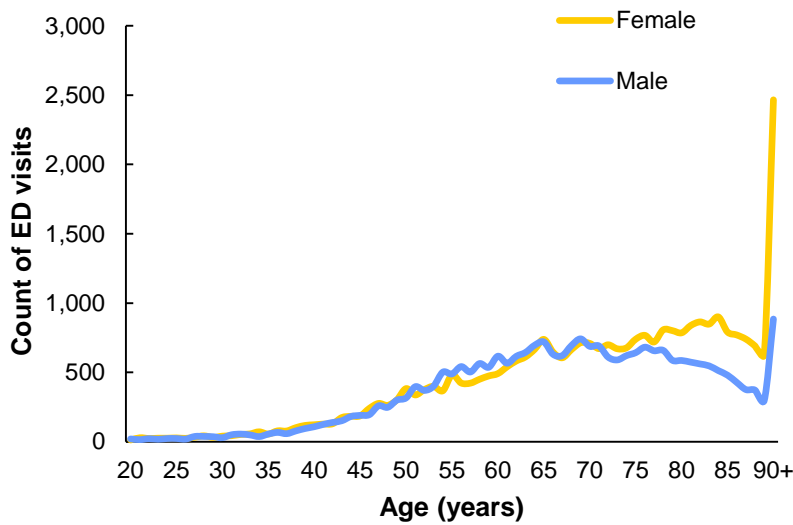


## NORTH CAROLINA EMERGENCY DEPARTMENT VISITS WITH A DIAGNOSIS OF STROKE/TRANSIENT ISCHEMIC ATTACK (TIA), 2012

The North Carolina Disease Event Tracking and Epidemiologic Collection tool (NC DETECT) provides public health officials and hospital users with the capacity for statewide early event detection and timely public health surveillance. Through NC DETECT, users can access near real-time data from North Carolina acute care emergency departments (EDs), the Carolinas Poison Center (CPC), and the Pre-Hospital Medical Information System (PreMIS). NC DETECT data from ED visits have become increasingly important for the surveillance of injury and chronic disease morbidity in North Carolina. NC DETECT is funded by the NC Division of Public Health (NC DPH). This document summarizes 2012 ED visits with an ICD-9-CM diagnosis code for stroke/transient ischemic attack (TIA) and related conditions in the range of 430-438 (.xx) in any position.\*

### NC ED visits with a diagnosis of stroke/TIA, 2012<sup>†‡</sup>



- In 2012, there were 57,047 ED visits with a diagnosis code for stroke/TIA. The number of ED visits with a diagnosis of stroke/TIA accounted for 1.2% of the 4.8 million total ED visits for the year.

- The rate of ED visits with a diagnosis of stroke/TIA was 585.2 ED visits per 100,000 person-years in 2012.

- The 2012 rate was slightly lower than the observed 2011 and 2010 rates (588.2 and 594.7 visits per 100,000 person-years, respectively).

- There were more ED visits with a diagnosis of stroke/TIA among women (31,015 visits) than among men (26,020 visits).

Missing: 21 ED visits missing sex and/or age.

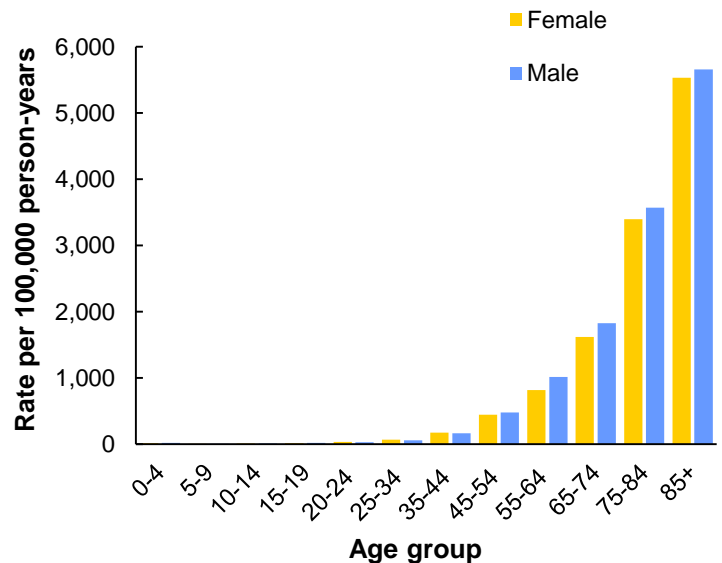
<sup>†</sup>ED visits by patients <20 years of age are not displayed due to counts <10.

<sup>‡</sup>ED visits by patients ≥90 years of age are included in the same category.

### Rates of NC ED visits a diagnosis of a stroke/TIA, 2012

- Although men had higher rates of stroke/TIA for most age groups, the rates of ED visits with a diagnosis of stroke/TIA were higher overall among women (620.5 visits per 100,000 person-years) compared to men (547.8 visits per 100,000 person-years).

- Rates of ED visits with a diagnosis of stroke/TIA were highest for patients 85+ years of age (5,573.1 ED visits/100,000 person-years).



\*For questions about the methods used to generate this fact sheet, please email [ncdetect@listserv.med.unc.edu](mailto:ncdetect@listserv.med.unc.edu).

Missing: 21 ED visits missing sex and/or age.

**NC ED visits with a diagnosis of stroke/TIA by selected characteristics.**

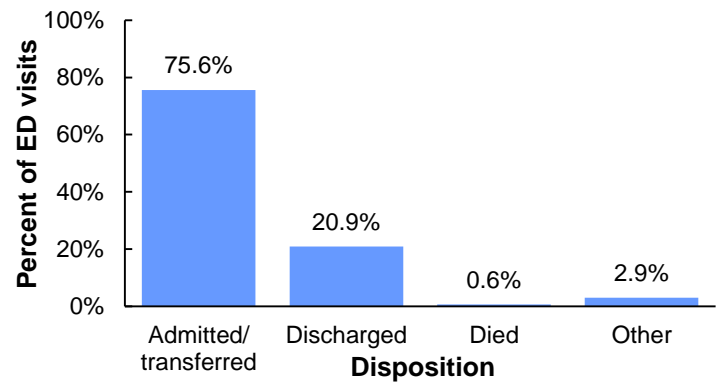
• The most common type of stroke/TIA and related conditions observed in NC EDs was ischemic stroke (37.2%) followed by late effects of cerebrovascular disease (25.2%) and TIA (17.3%).

• Over three-quarters of all NC ED visits with a diagnosis of stroke/TIA were admitted to the hospital or transferred to another hospital. This is much higher than the percent of ED visits with a patient disposition of admission/transfer for all ED visits (15.1%).

**Type of stroke/TIA<sup>§</sup>**

Type	Number	Percent
Ischemic stroke	21,200	37.2%
Late effects of cerebrovascular disease	14,375	25.2%
Transient ischemic attack (TIA)	9,865	17.3%
Other and ill-defined cerebrovascular disease	6,435	11.3%
Hemorrhagic stroke	5,172	9.1%
<b>Total</b>	<b>57,047</b>	<b>--</b>

**Disposition**



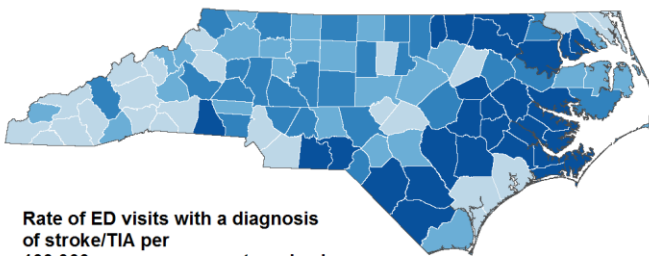
**Prevention Strategies**

- Stroke and TIAs are medical emergencies; call 9-1-1 immediately if you think you or someone else may be having a stroke. To learn more about the symptoms of stroke visit: [www.startwithyourheart.com](http://www.startwithyourheart.com) <<http://www.startwithyourheart.com>>
- Healthy lifestyle practices can reduce the risk of stroke. To learn more visit: [www.communityclinicalconnections.com/Data/index.html](http://www.communityclinicalconnections.com/Data/index.html).
- For more information in regards to stroke/TIA, please visit the website of the Community and Clinical Connections for Prevention and Health (CCCPH) Branch in the Chronic Disease and Injury Section of NC DPH at: [www.communityclinicalconnections.com/Data/index.html](http://www.communityclinicalconnections.com/Data/index.html).

WWW.NCDETECT.ORG

<sup>§</sup>For ED visits with more than one diagnosis code for stroke/TIA, the categorization based on the first-listed stroke/TIA diagnosis code.

**Population-based rates of ED visits with a diagnosis of stroke/TIA by NC county, 2012**



Rate of ED visits with a diagnosis of stroke/TIA per 100,000 person-years, categorized by quartile

- 207.5 - 428.0
- 428.1 - 600.4
- 600.5 - 752.9
- 753.0 - 1,477.1

• The five NC counties with the highest rates of ED visits with a diagnosis of stroke/TIA (visits per 100,000 person-years in parentheses) were Lenoir (1,477), Jones (1,468), Bladen (1,362), Chowan (1,210), and Northampton counties (1,103).



Source: Carolina Center for Health Informatics / <https://cchi.web.unc.edu> / Department of Emergency Medicine, University of North Carolina at Chapel Hill, 2014.  
 NC Division of Public Health / [www.publichealth.nc.gov](http://www.publichealth.nc.gov) / Injury Epidemiology & Surveillance Unit/ 919-707-5425  
 NC Disease Event Tracking and Epidemiologic Collection Tool (NC DETECT) / [www.ncdetect.org](http://www.ncdetect.org) / 919-843-2361  
 State of North Carolina / Department of Health and Human Services / [www.ncdhhs.gov](http://www.ncdhhs.gov)  
 NC DHHS is an equal opportunity employer and provider.