

# 70° Congresso Nazionale



**Noi, orgogliosamente  
Medici di Famiglia**  
fiducia innovazione  
competenza organizzazione

**6 - 11 ottobre 2014**

Forte Village  
Santa Margherita di Pula

#orgogliosamentemmg

## L'elettrocardiogramma nello studio di Medicina Generale

**Giugliano Roberto**

# *L'elettrocardiogramma*

**L'elettrocardiogramma (ECG) e' la registrazione e la riproduzione grafica dell'attivita' elettrica del cuore nelle varie fasi dell'attivita' cardiaca.**

# *L'elettrocardiogramma*

**Rappresenta la metodica più utilizzata per  
porre diagnosi di malattie cardiache**

## Waller—pioneer of electrocardiography

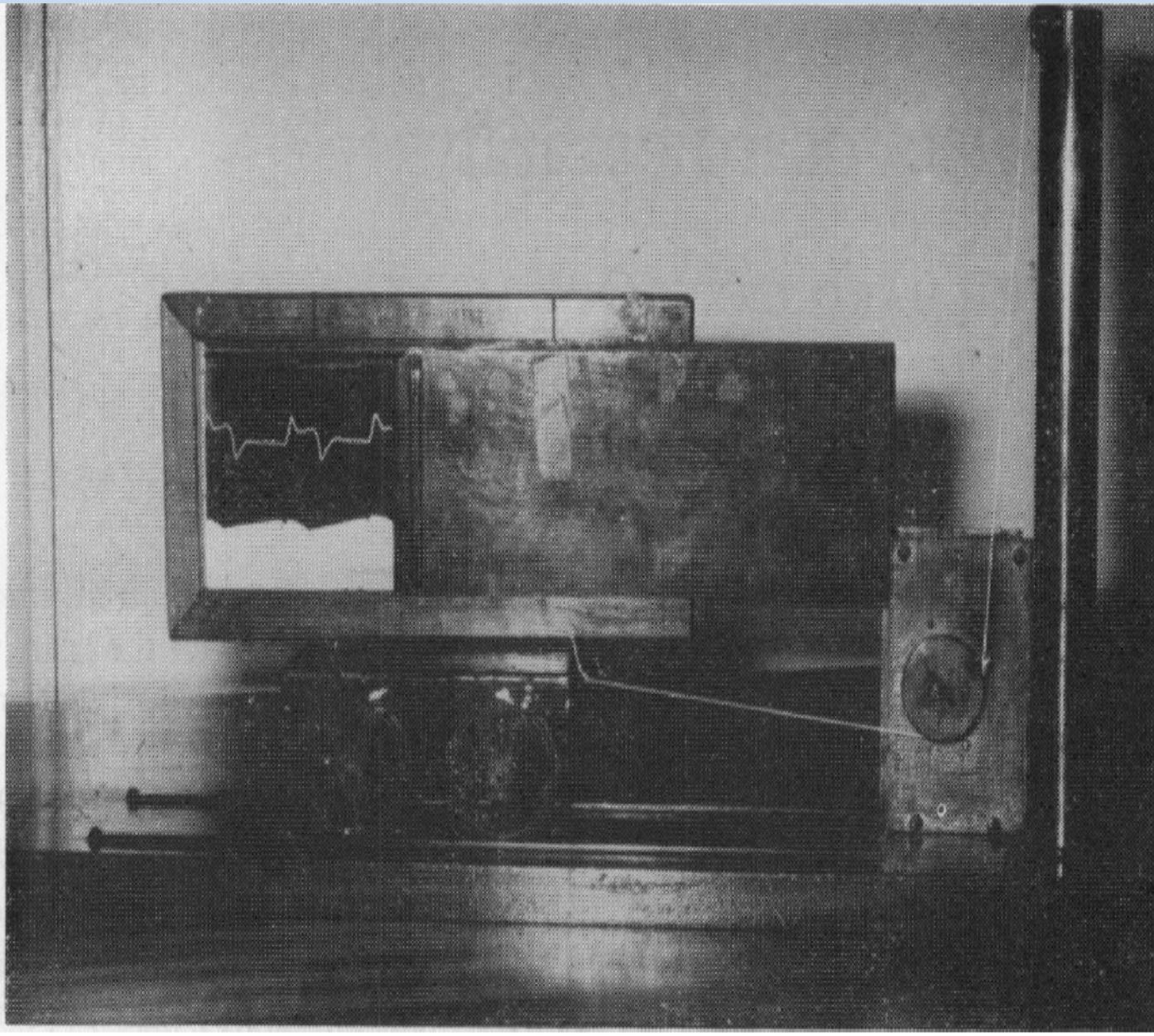
EDWIN BESTERMAN AND RICHARD CREESE

*From Waller Cardio Pulmonary Unit, St Mary's Hospital, Praed Street, London*

In the history of electrocardiography, Einthoven dominates the published papers, and the contribution of A. D. Waller, who first recorded the electrocardiogram in man with surface electrodes (Waller, 1887; Einthoven, 1912), is often ignored. This is an omission which ought to be remedied.



Fig. 4 *Waller and Jimmy*. *British Heart Journal*, 1979, 42, 61-64



# *L'elettrocardiogramma*

**Procedura sicura**  
**Facile da utilizzare**  
**Costi molto bassi**

*Task Force on Clinical Competence*  
*ACC, AHA e ACP*

**Usi clinici potenziali dell'ECG:**

**Malattie cardiache,**

**Anormalita' elettriche e metaboliche,**

**Monitoraggio di terapie farmacologiche,**

**Disturbi aritmici**

## PRACTICE GUIDELINES

# 2010 ACCF/AHA Guideline for Assessment of Cardiovascular Risk in Asymptomatic Adults

A Report of the American College of Cardiology Foundation/American Heart Association  
Task Force on Practice Guidelines

*Developed in Collaboration With the American Society of Echocardiography, American Society of Nuclear Cardiology,  
Society of Atherosclerosis Imaging and Prevention, Society for Cardiovascular Angiography and Interventions,  
Society of Cardiovascular Computed Tomography, and Society for Cardiovascular Magnetic Resonance*

## 2.5.1. Resting Electrocardiogram

### 2.5.1.1. RECOMMENDATIONS FOR RESTING ELECTROCARDIOGRAM

#### CLASS IIa

1. A resting electrocardiogram (ECG) is reasonable for cardiovascular risk assessment in asymptomatic adults with hypertension or diabetes (200,201). (Level of Evidence: C)

# *L'elettrocardiogramma*

**E' uno strumento diagnostico fondamentale e insostituibile ma che deve comunque essere sempre valutato nel contesto clinico e nella storia del paziente**

*L'elettrocardiogramma*

**Da chi?**

# *L'elettrocardiogramma*

**Non solo dai colleghi cardiologi ma anche  
da altri specialisti Medici di Medicina  
Generale compresi**

# *L'elettrocardiogramma*

**Ovvero da tutti quelli che hanno accumulato  
la competenza per farlo**

# *L'elettrocardiogramma*

**Le interpretazioni computerizzate del tracciato elettrocardiografico non sono attendibili senza la competenza del medico supervisore**

# *L'elettrocardiogramma*

Il training per l'interpretazione dell'ECG  
comincia nella Scuola di Medicina e  
continua nelle strutture della Medicina di  
Famiglia...

**In America**

# The gap between training and provision: a primary-care based ECG survey in North-East England

Information was gathered via a postal questionnaire.

It was sent to all general practices ( $n=395$ ) in the network area

A total of 119 practices responded

The practices that submitted questionnaires provide care for 798,814 patients, representing 31.75% of the network population.

# The gap between training and provision: a primary-care based ECG survey in North-East England

ECGs were recorded in 91 (76.5%) of the responding practices

Overall, **86%** of ECG recording practices **had a member of staff** who interpreted the ECGs and **20%** of practices used **secondary care** to report all or at least some of their ECGs, either through formal or informal systems. None of the practices used telemetry to facilitate interpretation.

*Andreas R Wolff et al. Br J Cardiol 2012;19:38–40 March 2012*

# The gap between training and provision: a primary-care based ECG survey in North-East England

Of practices who recorded their own ECGs, 52% had ECG machines with an interpretive function.

Over 65% of the practices that did not record ECGs used secondary care to interpret ECGs.

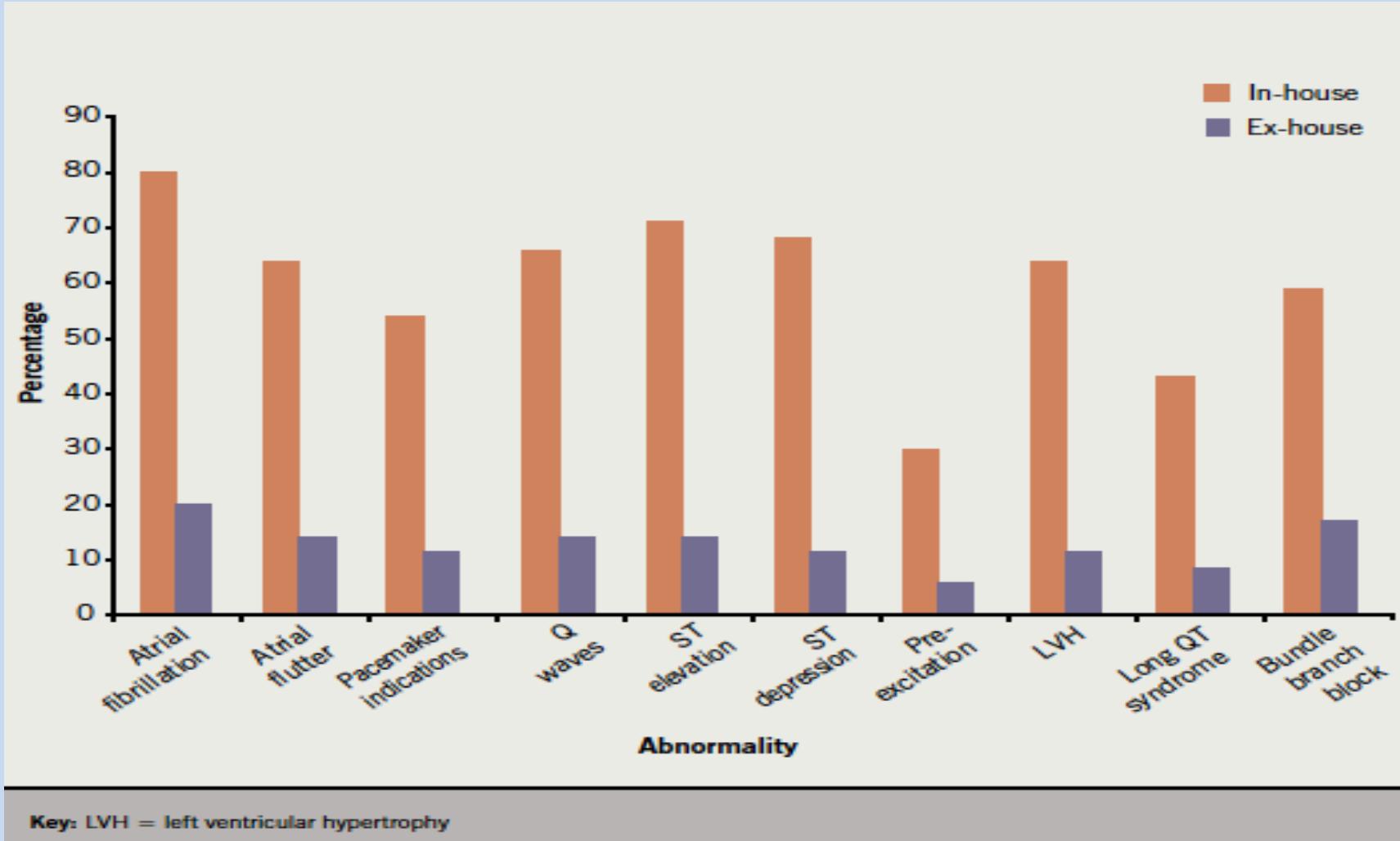
In addition, 11.5% of non-recording practices identified that they had a member of staff who interpreted ECGs.

## The gap between training and provision: a primary care based ECG survey in North East England

**Solo il 59% dei medici delle practices ha ricevuto un qualche training specifico.**

**Andreas R Wolf et al. The British Journal of Cardiology 2012;19:38-40**

Figure 2. Percentage of GPs and practice nurses who interpret ECGs confident to identify 10 ECG abnormalities. Practices recording their own ECGs depicted in orange and non-recording practices in purple



## The gap between training and provision: a primary care based ECG survey in North East England

**“A lack of training was clearly identified.”**

**Andreas R Wolf et al. The British Journal of Cardiology 2012;19:38-40**

# The gap between training and provision: a primary-care based ECG survey in North-East England

“ We believe the ECG is an easily performed valuable test and should be available to patients in a primary-care setting, but needs to be carried out by trained staff to achieve quality recordings.”

**Andreas R Wolf et al. The British Journal of Cardiology 2012;19:38-40**

# Conclusioni...provvise

- E' ben stabilito che l'interpretazione dell'ECG rientri nell'ambito della Medicina di Famiglia.
- Espandere le competenze del Medico di Medicina Generale in tale contesto può ottimizzare l'accesso della popolazione alle terapie delle malattie cardiovascolari

# **Conclusioni...provvisorie**

Percorsi di formazione continua e di verifica sul campo sono indispensabili al fine di assicurare ai pazienti le cure opportune e di elevata qualità