdell Registry. Data from the initial prototypes (California, Georgia, Illinois, Massachusetts, Michigan, North Carolina, Ohio, and Oregon) show that large gaps exist between recommended treatment guidelines and what is actually being practiced in hospitals. The prototypes have implemented various quality improvement interventions to address these acute care gaps. Interventions were designed in collaboration with state health departments and hospitals and focus on improvements in emergency room diagnosis, in-patient management, and secondary stroke prevention (i.e., control of high blood pressure and high cholesterol, and smoking cessation). These data will be useful for designing and developing state efforts to reduce death and disability from stroke and to improve the quality of life for stroke survivors.

WHAT ARE THE NEXT STEPS?

Based on evaluation of the eight prototypes, CDC will design a model for a national registry and will begin funding registries in state health departments in 2004. The long-term goal is to establish state registries nationwide to reduce death and disability associated with stroke and to improve quality of life among stroke survivors.