Higher mortality among ACS patients in Finland than in Norway: Do differences in acute preparedness and scale effects explain the variation?

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Abstract:

Mortality differences following hospital treatment in Finland and Norway are similar for major diseases with Acute Coronary Syndrome (ACS) as an important exception. For ACS, mortality in Finland is significantly higher than in Norway.

The goal is to study whether the differences in the organization of the Percutaneous Coronary Intervention (PCI) facilities (a decentralized structure in Finland vs. a major centralized structure in Norway) add to the explanations of country differences in 30 and 365 day all-cause mortality for patients hospitalized with ACS.

Data for patients discharged with ACS (acute myocardial infarction or unstable angina pectoris) from the hospital discharge registers in 2009-2014 was linked with socio-demographic variables, variables describing distances to hospitals and causes of death registers in Norway and Finland. The variables of main interest, emergency preparedness of PCI and the volume of ACS patients at hospital level were included as independent variables in logistic regression analyses. Further work will include multilevel logistic models.