



Abstract

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PI Title: ASSISTANT PROFESSOR

Project Title: RECOGNITION OF A MYOCARDIAL INFARCTION--REDUCING DELAY

Abstract: *DESCRIPTION (Adapted from the Investigator's Abstract): The long term goal of this research program is to develop theoretical explanations for delay behavior and to test the effectiveness of an education intervention to facilitate recognition of acute myocardial infarction (AMI). The purpose of the proposed investigation is two-fold: The first part of the study will examine cognitive and social environmental variables that affect patients' symptom interpretation and their delay in seeking early treatment for acute myocardial infarction (AMI). A major aim of the study is to identify variables that are significant or influential in a culturally diverse female and male population. The second phase of the study is designed to examine how an educational intervention will impact recognition of early AMI symptoms in a sample of individuals at risk for AMI. The specific aims are to: 1) examine relationships between socio-demographic characteristics (gender, age, race), clinical history (cardiac history, comorbidities), contextual variables (environmental, bystander influence), representation of AMI (symptom expectations and match with actual symptom pattern, risk perception), access to health care (insurance, income, usual source of care), and time of delay during AMI in a culturally diverse, male and female population; and 2) test the effectiveness of an educational intervention in facilitating accurate representation of AMI symptoms and risks in a culturally diverse male and female population who are at risk for AMI. The sample in Phase I will include 125 women and 125 men who have been hospitalized after their first AMI. At least one-third of the sample will be African-Americans. Subjects will be interviewed 1 day post AMI using a structured interview to gather data about the symptoms experienced during AMI, sequence and timing of events during AMI, expectations about symptoms and risk,*

discrepancy between expectations and experience, health care access, clinical history, and the influence of bystanders. Bystanders will be interviewed to verify sequence of events, to identify the bystanders' expectations about the AMI experience, and examine their role in the experience. Demographic data, including age and education level, will be collected from all patients. Medical records will be reviewed to gather data about the patients' medical history and hospital course. The sample in Phase II will include 75 men and 75 women who have at least one of the major risk factors for coronary artery disease. A minimum of one-third of the recruited sample will be African-Americans. A prospective randomized block design will be used with the blocking variables of gender and ethnicity. Subjects will be randomly assigned to the experimental or control group and will receive the experimental message or a general health information message. Subjects expectations about AMI symptoms and risk patterns will be measured immediately before and after receiving the message and one month later.

Thesaurus Terms:

cardiovascular disorder diagnosis, cardiovascular disorder education, early diagnosis, emergency care, health care service utilization, myocardial infarction, nursing intervention

education evaluation /planning, gender difference, nursing education, racial /ethnic difference, sign /symptom

African American, audiotape, behavioral /social science research tag, caucasian American, clinical research, human subject, interview

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