

Acute Coronary Syndrome—Factors Causing Delayed Presentation at the Emergency Department

K K Ho,**MBBS, FRCS*, S W Lee,***MBBS, FRCS*, S B S Ooi,****FAMS, MBBS, FRCS*, F Lateef,*****MBBS, FRCS*,
S H Lim,*****FAMS, MBBS, FRCS*, V Anantharaman,†*FAMS, MBBS, FRCP*

Abstract

Introduction: The aim of the study was to identify factors that contributed to delays in presentation of patients with acute coronary syndrome (ACS) at the Emergency Department (ED). **Materials and Methods:** The study population comprised patients presenting with the signs and symptoms of ACS at the ED of 5 government and restructured hospitals in Singapore from 1 April to 31 May 1999. These patients were interviewed with a structured questionnaire which explored patient demographic data, risk factors, prehospital symptomatology, timing of chest pain, patient response to chest pain and mode of transport to the hospital. **Results:** Three hundred and two patients who made 307 visits were recruited. More than three-quarters of the patients presented with central or left-sided chest pain. Forty-seven per cent had breathlessness and 42% had sweating. The commonest day of presentation was Monday. It took patients a median time of 2.1 hours from their worst chest pain to arrive at the ED. Past history of diabetes mellitus was associated with a longer delay in presentation. Most of the delay was due to patients awaiting symptom resolution. Forty per cent came by emergency ambulances to hospital. **Conclusion:** Our findings identified various patient characteristics that contributed to delay in presentation to hospital which should be addressed in future education campaigns.

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* Associate Consultant

**** Consultant

† Head

Department of Emergency Medicine
Singapore General Hospital

** Registrar

Department of Accident & Emergency
Changi General Hospital

*** Consultant

Department of Emergency Medicine
National University Hospital

Address for Reprints: Dr Ho Khoy Kheng, Department of Emergency Medicine, Singapore General Hospital, Outram Road, Singapore 169608.