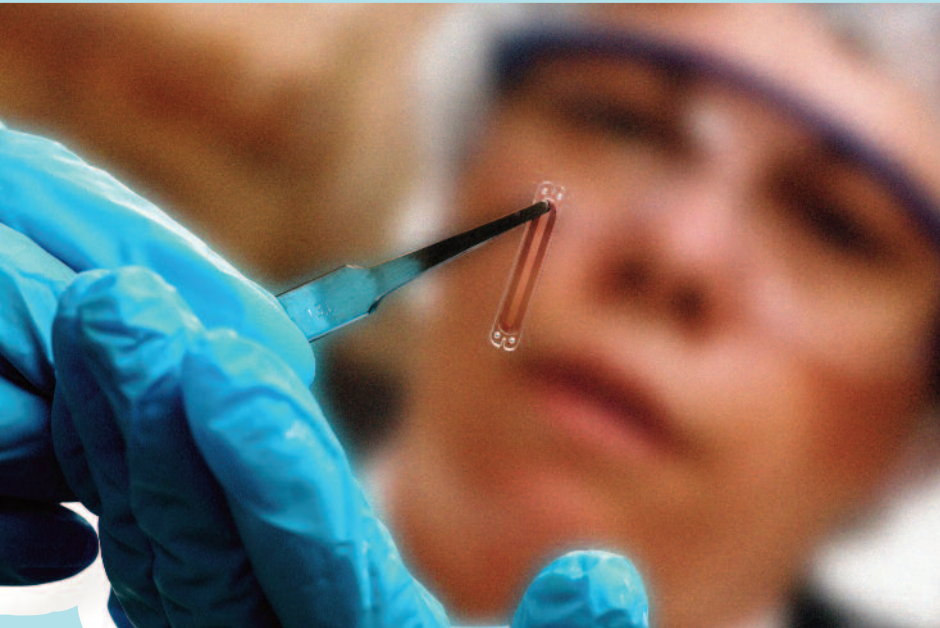


Direct from the doctor



Heart Stent Decision Tool developed at Mercy Medical Center

The lives of cardiac patients at Mercy Medical Center have been greatly enhanced by the implementation of a heart stent decision-making tool created by Cedar Rapids cardiologists and Mercy's cardiac team. A stent is a device used to open a blocked artery to improve blood flow to the heart.



Written by Cardiologist
Richard Kettelkamp, DO

For the last year, area cardiologists have used the Bare Metal Stent (BMS) vs. Drug-Eluting Stent (DES) Decision Tool to match patients to the most appropriate heart stent. During that year, data has been collected by the Mercy cardiac team to evaluate the impact of this tool on patient care – and findings are overwhelmingly positive. That's very good news for Mercy's cardiac patients.

The need for the stent tool was identified based on my extensive research in this area during my fellowship training. The problem and solution process was facilitated by Sue Dawson, a cardiac clinical outcomes and research nurse at Mercy.

This commitment to providing quality care has greatly enhanced the lives of cardiac patients at Mercy and the Cedar Rapids community.

The BMS vs. DES Decision Tool

The scoring tool was designed in response to mounting evidence that the new drug-coated stents are not the best stents for use in all patients. Considerations for a patient's future risk for re-narrowing within a stent at one year, or for developing a blood clot within a stent, are analyzed when the physician makes the decision on the type of stent to use.

These risks, as well as other conditions such as diabetes and the ability to comply with required medication therapy, guide the treatment decision by the cardiologist. Patients who are less likely to comply with a powerful anti-platelet medication (Plavix) for at least one year after stenting are at 25 times the normal risk for developing blood clots if treated with a drug-coated stent.

How is it used?

Before every cardiac catheterization, each patient is analyzed using this tool with data collected by nursing and cath lab staff. This information is then available to the cardiologist, who chooses the most appropriate stent for each patient.

What is the impact on patient care and outcomes?

Before this decision tool was implemented, 98 percent of patients received a drug-coated stent. Since cardiologists began using the scoring tool, the percent of patients requiring a drug-coated stent has decreased to 30 percent. After the introduction of the drug-coated stents in 2003, the incidence of re-narrowing within the stent decreased by 20 percent – but with a six-fold rise in the development of blood clots after stent insertion. With the use of this tool in 2007, there has been a 300 percent decrease in the incidence of patients developing a life-threatening blood clot within a stent.

The use of this tool by cardiologists has helped ensure patients receive the stent best suited to meet their individual needs.

Mercy Medical Center offers heart disease information, education, screening and treatment for people of all ages. Mercy also offers the Heart2 Heart program to help women and men identify their risk factors. For more information, please call (319) 221-8567 or to schedule an appointment, please call (319) 861-7778.