



PRESS RELEASE

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Canadian Journal of Cardiology Reports on Impact of Poverty and Social Class on Myocardial Infarction Outcomes

Socioeconomically deprived patients 16% more likely to die of heart attack

Philadelphia, PA, March 6, 2012 – The *Canadian Journal of Cardiology* (www.onlinecjc.ca) has published a paper on the effect of socioeconomic factors on myocardial infarction outcomes.

This study describes an analysis of the effect of socioeconomic class on outcomes after a first myocardial infarction (“heart attack”). The study analyzed detailed databases in Quebec and found that socioeconomic deprivation did not negatively affect access to the most advanced high-level health care – clearly a success for the Canadian public healthcare system. Nevertheless, mortality rates were slightly but significantly higher in the lowest socioeconomic groups. These results show that providing equal and high-level access to health care is possible in a public system, but that is not enough to prevent negative health consequences of socioeconomic deprivation.

In an accompanying editorial, Dr. Blair O’Neill, President of the Canadian Cardiovascular Society, observes that, “governments must realize the importance of addressing social determinants of health to achieve the full benefits in investments in improving access to an advanced healthcare system.” He concludes that in Canada, funding and implementing the federally commissioned Canadian Heart Health Strategy and Action Plan, as well as working on antipoverty strategies, would be a good start.

“This study shows that the Canadian system provides equal access to high-quality emergency services to the broad population. However, this is not enough to guarantee equal outcomes and ultimately more investment in carefully considered programs will be needed,” comments Stanley Nattel, MD, Editor-in-Chief of the *Canadian Journal of Cardiology*.

The paper is “[Impact of Socioeconomic Deprivation and Area of Residence on Access to Coronary Revascularization and Mortality After a First Acute Myocardial Infarction in Québec](#),” by Claudia Blais, PhD, Denis Hamel, MSc, Stéphane Rinfret, MD, SM (DOI: 10.1016/j.cjca.2011.10.009). The editorial is “[Timely Access to Acute Cardiac Care: Can It Overcome a Lifetime of Despair?](#)” by Blair J. O’Neill, MD (DOI: 10.1016/j.cjca.2011.11.004). They appear in *Canadian Journal of Cardiology*, Volume 28, Issue 3 (March 2012), published by Elsevier.

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About the *Canadian Journal of Cardiology*

The *Canadian Journal of Cardiology* (www.onlinecjc.ca) is the official journal of the [Canadian Cardiovascular Society](#). It is a vehicle for the international dissemination of new knowledge in cardiology and cardiovascular science, particularly serving as a major venue for the results of Canadian cardiovascular research and Society guidelines. The journal publishes original reports of clinical and basic research relevant to cardiovascular medicine as well as editorials, review articles, case reports, and papers on health outcomes, policy research, ethics, medical history, and political issues affecting practice.

About the Editor-in-Chief

Editor-in-Chief Stanley Nattel, MD, is Paul-David Chair in Cardiovascular Electrophysiology and Professor of Medicine at the University of Montreal and Director of the Electrophysiology Research Program at the Montreal Heart Institute Research Center.

About the Canadian Cardiovascular Society

The Canadian Cardiovascular Society is the professional association for Canadian cardiovascular physicians and scientists working to promote cardiovascular health and care through knowledge translation, professional development, and leadership in health policy. The CCS provides programs and services to its 1900+ members and others in the cardiovascular community, including guidelines for cardiovascular care, the annual Canadian Cardiovascular Congress, and, with the Canadian Cardiovascular Academy, programs for trainees. More information about the CCS and its activities can be found at www.ccs.ca.

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