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\Diamond Spotlight on Special Topics

ROLE OF TELEMEDICINE NETWORK PROVIDED BY PHARMACIES TO DETECT ACUTE MYOCARDIAL INFARCTION IN PATIENTS WITH CHEST PAIN DURING CORONAVIRUS PANDEMIA

Poster Contributions Sunday, May 16, 2021, 2:45 p.m.-3:30 p.m.

Session Title: Spotlight on Special Topics: Innovation, Digital Health, and Technology 6 Abstract Category: 60. Spotlight on Special Topics: Innovation, Digital Health, and Technology

Authors: <u>Savina Nodari</u>, Francesco Fioretti, Mariangela Piazzani, Andrea Dell'Aquila, Giuliana Cimino, Antonino Milidoni, Angelica Cersosimo, Alberto Madureri, Laura Lupi, Gianbattista Bollani, Fulvio Glisenti, Gian Franco Gensini, Francesco Gabbrielli, Cardiology Division, Spedali Civili Hospital and University of Brescia, Brescia, Italy, National Institute of Health, Rome, Italy

Background: During Italy lockdown period (March 11th to May 4th 2020), the COVID-19 outbreak led to an increasing involvement of hospital, shifting healthcare resources towards the management of COVID+ patient, and to a progressive decrease in hospital admissions due to conditions not associated with SARS-CoV2 infection, in particular, those for acute myocardial infarction. In this scenario, we aimed to verify the role of telemedicine in comparison with the same period in 2019.

Methods: We analyzed 12-lead ECGs recorded by 5000 pharmacies, evaluated and stored in one telemedicine platform provided by Health Telematic Network (HTN), in cooperation with our Cardiology Department, Federfarma (Pharmacists' National Association), and Italian National Health Institute.

Results: In the lockdown period, 6,104 ECGs were recorded in territorial pharmacies, compared to 17,280 ECGs in the same period of 2019. Chest pain symptom represented the cause of recording ECG in 298 patients (4.88%) during the lockdown period, versus 402 patients (2.33%) in the same period of 2019 (increase: 109.86%). In the Lombardy Region, during lockdown period, were reported 118 accesses to territorial pharmacies for chest pain (about 39.50% of total cases in Italy), 36 of those in the Brescia province (about 30.50%) and 28 in the Bergamo province (about 23.73%). 8 ECGs showed typical abnormalities of acute myocardial infarction with ST elevation (STEMI, 2.68%) in the lockdown period, compared to 7 STEMIs (1.74%) detected in the same period of 2019, (increase of 54.17%). Those patients were referred to Emergency Department (ED) for the therapeutic intervention.

Conclusion: A large number of patients with cardiovascular symptoms preferred to go to territorial pharmacies rather than hospitals during the COVID outbreak period. Telemedicine allowed patients with STEMI to access to the hospitals faster, avoiding the risks of a serious diagnostic delay. Furthermore, by analyzing the data of Lombardy Region, it was possible to show how a significant component of access to local pharmacies for chest pain occurred in the region most affected by the COVID-19 outbreak.