



UTIC | **ANMCO**
CLUB
CRITICAL CARE COMMUNITY

EuroHeart A che punto siamo in Europa

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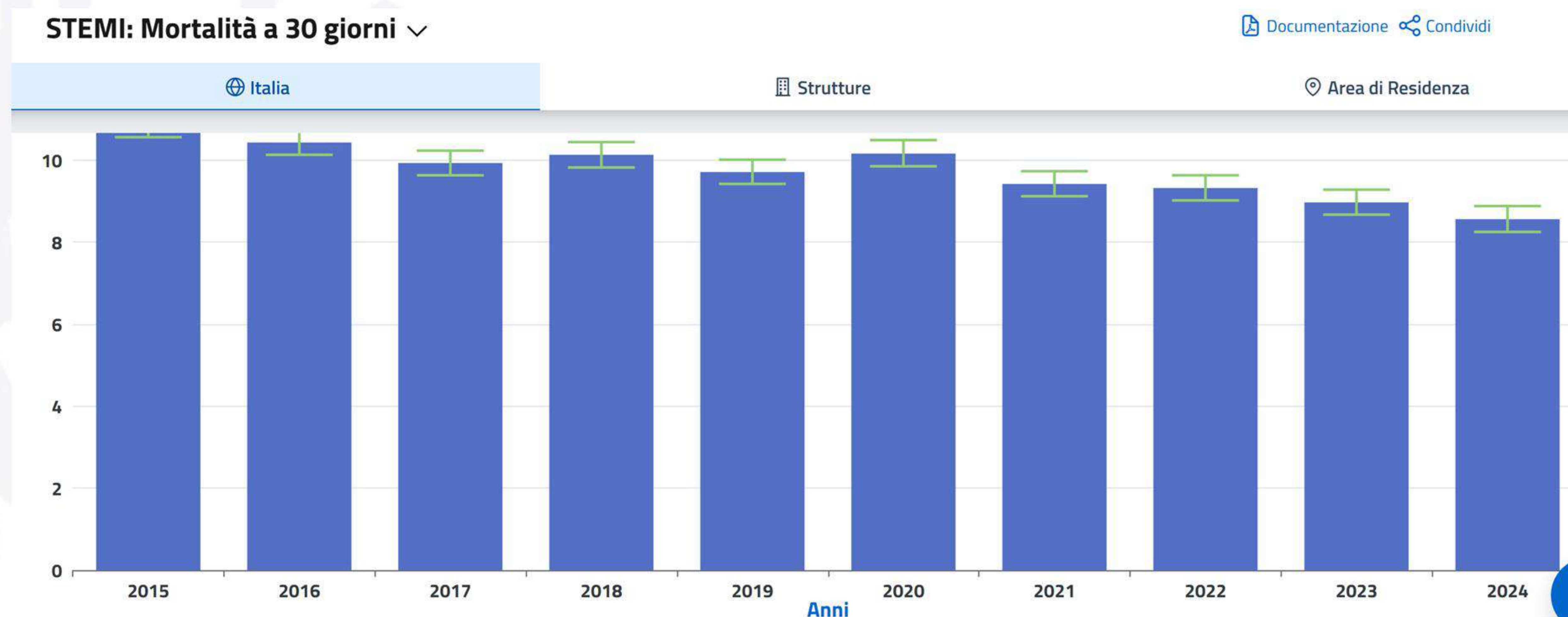
Fonti di finanziamento

- Nessun conflitto di interesse da dichiarare per questa presentazione.

Si fa una valutazione degli interventi sanitari in Italia?

La risposta è **si** con il PNE: esempi

- STEMI mortalità a 30 giorni
- Trattati con PTCA entro 90 min
 - ✓ Stratificata per strutture
 - ✓ Per aree di residenza



I limiti principali

- Informazioni disponibili dopo un anno
- Utilità gestionale ma scarsa utilità pratica per l'operatore sanitario
- Povertà di variabili cliniche per definire con precisione la severità dei pazienti

Per colmare queste lacune, e per creare una cultura della valutazione della qualità degli interventi assistenziali, la ESC, nel 2019, decide di iniziare il

Progetto EuroHeart



ESC

European Society
of Cardiology

European Heart Journal (2019) **40**, 2749–2759

doi:10.1093/eurheartj/ehz599



CARDIOPULSE

EuroHeart: European Unified Registries On Heart Care Evaluation and Randomized Trials

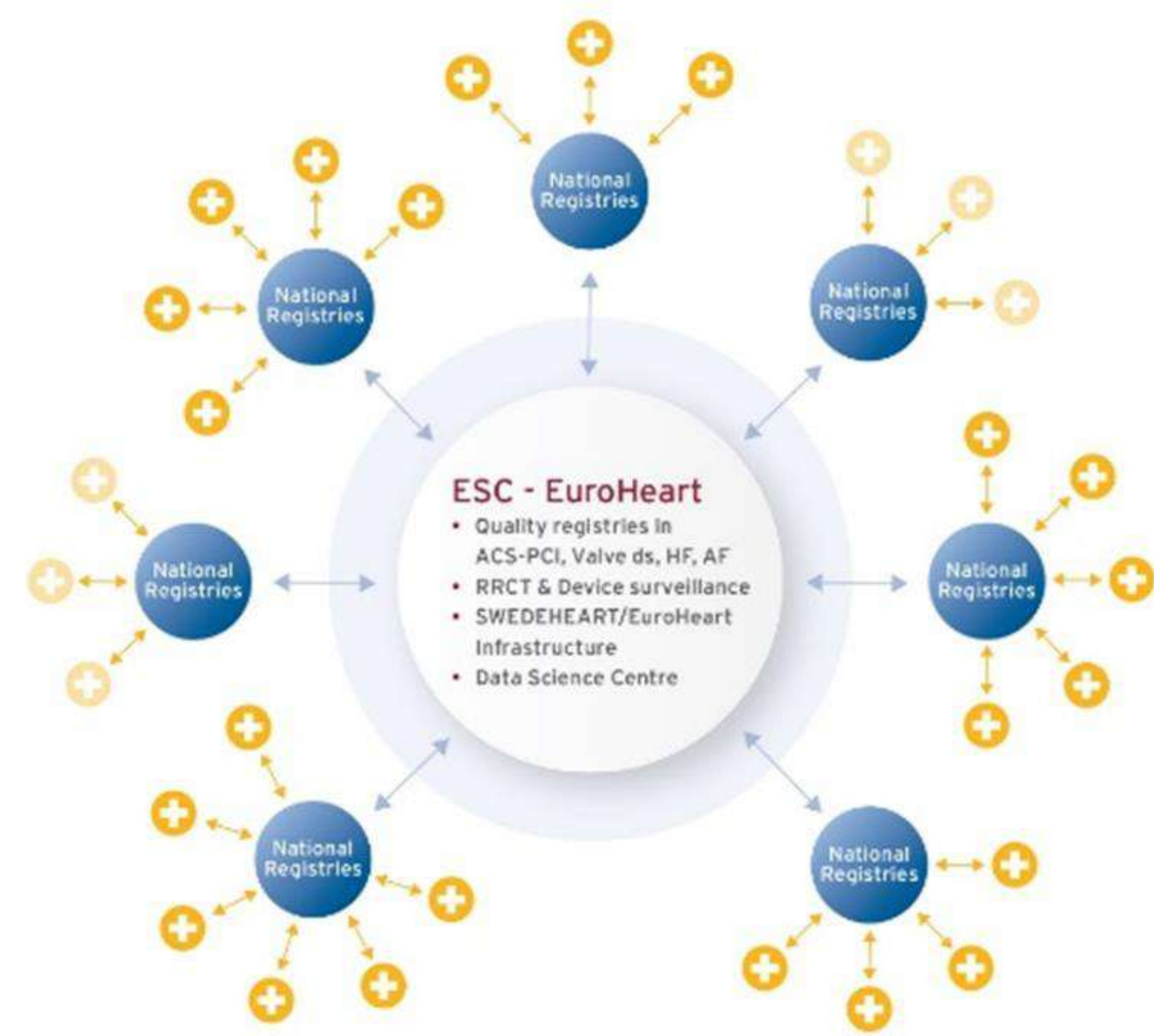
An ESC project to develop a new IT registry system which will encompass multiple features of cardiovascular medicine



EuroHeart: da dove siamo partiti

SWEDHEART ACS/PCI

- Svezia: 58 ospedali
- Raccolta continua di dati
- Reportistica online sui livelli di aderenza ad indicatori di qualità predefiniti
- Endorsement delle Autorità Sanitarie locali
- Pubblicazione annuale (laica) sulla qualità della assistenza nei diversi ospedali secondo gli indicatori di qualità considerati
- Utilizzazione del registro per la conduzione di registry-based randomized trials



EuroHeart: Project

- Develop **national programmes** that use **common data sets** and quality criteria

- Support **improved quality of care** based on individual patient data

- Implement **drug and device surveillance**

- Implement **randomised controlled registries**

- Provides an **optional common IT infrastructure**

- Cover **common disease** areas ACS-PCI, heart failure, atrial fibrillation and valve disease

- Develop **standardised data sets and quality indicators** for diseases and devices

- Develop a **data science centre** centrally localised with optional remote data access

- Include **representatives of interested countries** in its development and subcommittees

EuroHeart: gli obiettivi iniziali

1. Creare una piattaforma web per l'inserimento di dati che consentano una valutazione online degli indicatori di qualità
2. Creare un network di paesi partecipanti all'iniziativa
3. Definire le variabili da raccogliere e gli indicatori di qualità nelle patologie cardiovascolari più rilevanti

EuroHeart Registry IT platform



- Internet-based direct entry of standardised data
- Intuitive – no manual needed
- Interactive - on-line definitions
- Logical data checks and data directly clean
- On-line graphical statistics on quality indicators

Registration
EuroHeart ACS-PCI Ward 1
Registrations Results
Personal ID no. [Search]
Save Sign

Eura Europe
5404131234 Female 67 years
Demographics Admission In-hospital ... PCI Discharge

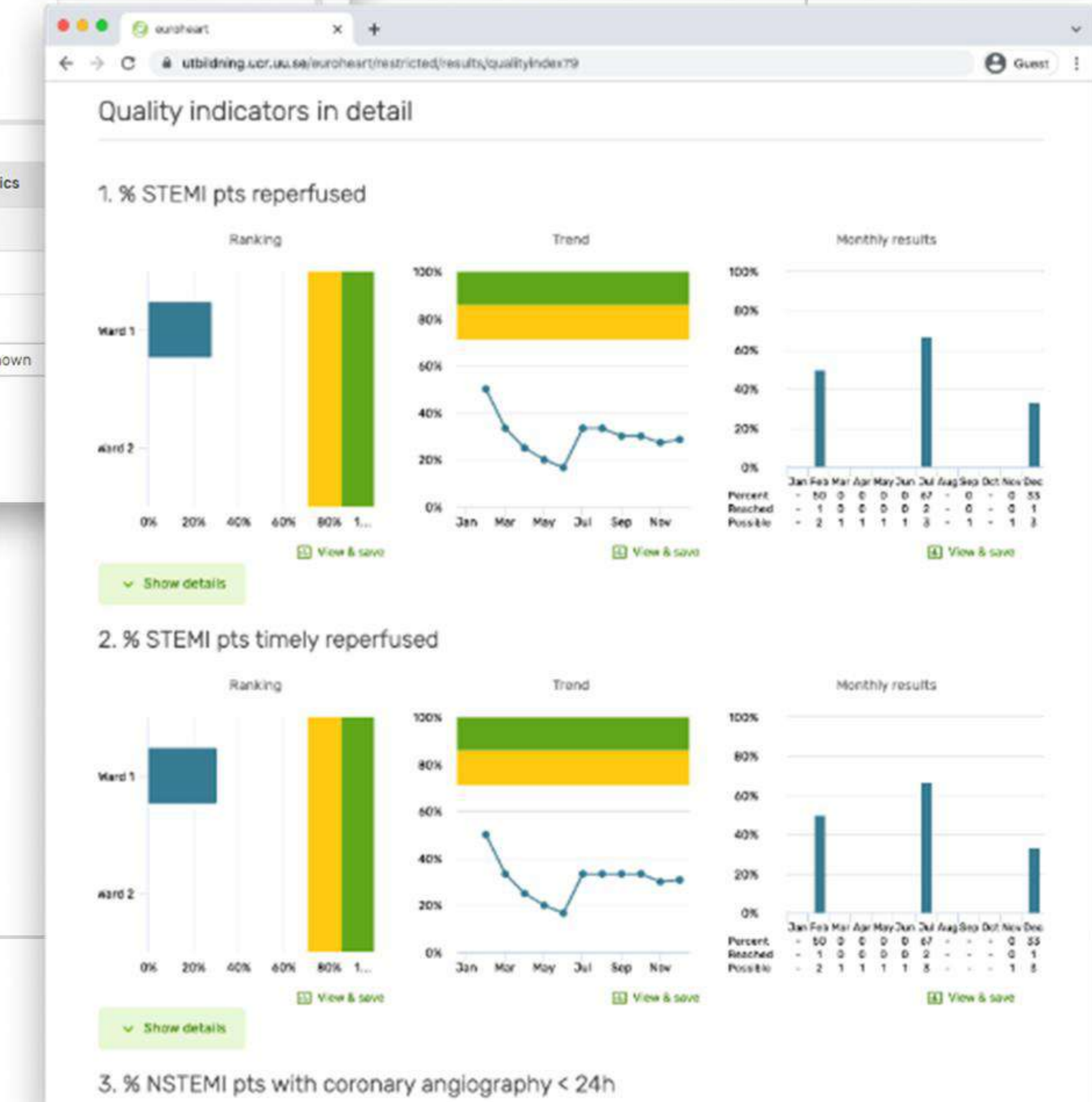
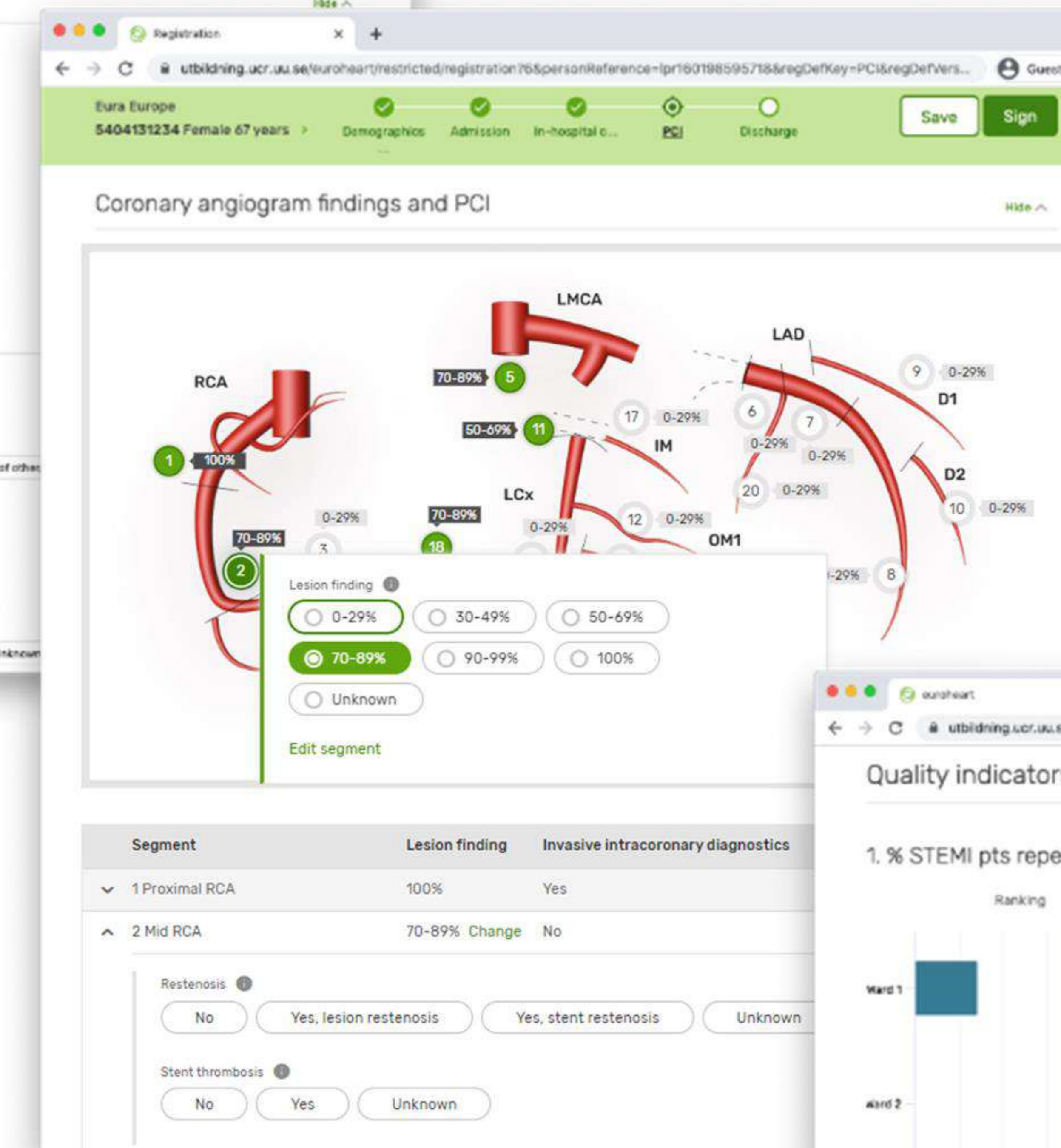
Demographics and Comorbidities

Demographics

Postal code * 75214
Height [cm] * 168 Unknown
Weight [kg] * 72 Unknown
Smoking * Former smoker Current smoker Unknown

Comorbidities

Hypertension * No Yes Unknown
Diabetes mellitus * No Diabetes mellitus type 1 Diabetes mellitus type 2 Diabetes mellitus of other
Chronic obstructive pulmonary disease * No Yes Unknown
Moderate or severe chronic kidney disease * No Yes Unknown
Prior stroke * No Ischaemic stroke Haemorrhagic stroke Unspecified stroke Unknown



Il Network a fine 2025

(15 paesi: 14 europei più
Singapore)



Created with MapChart

EuroHeart – Data standards

- **4 common CVD domains data standards** developed in collaboration with ESC Associations, National Cardiac Societies and other relevant stakeholders
 1. **ACS-PCI** (EHJ 2022)
 2. **Heart failure – CRT, ICD** (EHJ 2022)
 3. **Atrial fibrillation – Ablation** (EHJ-QCCO 2022)
 4. **Valve disease – TAVI** (EHJ-QCCO 2022)In addition
 - **Cardiovascular outcomes**
 - **PROMs**



Stato di avanzamento nei diversi ambiti clinici

- ACS/PCI

- Ongoing dal 2022

- TAVI

- Start 2026, first report 2027

- Heart Failure

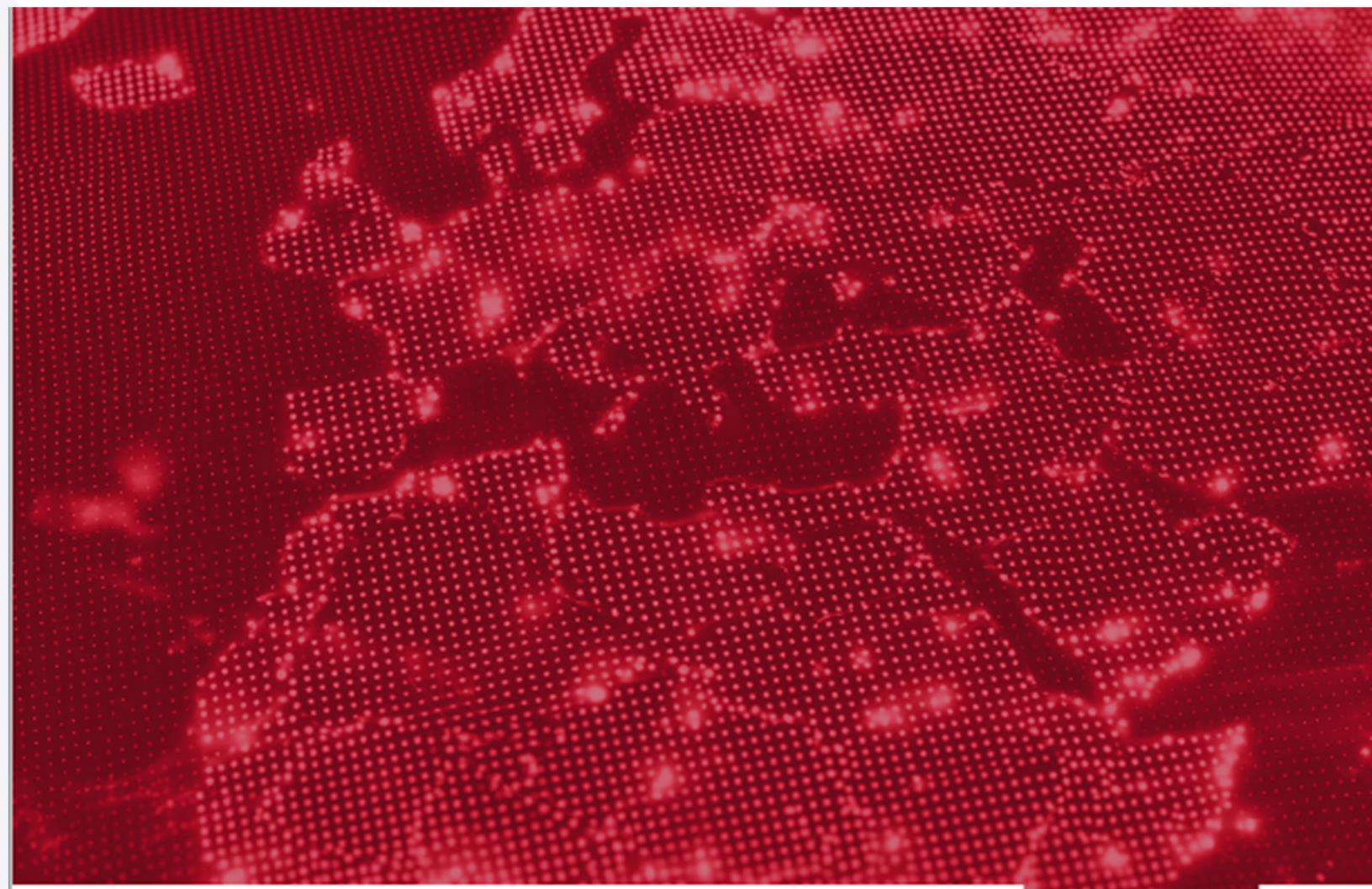
- Probably start 2026, first report to be defined

- Atrial fibrillation

- To be defined

La produzione di dati (ACS)

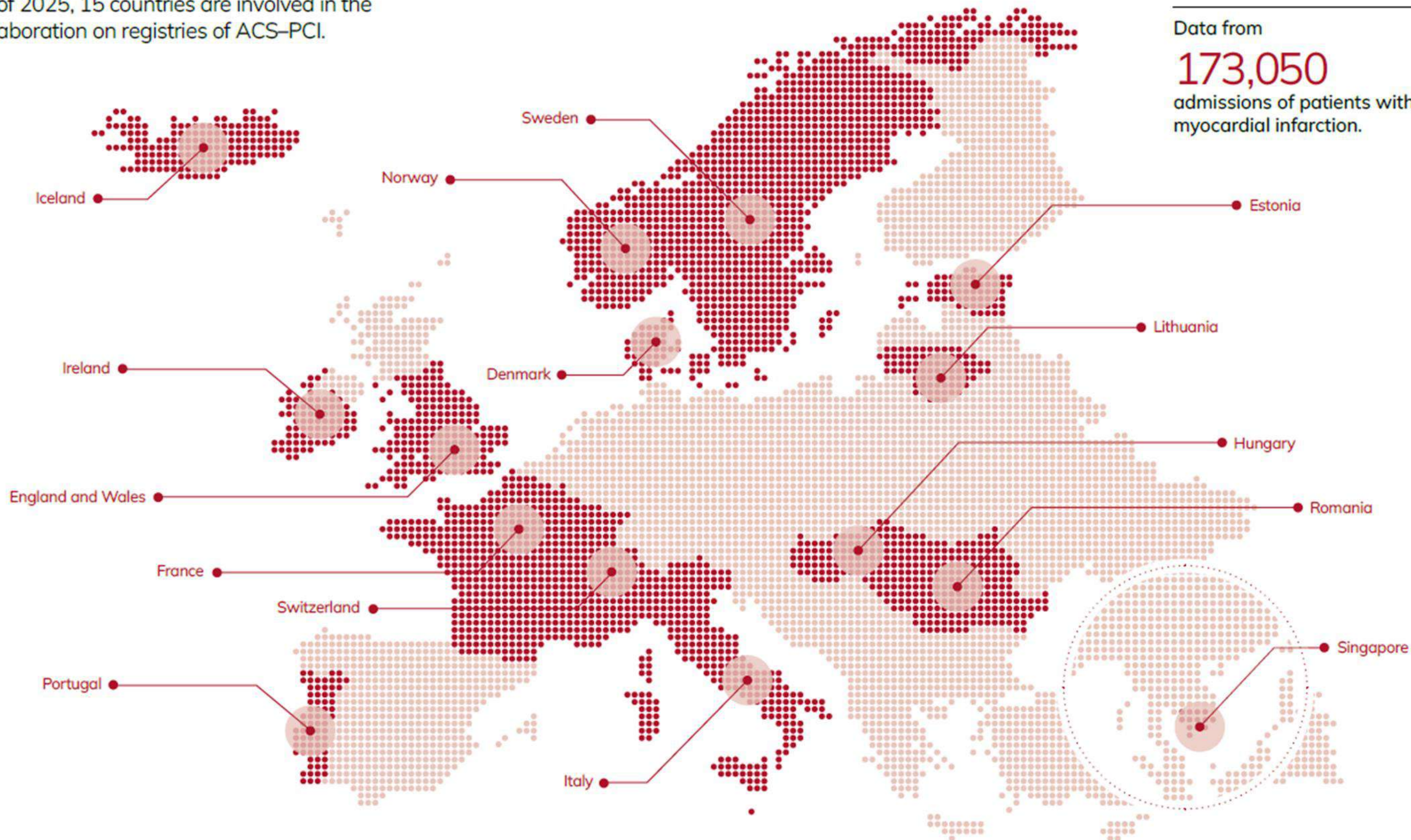
Year	Countries	STEMI	NSTEMI	All MI
2022	6	38,594	67,528	106,122
2023	7	44,601	73,329	117,930
2024	13	63,763	109,287	173,050
2022 – 24		146,958	250,144	397,102



ESC EUROHEART REPORT 2025

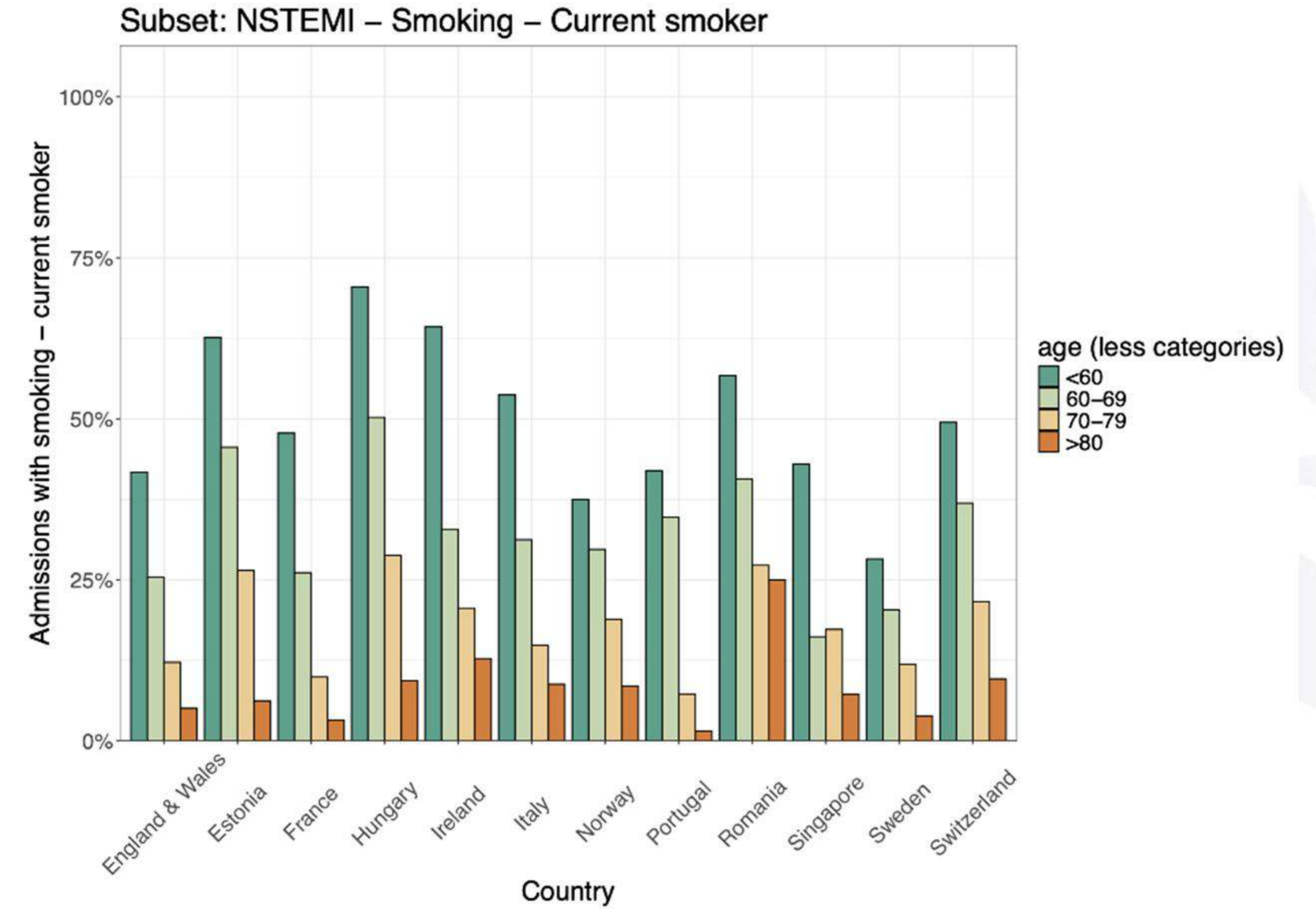
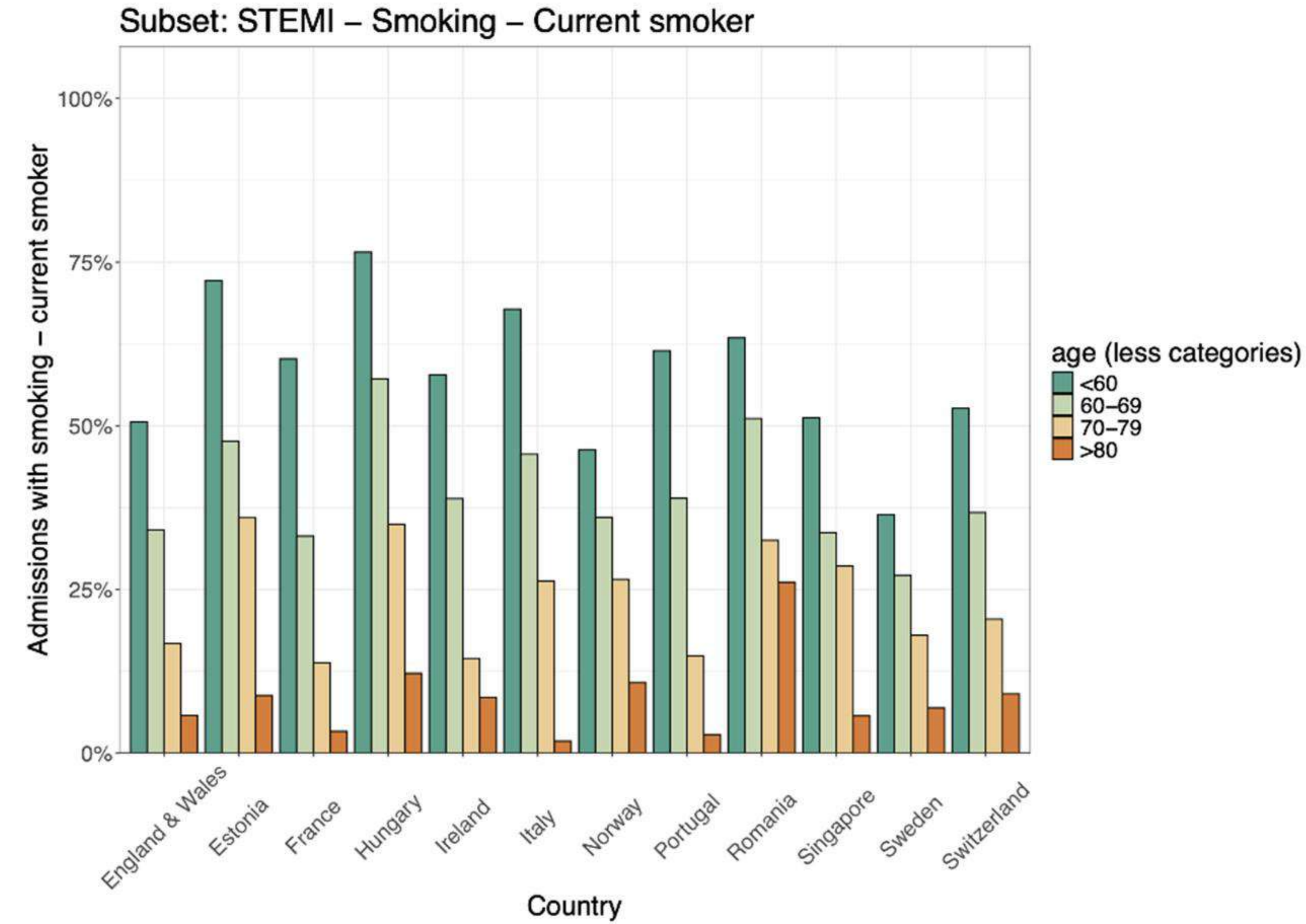


EuroHeart is a collaboration between national quality registries in cardiovascular care across Europe, coordinated and supported by the ESC.
As of 2025, 15 countries are involved in the collaboration on registries of ACS-PCI.

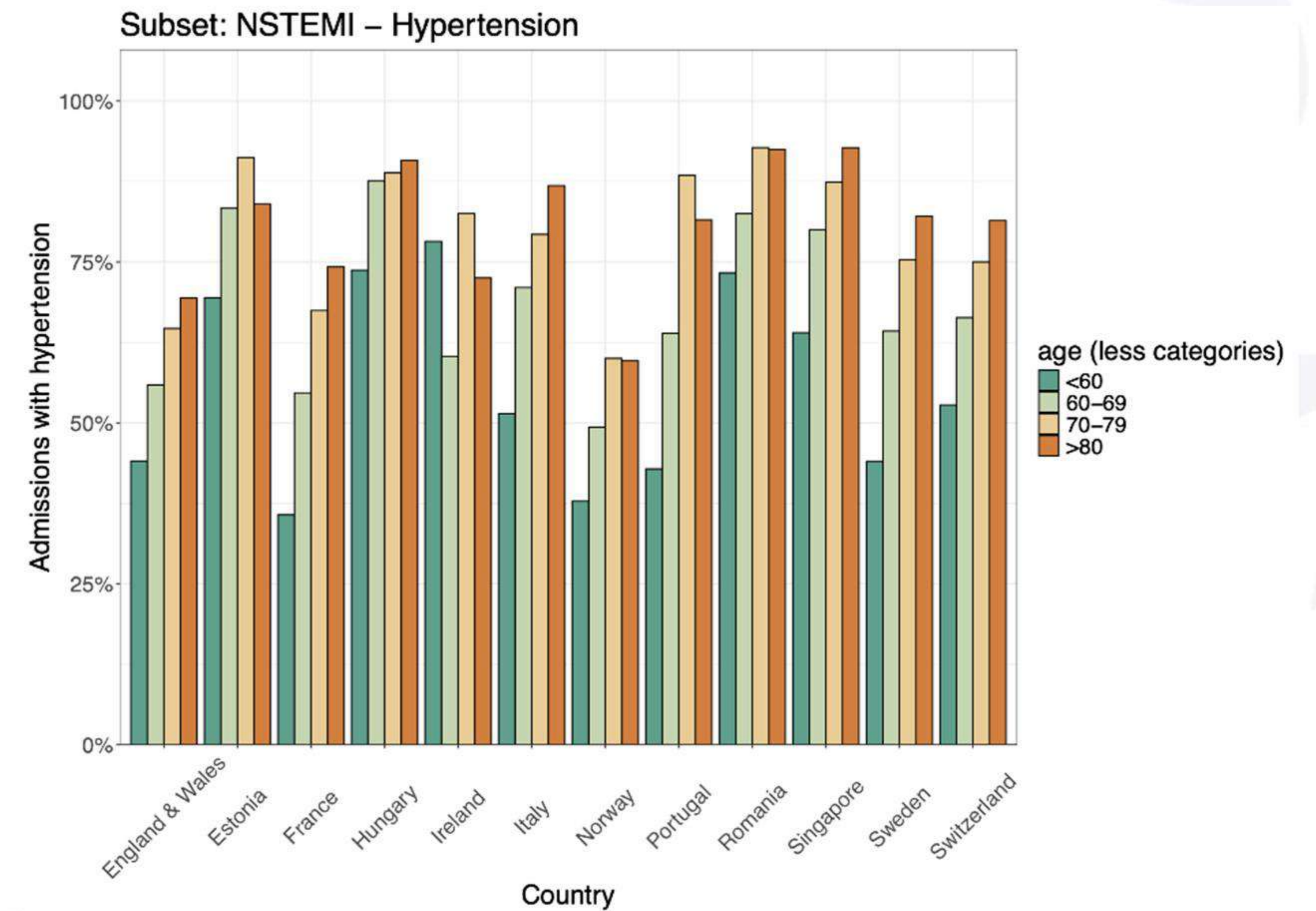
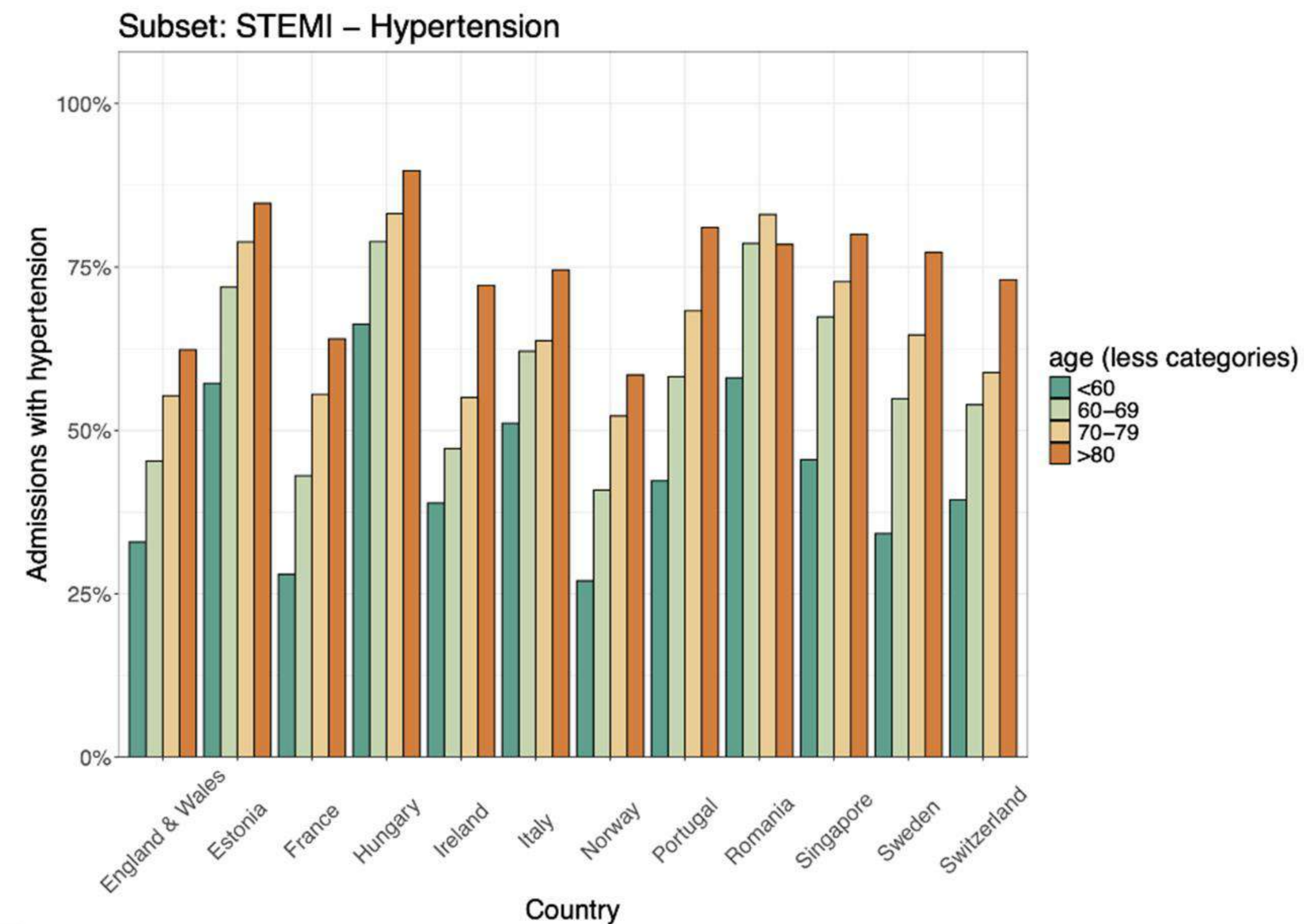


Current smoking and Hypertension *(stratified by age)*

Current smoking



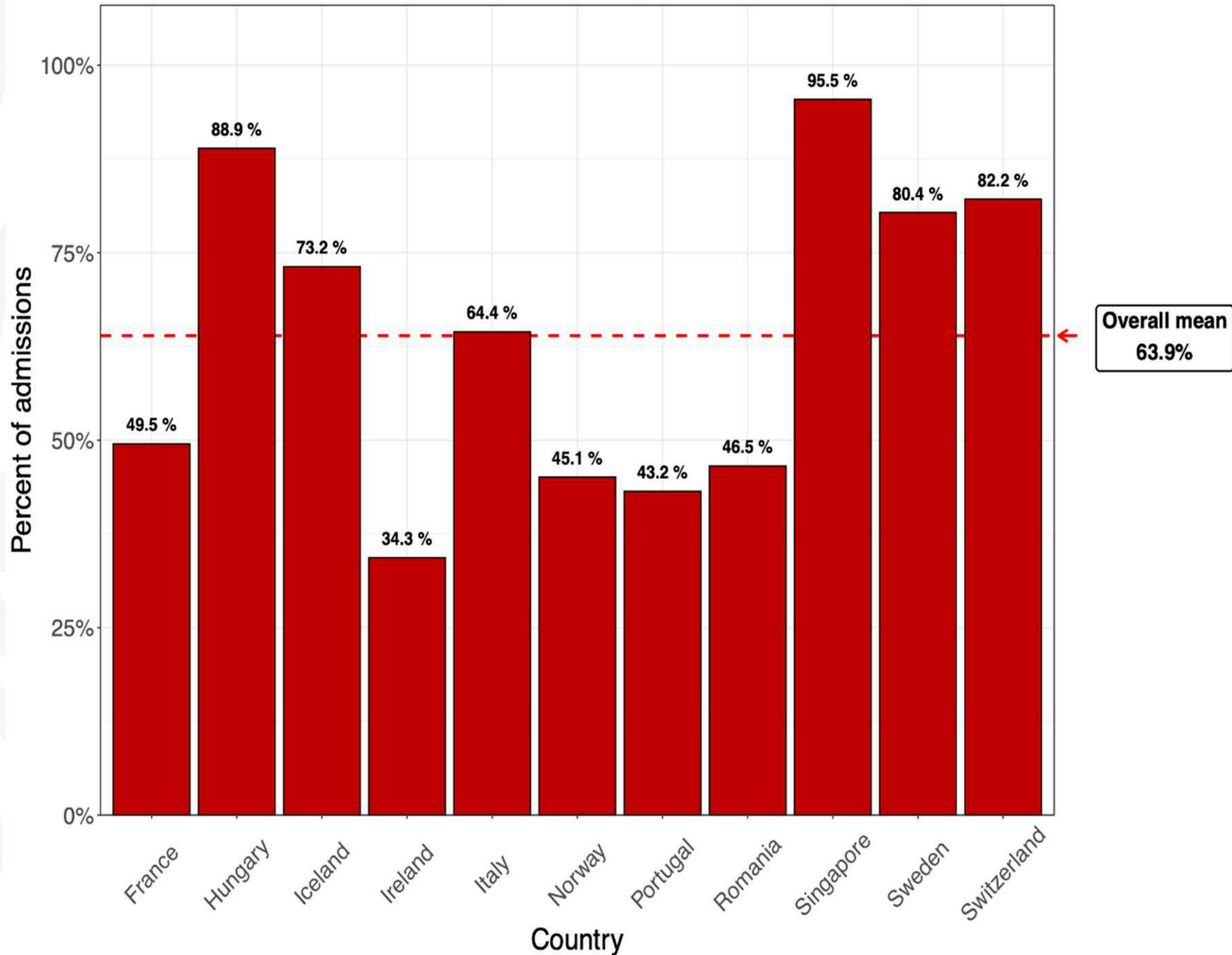
Hypertension



STEMI

Reperfusion <90 min

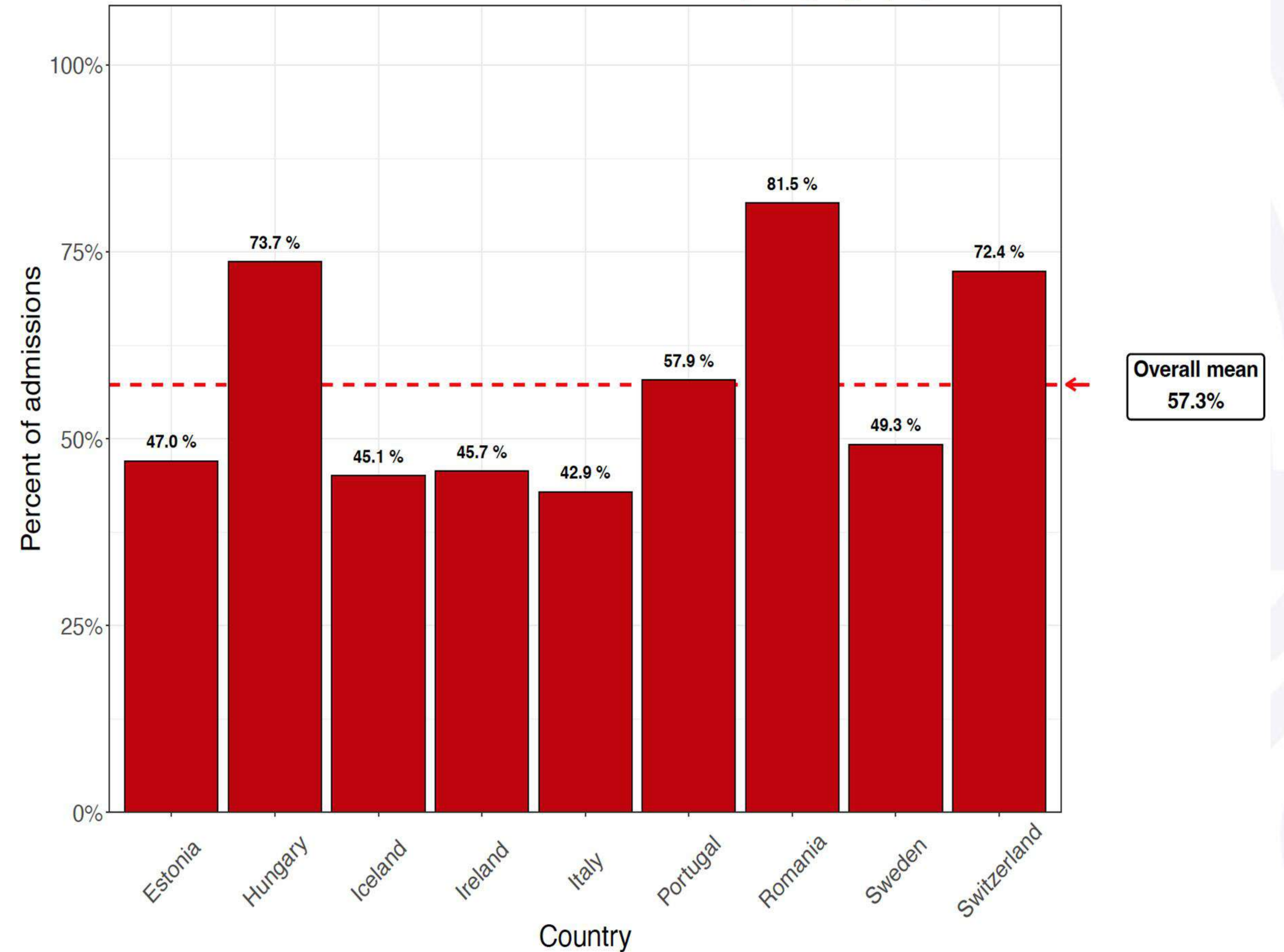
Subset: STEMI – Q1 7: Patients with reperfusion <90 minutes



NSTEMI

Coronary angiography <24 hours

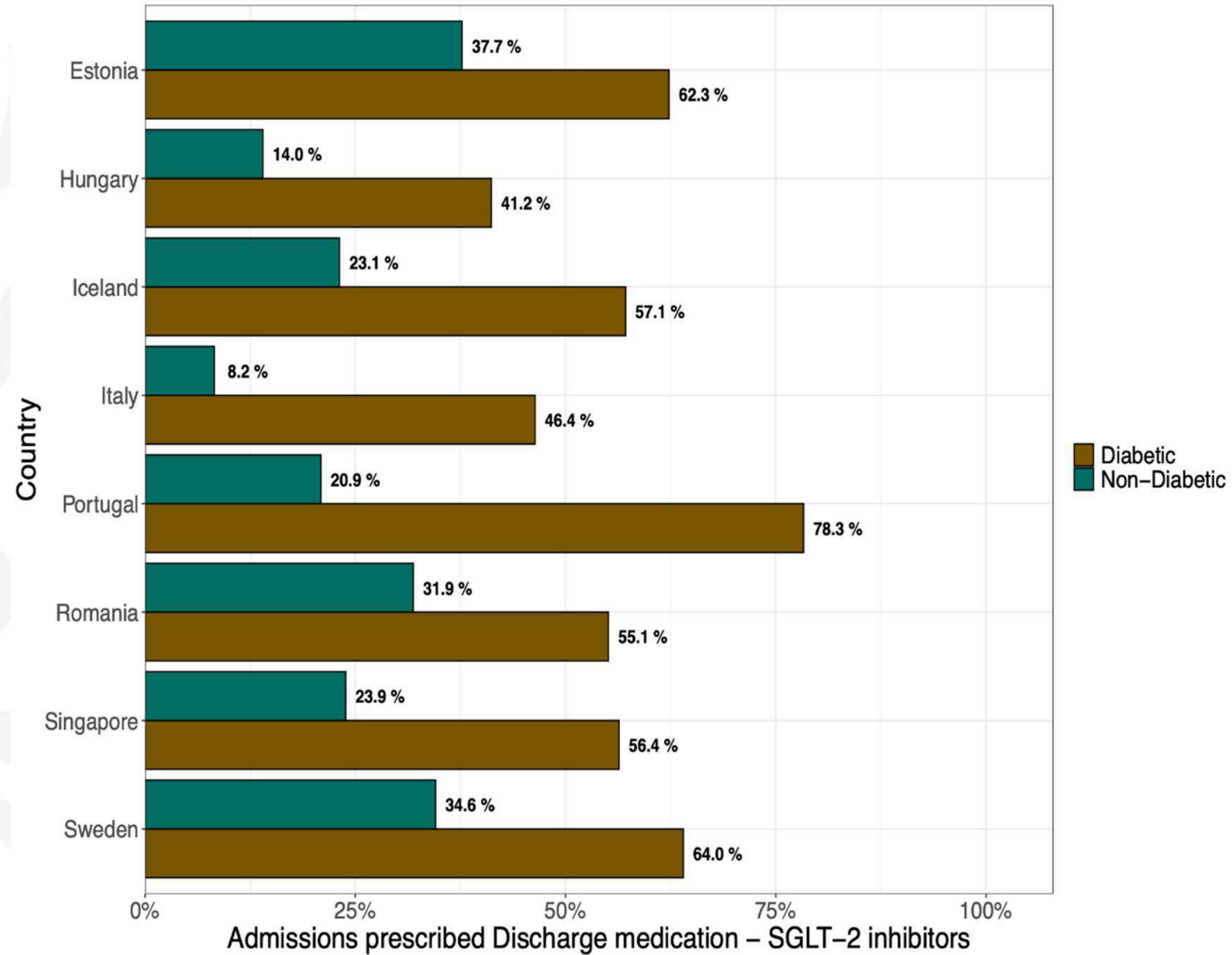
Subset: NSTEMI – Q1 8: Patients with coronary angiography <24 hours



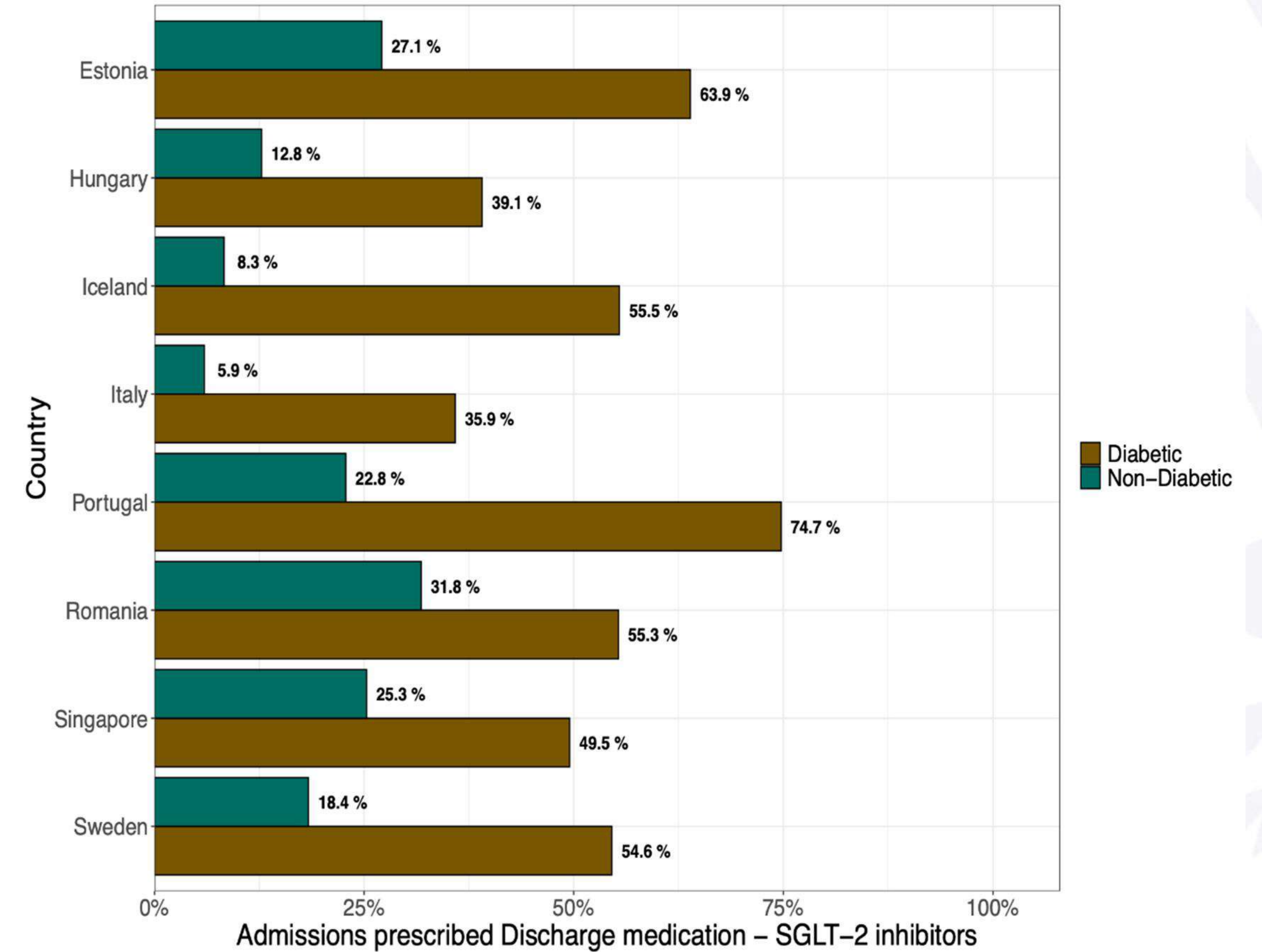
EuroHeart Annual Report 2025 with data from 2024 from 13 countries on patients with STEMI (n=63,763) and NSTEMI (n=109,287)
 (Overall mean is mean of the country means)

SGLT2 inhibitors in patients with and without diabetes

Subset: STEMI – Discharge medication – SGLT-2 inhibitors

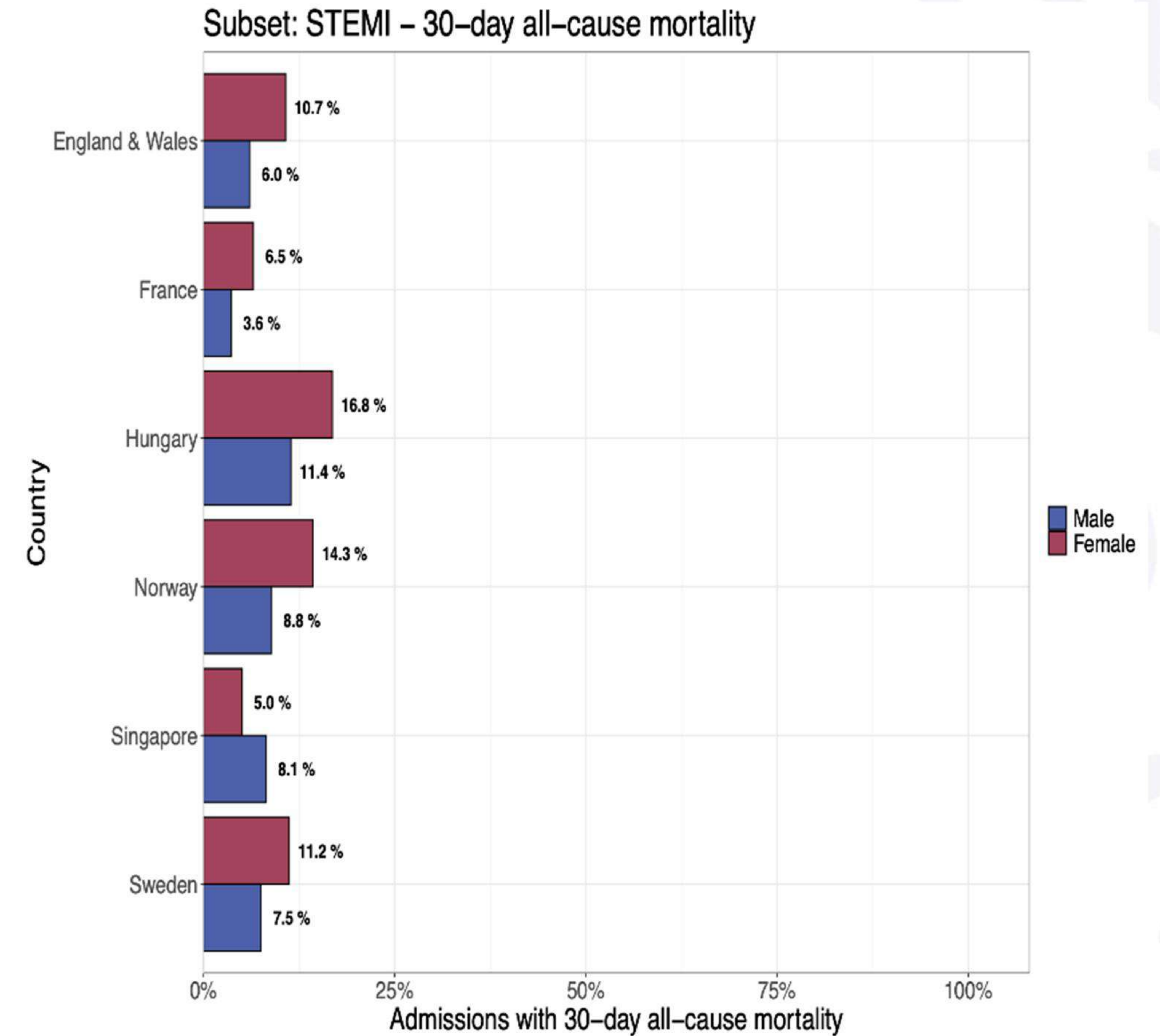
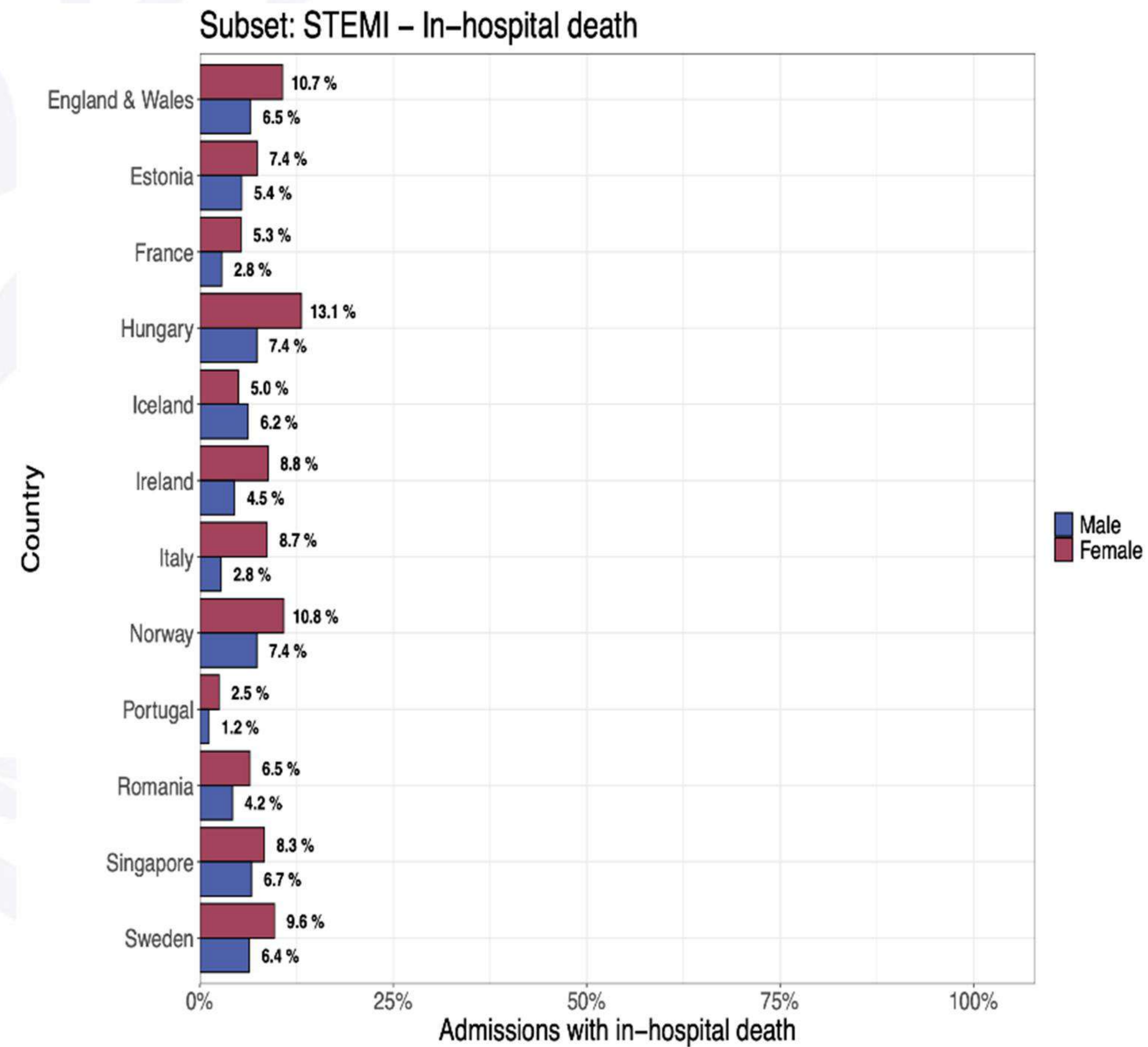


Subset: NSTEMI – Discharge medication – SGLT-2 inhibitors



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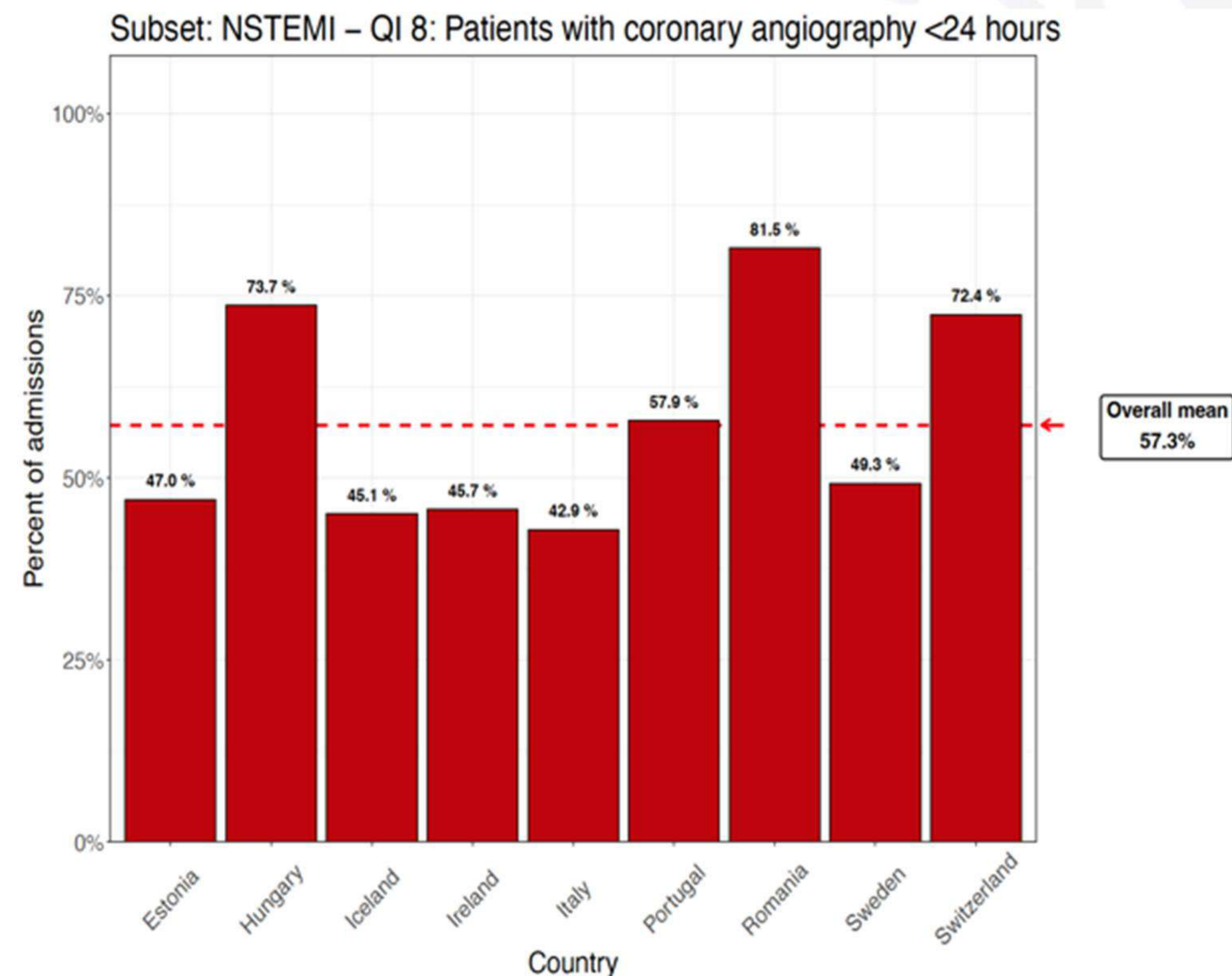
In-hospital and 30-day mortality in STEMI (stratified by sex)



EuroHeart Annual Report 2025 with data from 2024 from 13 countries on patients with STEMI (n=63,763) and NSTEMI (n=109,287)

And what about the possibility to plan a registry-based RCT?

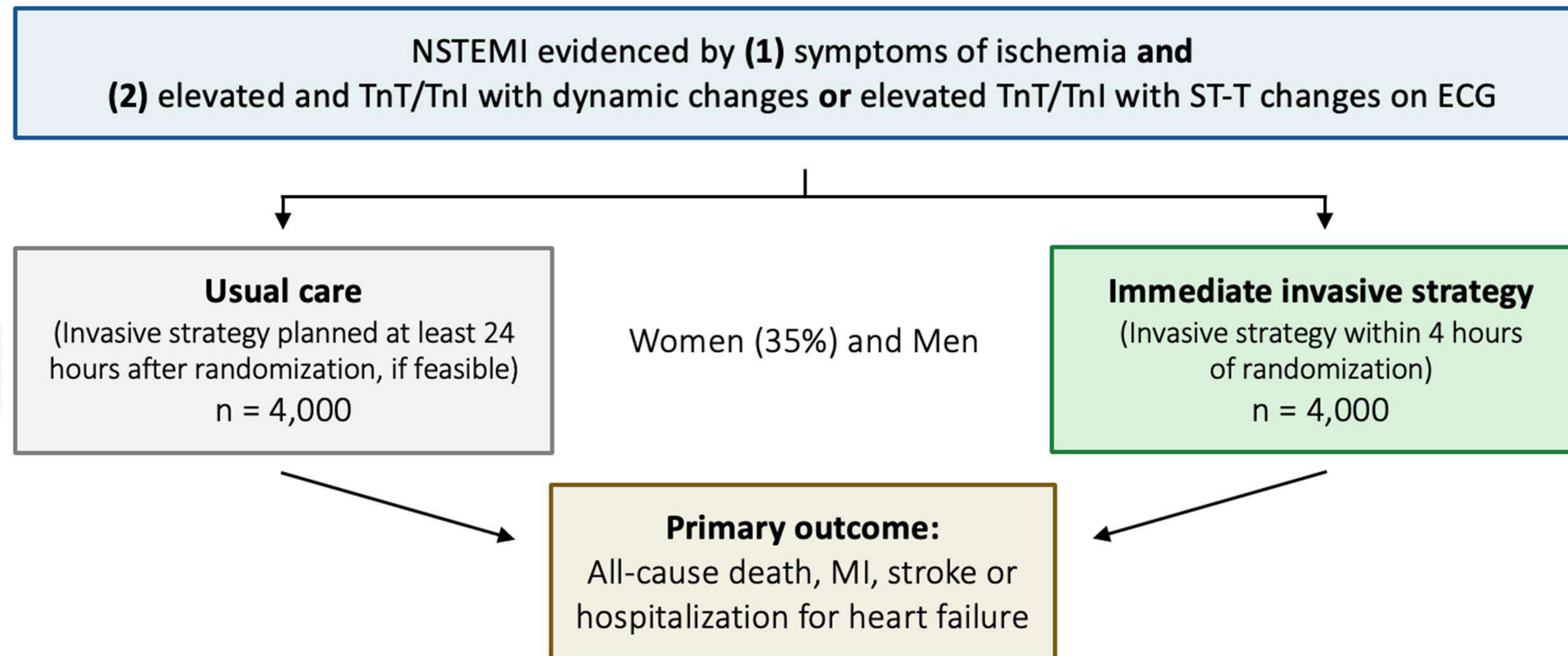
NSTEMI Coronary angiography <24 hours



Absence of convincing evidence from trials.

Consequently, the recommendations of the guidelines fluctuate over time.

FAST-NSTEMI – Study design



Inclusion criteria: **(1)** Age ≥ 18 year; **(2)** Consent; **(3)** Ongoing chest pain or a history of chest pain within the last 24 hours, along with signs of NSTEMI as evidenced by: **(A)** elevated troponin T/I with dynamic changes or **(B)** elevated troponin T/I and ECG with ischemic ST-T changes; **(4)** Intention to perform coronary angiography aiming for revascularization.

Exclusion criteria: **(1)** STEMI; **(2)** Need for urgent PCI (hemodynamic instability, recurrent/refractory chest pain, cardiogenic shock); **(3)** Known severe valvular heart disease; **(4)** Contraindication to PCI; **(5)** Evident type 2 MI; **(6)** Inability to provide informed consent; **(7)** Treatment or condition which, according to the investigator, can affect study results.