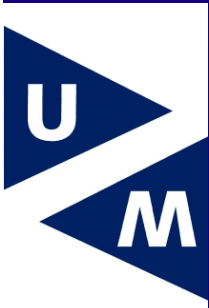


Lessons from the stroke project

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Content

- OECD study stroke
- Bottle-necks for the Dutch group
- Transferability factors
- Future...

OECD study stroke

- Comparison 17 countries!
- Ischaemic stroke; whole continuum of care
- Key issues: broad based policy & specialized organization of stroke care (stroke units)
- Substantial variation in risk factors (smoking, hypertension), hospitalization (TIA), organization of care (stroke units), treatment (surgery carotid endarterectomy, antihypertensive drugs)

Dutch bottle-necks

- “One has the impression that one half of the Dutch are occupied in recording what the other half is doing”
- Some data are lacking
- Fitting available data to OECD-framework
- Registrations are privatized (very costly) or under embargo (to be published)

Transferability factors

- Population characteristics (European standard population)
- Usual care characteristics (definition of clinical practice, conventions, e.g. stroke units and services)
- Health care system characteristics (incentives, regulations health care providers)
- Economic characteristics (% health care expenditures and components of stroke care)
- Above (and other) factors may differ in relevance and the need for transferability

Future...

- Longitudinal data and detailed information are needed (continuous population-based registration)
- Improvement of information systems and their accessibility
- More insight relationship between factors
- Comorbidity (possibility to link OECD project)
- Standardization of transferability factors